

**Membership Application Form
of
Shellac & Forest Products Export Promotion Council**

**The Executive Director,
Shellac & Forest Products Export Promotion Council,
“Vanijya Bhavan”
International Trade Facilitation Centre,
1/1, Wood Street, 2nd Flr,
Kolkata - 700 016.**

Sir,

Kindly enroll me/us as a Member of Shellac & Forest Products Export Promotion Council, Kolkata.

I/We have read the rules & regulations for the Membership of the Council and the Constitution and agree to abide by the same. I/We give below the particulars of the firm/company/association/individuals :

1. Name of the Firm/company/
association/individual :

2. Postal Address :
(A) Head Office :

(B) Factory, If any :

3. Year of Establishment :

4. Telephone No(s). :

5. Fax No(s). :

6. E-mail No. :

7. Financial year for which Membership
is desired :

8. Whether an Individual, Firm, Joint Stock,
Private Limited Company, Partnership concern
or Association of persons. :

9. Name & Address of Proprietor(s) / Partner(s) / Director(s) / Member(s) of Association with DIN No./Nos :
 10. Capital invested including Value of Plant & machineries etc., (copy of last audited and/or certified by Chartered Accountants, Balance Sheet to be attached) :
 11. If exporter, items exported :
 12. If Manufacturers, items manufactured or manufacturing :
 13. If Merchants, items dealing :
 14. Actual Production (Value) during the last year. In case of new company, anticipated production during the current year. :
 15. Actual exports (Value) during the last year. In case of new company anticipated export during the current year. In :
 16. What was the annual turnover during the last three years for items covered under this Council, duly certified by a Chartered Accountant. :
 17. Name of the products exported or to be exported :
 18. Category of Membership desired
 Exporter/Merchant Exporter/
 Manufacturer/Manufacturer-
 Exporter/Dealer/Grower etc. :
- (A) If Exporter
- i) Importer Exporter Code No. (Pl. attach self certified copy of the IEC No. issued by the Licensing Authority). :
- (B) If Manufacturer, S.S.I. Registration No. (Attach S.S.I. Certificate in original or one copy of Xerox) :
- (C) If Manufacturer-Exporter, comply (A) & (B)

19. PAN Number (Pl. attach Self certified copy) :
20. Vat Registration No. (If applicable) :
21. Membership of Chamber of Commerce or other Association :
22. Name of Bankers : (A confidential report from Bankers in sealed cover is to be attached) :
23. Name & address of the representatives in order of priority who shall exercise the right and privileges of Membership. :
24. Any other relevant details supporting admission as Member. :

I/We hereby declare that the particulars given above are true and correct to the best of my/our knowledge and belief. I/We hereby agree to furnish other information also, if and when the Council requires.

Signature of the Applicant :

Designation :

Office Seal :

Name of the Firm/ Company/Association. :

Place :

Address :

Date :

Enclosure :
