

(For Offline Application)

APPLICATION FORM

Assistance of Capital Investment Subsidy to micro Enterprise, Assistance for Interest Subsidy to MSMEs, Assistance for Reimbursement of CGTMSE Fees

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

Step-1: Common Incentive Form

Common Details		
1.	Name of the Enterprise As Per Registration	
2.	Type of activity	Manufacturing/service
3.	Status Of Enterprise(As per GR Dated 05/10/2022)	Micro / Small / Medium
4.	Constitution of the Enterprise	Proprietorship/ Partnership/ Company/ society/ Others
5.	Udyam /IEM/LOP Registration no. Category as per Registration Certificate.	No:..... Date: Micro/Small/Medium /Large
6.	Category Of Enterprise	New or existing
		If existing Expansion/Diversification
7.	Date of Production of Existing Enterprise	Date :
8.	Proposed Date of Production of NEW/Expansion /Diversification OR Actual Date of Commercial Production of NEW/Expansion /Diversification	Date: Date:
9.	Office Address with pin code No:	
8.	Factory Address with pin code No:	
9.	Tele No.: Office : Mobile:	
10.	Email Id : Alternative Email Id :	
Promotor Details		
12.	Promoter Type	Individual/other entity

13.	Name, Address & Contact details of the Promoters	
14.	Date of Birth of all promoters	
15.	PAN No. of all promoters	
16.	Gender of all promoters	Male/Female/Third Gender
17.	Category of all promoters	General/SC/ST
18.	Differently abled	Yes/no
19.	E-mail ID of all promoters :	
20.	Educational Qualifications of all promoters :	
21.	If promoters of the Enterprise are below 35 years. (as on the date of term loan sanction)	Date of Birth of the promoter Date: Term loan sanction date:
22.	If promoters of the Enterprise are Differently Abled (100% owned by Differently Abled)	Attach the proof for Differently Abled from Competent Authority
23.	If promoters of the Enterprise are Women Entrepreneurs (100% owned by woman)	YES/NO
24.	Total Equity(Share Holding pattern)	
	Authorized Person details	
25.	Name, Address	
26.	Contact details of the authorised person	Mo.No.:.....
27.	PAN No.	
28.	E-mail ID	
	Enterprise detail As per GoG GR	
29.	Investment and Turn Over Details as per GoG GR (Give details separately for each units)	
	Name of the unit/units	

	Gross Investment in Plant and Machinery or Equipment		
	Annual Turnover		
	PAN No		
	GST Registration No.		
30.	Enterprise located in Taluka Category Taluka Name:		I/II/III/Municipal corporation area _____
31.	Whether Micro / Small unit is situated in		Own/ Rental / Leased premises
Note: Below scheme is applicable only to Manufacturing – Micro & Small enterprise.			
32.	For Reimbursement of CGTMSE Fees		
	1.	Term Loan amount covered under CGTMSE:	RS.
	2.	Guarantee fee & Annual charges paid to CGTMSE:	RS.
	3.	CGPAN No:	
	4.	Expiry date	

Step-2 : Specific Form for Interest subsidy, Capital subsidy and CGTMSE fees Reimbursement :

33.	Category	New or existing or Existing applying as new																																																																						
		If Existing Expansion/Diversification																																																																						
34.	Service activity as per Annexure- A of GR dated 05/10/2022	Name of the activity																																																																						
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	9	Technology,Design,Patent		
	10	Other Charges of P&M		
	Total			
	Is the investment made in expansion 50% or more ?			
37.	Utilisation of existing installed capacity in Preceding Three financial year		1) FY 2) FY 3) FY	
	Percentage Increases in Installed capacity of Existing Product			
38.	Manufacturing Item Detail (Need To Submit Separate Detail for each Product)			
	Product sector			
	NIC Code			
	Name of the Product			
	Actual item Produce			
	HSN Code			
	Annual Production Capacity			
	Capacity of Product in terms of units			
39.	Land Area Detail (Separately for each unit)			
	Project Name			
	Address			
	Country			
	State			
	District			
	Taluka			
	Village			
	Pin Code			
	Taluka category			
	Land Area (sq. Mtr)			
40.	Start Up Details (if Applicable)		Yes/No	
	Registration Number			
	Registration date			
	Registration authority			

41.	Name and Address of the bank/Financial Institution separately.				
	E-mail ID of the Bank				
	Contact Number of Bank Branch				
	Amount of first loan sanctioned and date		Rs.....Lakhs Date:		
	Date of First Disbursement of Term Loan		Date:		
	Interest Rate of Term Loan				
	Term Loan Account No.				
	IFSC code No.				
	Branch Name				
	Branch Code No.				
42.	GPCB approval for CTE/CCA (if applicable)		CTE for new CCA/ CTO for expansion No..... Date: Valid up to Date:		
43.	Employment Details for Existing Enterprise: -				
	Sr.No	Particulars	Total	Local	% of Local Employment
	1	Manager/Supervisor			
	2	Workers			
	Total				
	Employment Details for proposed project:-				
	Sr.No	Particulars	Total	Local	% of Local Employment
	1	Manager/Supervisor			
	2	Workers			
	Total				
44.	Employment Details for service activity (No. of permanent employees)				
45.	Details of any other financial assistance granted by GOG/GOI		YES/NO If, yes please attach details in separate sheet.		
46.	I/We hereby opt for date of eligibility for Interest subsidy from the Date of production [] Dt. DD/MM/YYYY OR Date of first disbursement [] Dt. DD/MM/YYYY				
47.	Declaration: I hereby declare that the information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I am abide with the terms, condition, eligibility criteria and parameters specified in the Government Resolution , Guideline and as amended time to time, under the Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit the application and related details with relevant documents.				

Undertaking

I/We undertake and declare to comply with the terms, conditions, eligibility, particulars and parameters of the Resolution No.MIS-102022-1271(1)-I(ch)Dated: 05/10/2022 , guideline and as amended, applicable resolutions under the Aatmanirbhar Gujarat Scheme for assistance to MSMEs of the government of Gujarat and Guideline for GR No. MIS-102022-1271(1)-I(ch) Dated: 05/10/2022.

I/We applying for Capital Subsidy and Interest Subsidy/CGTMSE fees Assistance under the scheme will observe the following conditions and if I/We will Violate these conditions than

I/We shall be liable to pay back the assistance paid and the same will be recovered as arrears of land revenue or in any other appropriate manner Govt. May deem fit along with interest at the rate of 18% per annum from date of first availment of such incentive and also, I/We give consent to the department that they will take action against us as per prevailing laws.

1. I/We will have to observe pollution control measures as prescribed by GPCB or other competent authority.
2. My/Our enterprise will remain in production for at least 7 years from the commencement of commercial production.
3. I/We will furnish the information regarding the production, sales, turnover, employment etc. to the DIC annually before the end of September.
4. I/We obtain NOC from Gram Panchayat /Municipal Corporation for doing business, if applicable.
5. I/We will employ at least 85% of the local employment out of the total employment provided by the unit and at least 60% of the local employment in supervisory and managerial employment out of the total employment provided by the unit.
6. I/We am/have not Applied/Granted any subsidy from any other scheme of the State government or from any other State government agency.

Date:

Signature of the Authorised Person

Place:

Name of the Authorised Person:

Designation of the Authorised person:

Seal of the Enterprise:

**Application form for Provisional Eligibility Certificate under
Aatmanirbhar Gujarat Scheme for Assistance to MSMEs**

(Ref. Government Resolution No. MIS-102022-1271(1)-I dated.05/10/2022)

1.	Details of Enterprise	
1.1	Name of the Enterprise	
1.2	Constitution of Enterprise (Public Ltd./ Pvt. Ltd./ Partnership firm / Co-operative society / proprietorship / Trust)	
1.3	Office Address: Tel. No. E-mail ID	
1.4	Name of Promoters/ Director Tel. No. Mobile No. E-mail ID	
1.5	Details of Authorized Person: Name Tel. no. Mobile No. E-mail ID	
1.6	Location of the Project Survey No./ Plot No. Village Taluka District	
1.7	Category of Taluka of the project location	Cat I / Cat II / Cat III
1.8	Project Type	New/Existing applying as a new/Expansion / Diversification
1.9	Udyam Registration/IEM / IL / LOP No. & Date	
1.10	Category of Enterprise as per G.R. dated :05/10/2022	Micro/Small/Medium
1.11	Valid Gujarat Pollution Control Board NOC/consent (If applicable)	No. Date: Valid up to Date:
1.12	GST Registration No. and Date (for existing enterprise)	
1.13	GST Registration No. and Date (for Expansion/ Diversification/ existing applying as a new enterprise) (if	

	applicable)																			
2.	Project Details																			
2.1	Name of Manufacturing Sector																			
2.2	Date of commencement of Commercial Production																			
2.3	Date of Initiation of Expansion or Diversification (if applicable)																			
2.4	Whether Commercial Production of Expansion/ Diversification/Existing applying as New Project Commenced?	Yes / No																		
	If Yes, Actual Date of Commencement of Commercial Production If No, Proposed Date of Commencement of Commercial Production																			
2.5	Existing Manufacturing Item/s:																			
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2.6	Manufacturing Item/s for New/Expansion/Diversification/Existing Applying as a new (Note – In case of Expansion, please mention only proposed additional installed capacity obtained by Expansion Project)																			
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2.7	Project Cost for New Enterprise (Rs. In Lacs) <table border="1"> <tr> <th>Sr. No</th><th>Assets</th><th>For New Project or applying as a new</th></tr> <tr> <td>1.</td><td>Land</td><td></td></tr> <tr> <td>2.</td><td>Building</td><td></td></tr> <tr> <td>3.</td><td>Other Construction (Compound Wall, Internal Roads, Bore well, Water tank etc.)</td><td></td></tr> <tr> <td>4.</td><td>Plant & Machinery</td><td></td></tr> <tr> <td>5.</td><td>Other Charges for Plant and Machinery</td><td></td></tr> </table>		Sr. No	Assets	For New Project or applying as a new	1.	Land		2.	Building		3.	Other Construction (Compound Wall, Internal Roads, Bore well, Water tank etc.)		4.	Plant & Machinery		5.	Other Charges for Plant and Machinery	
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6.	Technology, Design and Drawings, Patents	
*Sub Total - 1		
7.	Project related Infrastructure (As defined in Para 1.12.D of GR)	
Sub Total - 2		
8.	Preliminary and Pre-operative Expenses	
9.	Working Capital	
10.	Other - _____	
Sub Total - 3		
Grand Total		

Project Cost (Expansion/Diversification)

Sr. No	Assets	Existing Gross fixed capital investment as on date..... (Before the date of initiation of Expansion / Diversification)	Project Cost for Expansion / Diversification
11.	Land		
12.	Building		
13.	Other Construction (Compound Wall, Internal Roads, Bore well, Water tank etc.)		
14.	Plant & Machinery		
15.	Other Charges for Plant and Machinery		
16.	Technology, Design and Drawings, Patents		
*Sub Total - 1			
17.	Project related Infrastructure (As defined in Para 1.12.D of GR)		
Sub Total - 2			
18.	Preliminary and Pre-operative Expenses		
19.	Working Capital		
20.	Other - _____		
Sub Total - 3			
Grand Total			

***<<The Criteria of Expansion will be calculated on basis of subtotal – 1 only>>**

2.8	Means of Finance:			(Rs. in Lacs)	
	Sr. No	Particulars	Amount		
	1.	Term Loan			
	2.	Promoters' Contribution			
	3.	Internal Accruals			
	4.	Others – Please Specify _____			
	Total				
2.9	Installed Capacity in case of Expansion:				
	Name of the Product	Existing Installed Capacity	Proposed Additional Installed Capacity for Expansion Project	Total Installed Capacity	
2.10	Details of Utilization of Existing Installed Capacity of previous three years from the year in which expansion project initiated:				
	Sr No	Year	Existing Installed Capacity	Actual Production	% of Actual production to Installed capacity
	1				
	2				
	3				
2.11	Whether the Term Loan for the Proposed Project to Enterprise has been sanctioned?			Yes / No	
	If Yes, Whether the disbursement of Term Loan incurred?			Yes / No	
	If Yes,				
	1.	Name of Bank and Branch Address, E-mail ID & Contact No.			
	2.	Term Loan Account Number			
	3.	IFSC Code			
	4.	Date of Sanction of Term Loan			
	5.	Term Loan Sanctioned (Rs. In Lac)			
	6.	Date of First Disbursement of Term Loan			
	7.	Amount of First Disbursement (Rs. In Lac)			
<p><u>Note</u> –</p> <p>The details to be filled for only First Disbursed Term Loan Account, if Term Loan is disbursed through multiple bank accounts.</p>					

2.12	Whether the applicant/Enterprise has plan to carry out trading activity or any service activity apart from Manufacturing?	Yes / No																																								
	If Yes, Whether the applicant/Enterprise has obtained / applied for Separate GST Registration for manufacturing of Eligible Products only?	Yes / No																																								
2.13	<p>Details of Employment</p> <p style="text-align: center;"><u>Existing Employment</u></p> <table border="1"> <thead> <tr> <th>Category</th><th>Domicile Employees</th><th>Non Domicile Employees</th><th>Total</th><th>% of Local Employment</th></tr> </thead> <tbody> <tr> <td>Manager/ Supervisor</td><td></td><td></td><td></td><td></td></tr> <tr> <td>Worker</td><td></td><td></td><td></td><td></td></tr> <tr> <td>Total</td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p style="text-align: center;"><u>Proposed Employment</u></p> <table border="1"> <thead> <tr> <th>Category</th><th>Domicile Employees</th><th>Non Domicile Employees</th><th>Total</th><th>% of Local Employment</th></tr> </thead> <tbody> <tr> <td>Manager/ Supervisor</td><td></td><td></td><td></td><td></td></tr> <tr> <td>Worker</td><td></td><td></td><td></td><td></td></tr> <tr> <td>Total</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		Category	Domicile Employees	Non Domicile Employees	Total	% of Local Employment	Manager/ Supervisor					Worker					Total					Category	Domicile Employees	Non Domicile Employees	Total	% of Local Employment	Manager/ Supervisor					Worker					Total				
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<p>Declaration:</p> <p>I hereby declare that the information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I/We hereby declare that I/ We have read the Government Resolutions MIS-102022-1271(1)-I dated.05/10/2022 and guideline as amended from time to time before submission of this application for registration. I/ We undertake to comply all the conditions stipulated therein to avail incentives mentioned in the resolution.</p> <p>I/We also hereby state that I/We have not availed any incentive under any other scheme of Government of Gujarat for the project for which application is submitted.</p> <p>I/We hereby declare that the details given above are true and correct, if any of the information is found to be incorrect and not fulfilling the provisions laid down in the Government Resolution/guideline, registration/incentives are liable to be cancelled.</p>																																										

Place:

Date:

Company Seal

Applicant's signature

Name:

Designation:

**Chartered Accountant Certificate
For
Existing Gross Fixed Investment**

(In case of Expansion / Diversification)
(On Letter Head)

This is to certify that the project of M/s._____ at location (Address of Project site) and has commenced / proposed to be commencing commercial production on <date>.

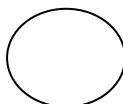
It is hereby certified that M/s had incurred following fixed assets at its project site for manufacturing of items as on Date

(Rs. In Lacs)

Sr. No	Assets	Existing Gross fixed capital investment as on date (Before the date of initiation of Expansion)
1.	Land	
2.	Building	
3.	Other Construction (Compound Wall, Internal Roads, Bore well, Water tank etc.)	
4.	Plant & Machinery	
5.	Other Charges for Plant and Machinery	
6.	Technology, Design and Drawings, Patents	
Grand Total		

We have checked the books of accounts, invoices, balance sheets etc. of the enterprise and the information is verified and certified true. We certify that all the aforesaid items have been duly paid and no credit is raised.

Place -



Stamp and Sign of
Chartered Accountant

Date –

UDIN –

**Chartered Engineer Certificate
For
Utilization of Existing Installed Capacity**

(In case of Expansion / Diversification)
(On Letter Head)

This is to certify that M/s. located at (Address of Project site) and manufacturing products.

We have visited their Manufacturing Facility for verification and examination of Machine Manufacturing and Plant Output Capacity. After carefully inspecting the plant and studying the documents as per our requirement, we certify the Installed Capacity and Actual Production for last three financial years are as below –

Sr. No	Year	Existing Installed Capacity	Actual Production	% of Actual Production to Installed Capacity
1				
2				
3				

Place -

Date -

Stamp and Sign of
Chartered Engineer

Undertaking

I _____ Proprietor / Partner /
Director of M/s. _____ project
located at - _____
(Address) hereby solemnly affirm and declare as under with respect to our
application for Registration under Aatmanirbhar Gujarat Scheme for Assistance
to Large Industries and Thrust Sector,

1. I/We have read the Government Resolutions MIS-102022-1271(1)-I dated.05/10/2022, Guideline and as amended from time to time before submission of this application for registration. I/ We undertake to comply all the conditions stipulated therein to avail incentives mentioned in the resolution.
2. I/We also hereby state that I/We have not applied under any other incentive scheme of state government or any agency of state government for same assets for which the application is submitted.
3. I/We also hereby state that there is no outstanding dues / taxes / cess / charges / fees and its interest and penalty, pending for payment with State Government, boards and corporation or any agency of State Government.

I/We hereby declare that the details given above are true and correct, if any, of the information shall found to be incorrect and not according to the provisions laid down in the Government Resolution/Guideline, the registration certificated and/or incentives are liable to be cancelled.

For,
M/s. _____

Signature
Name
Designation
Company stamp and seal

APPLICATION FORM

Application for Assistance for Quality Certification

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No.: Factory Address with pin code No.: Tele No.: Fax No.: Email Id.:	
3.	Constitution of the Enterprise	
4.	Name, address & contact details of the Promoters	
5.	Name, designation & contact details of the Authorized Person	
6.	Category of Enterprise (Micro, Small, Medium) As per GR dated 05/10/2022	
7.	Category of Enterprise (SC/ST/General)	
8.	Udyam Reg. No./IEM No. / LOI etc	
	7.1 Manufacturing item	
	7.2 Annual Production Capacity	
	7.3 Investment in P&M:	
	7.4 Date of Production:	
9.	BIS/WHO/GMP/Hallmark Certification and other National/ International certifications (excluding ISO Certificate)	
	1. Name and address of Certification agency.	
	2. Name of Quality certification	
	3. Name of Product/Item for which QC taken	
	4. Certificate No. & Date	
	5. Is this certificate mandatory As part of statutory provision	
	6. Certification Agency is accredited/ notified to provide this Certificate	
10.	Details of cost incurred, along with CA certified statement	

11.	Details of any other financial assistance applied/granted by GOG/GOI If Yes. Pls give details	
12.	Bank Details for assistance	
	Bank Name	
	Bank Account Name	
	Bank Account No.	
	ISFC Code No.	
	Branch Code No./Branch name	
	PAN Card No the Enterprise/Applicants	
13.	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended from time to time, under the Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline as amended, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for Quality Certification scheme will observe the following conditions and if I/We will violate these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. I/We are totally aware that our enterprise will not be eligible for assistance, if any certification referred in the GR/Guideline, are required as a part of statutory provision.
3. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.
4. I/We are totally aware that expenditure incurred for renewal of certification shall not be eligible for assistance.

Date:

Place:

Signature of the Authorized Person:

Name of the Authorized person:

Designation of the Authorized person:

Seal of the Enterprise:

APPLICATION FORM

Assistance for Financial Support to MSMEs in ZED Certification

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No.: Factory Address with pin code No.: Tele No.: Fax No.: Email Id.:	
3.	Constitution of the Enterprise	
4.	Category of Enterprise(General/SC/ST)	
	Category of Enterprise(New/Existing)	
5.	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
6.	Pan Card of Enterprise	
7.	Pan Card of Promoters/Directors/partners and authorized signatory	
8.	Name, address & contact details of the Promoters/Directors/Partners	
9	Name, designation & contact details of the Authorized Person	
10	Udyam/IEM/LOI Reg. No	
	1 Manufacturing item	
	2 Annual Production Capacity	
	3 Date of Commencement of commercial Production(DoCP)	
11	For ZED Certifications:	
	1) Certificate No. & Date	
	2) Rating Agency :	
	3) Assistance applied/granted/received from Government of India for ZED Certification.	
	4) Certificate Type(Bronze/Silver/Gold)	
12	Details of cost incurred, along with CA certified statement (Annexure)	
13	Details of any other financial assistance granted by GOG/GOI If Yes. Pls give details	

14	Bank Details for assistance	
	Bank Name	
	Bank Account Name	
	Bank Account No.	
	ISFC Code No.	
	Branch Code No./Branch Name	
15	GST No. of the Enterprise.(if applicable)	
16	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as amended, under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

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UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended from time to time, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Financial Support to MSMEs in ZED Certification scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.
3. I/We are totally aware that expenditure incurred for renewal of certification shall not be eligible for assistance.

Date.
Place.

Signature of the Authorized Person
Name of the Authorized person:
Designation of the Authorized person:
Seal of the Enterprise

(For Offline Application)

APPLICATION FORM

Application Form for Assistance in implementation of Information and Communication Technology (ICT)

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No.: Factory Address with pin code No.: Tele No.: Fax No.: Email Id.:	
3.	Constitution of the Enterprise(New/Existing)	
4.	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
5.	Category of Enterprise (General/Sc/ST)	
6.	Name, address & contact details of the Promoters/Directors/Partners.	
7.	Name, designation & contact details of the Authorized Person	
8.	Udyam/IEM/LOI Reg. No	
	1 Manufacturing product	
	2 Date of Commencement of commercial Production(DoCP)	
9.	PAN details of Enterprise, promoters/Directors/Partners and authorized signatory	
10.	ICT System/Equipment details :	
	1) Name and address of ICT System equipment/ hardware suppliers	
	2) Name of Cloud Provider (if applicable)	
	3) List of equipment /hardware with cost	
	4) Date of installation of ICT system.	
	5) Brief description of the cloud/ ICT system installed.	
11.	Details of cost incurred, along with CA certified statement (Annexure)	

12.	Details of any other financial assistance applied/granted by GOG/GOI on same component. If Yes. Pls give details	
13.	Bank Name	
	Bank account name	
	Bank Account No.	
	ISFC Code No.	
	Branch Code No.	
14.	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended, under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended from time to time, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance in implementation of Information and Communication Technology (ICT) scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline/ these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.

Date.
Place.

Signature of the Authorized Person
 Name of the Authorized person:
 Designation of the Authorized person:
 Seal of the Enterprise

APPLICATION FORM

Application Form for Assistance for Technology Acquisition

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise:	
2.	Office Address with pin code No: Factory Address with pin code No: Tele No.: (M) Fax No.: Email Id :	
3.	Constitution of the Enterprise:	
	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
4.	GST No.(If Applicable)	
5.	Name, Address & Contact details of the partners / directors / promoters (With category General / OBC / SC / ST)	
6.	Name, Designation & Contact details of the Authorized Person:	
7.	Pan No of Enterprise, Promoters, Authorized Person:	
8.	Udyam/IEM/LOI Reg. No	:
	Manufacturing Item Name:	
	Whether New or Existing?:	
	Annual Production Capacity:	
	Annual Turnover:	
	Date of Commencement of commercial Production(DoCP)	
9.	Brief note on technology to be acquired by Enterprise and how it will be helpful to enterprise (with technical specification).:	
10.	Details of Institution, from where technology is acquired with MOU details.:	
11.	Patent Grant Details Patent No/Country.: Patent grant date. :	
12.	Royalty percentage /charges to be paid (for first two years as per agreement): (If Applicable)	
13.	Brief Benefits/ Outcome to be obtained by the enterprise.:	
14.	Term loan details for technology acquisition (if applicable)	
16.	Details of any other financial assistance applied/ granted by GOG/GOI for technology acquisition	

17	Bank Details for assistance	
	Bank Name	
	Bank Account Name	
	Bank Account No.	
	ISFC Code No.	
	Branch Code No./Branch Name	
18.	Declaration: <ul style="list-style-type: none"> I hereby declare that the information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as amended, under the Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit the application and related details with relevant documents. 	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended from time to time, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for Technology Acquisition scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline/ these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.
3. I/We are totally aware that expenditure incurred for renewal of certification shall not be eligible for assistance.

Date.
Place.

Signature of the Authorized Person
Name of the Authorized person:
Designation of the Authorized person: Seal of the Enterprise

APPLICATION
FORM

Application Form for Assistance for Patent Registration
(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Applicant/Individual / Enterprise	
2.	Office Address with Pin code No: Factory Address with pin code No: Cell No. : Email Id :	
3.	Constitution of the Legal Entity (Individual/Proprietorship/ partnership/ company/ society/ others)	
4.	Category of Enterprise (MICRO/SMALL/MEDIUM) (As per GR Dated 05/10/2022)	
5	Category of Enterprise(New/Existing)	
6.	Name, address & contact details of the Promoters /Directors/partners/ Applicant	
7.	Name, designation, Address & contact details of the Authorized Person of the legal entity	
8.	PAN Card No. of Enterprise, Promoters/Directors/Partners and authorized signatory	
9	Udyam/IEM/LOI Reg. No (not in case of individual)	
10	Date of Commencement of commercial Production(DoCP) (not in case of individual)	
11	Type of patent applied/obtained (National / International)	
12.	Date of filling application to patent office	
13	Title of Patent	
	Publication Date of National patent application (attach proof of patent office journal)	
	Publication Date of International patent application (attach supporting documents)	

	Country wise publication Date(attach supporting documents)	
14	Brief description of product/ process for which patent is applied	
15	Application number of National Application	
	Application number of International Application	
16	Name and address of Patent Attorney	
	Registration No of Patent Attorney	
	Registration valid up to Date:	
17	Total expenditure Claimed (as per Annexure-1)	
18	Name of the Bank	
	Bank Account Name	
	Bank Account No.	
	IFSC Code No.	
	Branch Name/Code	
19	Details of any other financial assistance applied/granted by GOG/GOI (If yes, Provide details)	
20	Other information if any	
21	<p>Declaration:</p> <p>I hereby declare that the information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, and eligibility criteria's and parameters specified in the Government Resolutions, Guideline and as amended under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit the application and related details with relevant documents.</p>	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria's, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended, applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs.

I/We, applying for Assistance for Patent Registration scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

- I/Our Assistance under the scheme will be disbursed to us after the publication / notification of the patent.
- I/We have submitted the application within one year from the date of publication/ Notification of the patent.
- I/We are totally aware that the application submitted after one year from the date of publication / notification will not be eligible for assistance.

Date:
Place:

Name and Signature of the Authorized Person
Seal of the Enterprise

APPLICATION FORM

Assistance for saving in consumption of Energy and Water (For Offline Application)

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No: Factory Address with pin code No: Tele No. : (M) Fax No. : Email ID :	
3.	Constitution of the Enterprise:	
4.	Category of the Enterprise(New/Existing):	
5.	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
6.	Category of Enterprise (General / SC/ST)	
7.	Name, address & contact details of the Promoters	
8.	Name, designation & contact details of the Authorized Person	
9.	PAN no of Enterprise	
10.	PAN numbers of Promoters/Directors/partners and authorized signatory	
11.	Udyam/IEM/LOI Reg. No	
	1 Manufacturing item	
	2 Annual Production Capacity	
	3 Investment in Plant and Machineries (As per GR)	
	4 Date of Commencement of commercial Production(DoCP)	
12	Name and address of auditing institution/consultant/Auditor:	
13	Date of Issue of audit Report	
14	Details of recognition/ accreditation received (submit documentary proof)	
15	Name of equipment's used for Energy /Water Conservation and cost for each equipment	

16	Brief of suggestions/ recommendation of the audit study (submit a copy of Audit study)	
17	Results/ benefits after implementation of energy/ water saving equipment, i.e. decrease in consumption of water/ electricity in Nos./ Units/Litters/etc.	
18	Details of Audit Expense/Equipment expense.(CA certified statement in case of equipment)	
19.	Details of any other financial assistance applied/granted by GOG/GOI If Yes, Provide details	
20	Bank Details for assistance	
	Bank Name	
	Bank Account Name	
	Bank Account No.	
	IFSC Code No.	
	Branch Code No./Branch Name	
21	GPCB approval for CCE/CTE/CCA, (if applicable)	
22	<p>Declaration:</p> <p>I hereby declare that the information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as amended from time to time under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit the application and related details with relevant documents.</p>	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022-1271(1)-I(CH) Dated:05/10/2022, Guideline and as amended, from time to time under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for saving in consumption of Energy and Water scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline/these conditions then I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. I/We are totally aware that our enterprise will not be eligible for assistance, if any certification referred in the GR, are required as a part of statutory provision.
3. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.
4. I/We are totally aware that expenditure incurred for renewal of certificate shall not be eligible for assistance.
5. I/WE confirm that energy/water audit conducted by a recognized institution / consultant.
6. I/We confirm that saving in energy/water minimum by 10% of average monthly consumption of previous 12 months before audit.

Date:

Place:

Signature of the Authorized Person

Name of the Authorised person:

Designation of the Authorised person:

Seal of the Enterprise

Application Form

Assistance for raising Capital through SME Exchange

_(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1	Name and address of Enterprise :	
	(i) Name of Enterprise:	
	(ii) Location Address of Enterprise:	
	(iii) Telephone No. / Mobile No.:	
	(iv) E-Mail ID:	
2	Constitution of Enterprise(New/Existing) :	
3	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
4.	Category of Enterprise (General / SC/ST)	
5	Authorized person/Director Details :	
	(i) Name :	
	(ii) Telephone No. / Mobile No.:	
	(iii) Email ID :	
	(iv) Address :	
6	Registered Office Address.	
	Location of Manufacturing Plant/units/Service outlet in Gujarat	
7	Udyam/IEM/LOI Reg. No and Date.	
	Date of Commencement of commercial Production(DoCP)	
8	Details of registration with Exchange:	
	1) Date of Listing in SME Exchange (NSE/BSE/others):	
	2) Date of Capital Issue Published:	
	3) Issue open Date :	
	4) Issue Close Date :	
9	GST Registration No.:	
10	Item of Production/service:	
11	Name & Address of Registrar of Capital Issue of the Enterprise:	
12	Name & Address of merchant Banker of Capital Issue of the Enterprise:	
13	Detail of capital issued arranged:	
	(I) Total Amount of Equity Capital for which Capital Issue Arranged:	
	(II) Amount of Equity Capital raised out of that.:	

14	Gross Investment in P/M as on listing date value	
15	Head wise details of Expenditure incurred for raising of fund through SME Exchange :	
	Paid Expenditure:	
	Un Paid Expenditure:	
	Total:	
16	Is the project in commercial production after the listing? (i) If Yes Date of Commercial production after listing Date. (ii) IF no than Expected date of commencement of Production.	
17	GPCB approval for CCA (if applicable):	
18	Whether any other assistance obtained in any other scheme of Government of Gujarat / GOI / Others. for the same component?	
19	Bank details of Enterprise :	
	Name & Address of Bank:	
	Bank A/c Name:	
	Bank A/c Number:	
	IFSC Code:	
	Branch Name/Code:	
	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended, under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended from time to time, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for raising Capital through SME Exchange scheme will observe the following conditions and if I/We will violate any condition of GR/ Guideline these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.

Date.
Place.

Signature of the Authorized Person
Name of the Authorized person:
Designation of the Authorized person:
Seal of the Enterprise

APPLICATION FORM

Assistance for Power Connection Charges

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No.: Factory Address with pin code No.:Tele No.: Fax No.: Email Id.:	
3.	Constitution of the Enterprise	
4.	Category of the Enterprise(General/SC/ST):	
5.	Category of Enterprise(New/Existing)	
6.	Category of the Enterprise(Micro, Small and Medium) (As per GR Dated 05/10/2022)	
7.	Name, address , contact details of the Promoter	
8.	Name, designation & contact details of the Authorized Person	
9.	PAN details of Enterprise	
10.	PAN details of promoters and Authorized Signatory	
11	Udyam/IEM/LOI Reg. No	
	1 Manufacturing Product:	
	2 Investment in P&M:	
	3 Date of Commencement of commercial Production(DoCP)	
11	(A) Unit details :	
	1) Location: GIDC/Approved Industrial Park area/outside GIDC or outside of Ind. Park approved under industrial policy.	
	2) Connection: New/additional Load/ Shifting of Connection or line:	
	(B) Motive Power Details:	
	1) Name of Power supplying Co. & Consumer No. whether HT or LT connection	
	(2) Sanctioned Load HP/KW:	
	(3) Connected load HP/KW:	

	(4) Service Line Charges: Bill No., Date, Amount of bill, date of Payment	
	(5) Power Connection Charges: Bill No.: Date Amount of bill, Date of Payment	
12.	Details of any other financial assistance applied/granted by GOG/GOI If Yes. Pls give details	
13.	Bank Details for assistance	
	Bank name	
	Bank Account name	
	Bank Account No.	
	IFSC Code No.	
	Branch Code No/Branch name.	
14	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended from time to time, under the Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022, Guideline and as amended from time to time under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for Power Connection Charges scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.

Date:

Place:

Signature of the Authorized Person

Name of the Authorized person:

Designation of the Authorized person:

Seal of the Enterprise

APPLICATION FORM

Assistance in Rent to Micro & Small Enterprises (MSEs)

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise		
2.	Office Address with pin code No.: Unit Address with pin code No.: Tele No.: Fax No.: Email Id.:		
3.	Constitution of the Enterprise		
4.	Category of Enterprise (As per GR Dated 05/10/2022)		MICRO/SMALL/MEDIUM
5.	Category of Enterprise		GEN/SC/ST
	Category of Enterprise(New/Existing)		
6.	Name, address & contact details of the Promoters		
7.	PAN Card no. of Enterprise, promoters/Directors/Partners and authorized signatory		
8.	Name, designation & contact details of the Authorized Person		
9.	Udyam/IEM/LOI Reg. No		
	1	Manufacturing Product:	
	2	Investment in P&M:	
	3	Date of Commencement of commercial Production(DoCP)	
10	Property/Premises/Shed Details		
	(A) Owners details :		
	1) Name of Owners:		
	2) Address Details of owner :		
	3) Contact no.:		
	4)PAN/Aadhar No.		
	(B) Rent Details:		
	1) Rent agreement/deed date.:		
	(2) Period of rent agreement/deed:		
	(3) Period of Rent:		
	(4) Monthly amount of Rent:		
	5) Monthly amount of Rent excluding		

	GST	
	6) Is the rented building having industrial power connection?	Yes/No
	If yes (i) Meter No. (ii) Distribution company name	
	If No Have you applied for power connection? Application date.: Distribution company name	
11.	Details of any other financial assistance applied/granted by GOG/GOI If Yes. Pls give details	
12.	Bank Name	
	Bank Account Name	
	Bank Account No.	
	IFSC Code No.	
	Branch Code No.	
	Branch Name/code	
13.	Other Information (if any)	
14.	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended from time to time, under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

UNDERTAKING

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022 as amended, Guideline and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for rent assistance scheme will observe the following conditions and if I/We will violate any conditions of GR /Guideline/these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.
3. We have taken all required statutory approvals/NOC/permission.

Date.

Place.

Signature of the Authorized Person

Name of the Authorized person:

Designation of the Authorized person:

Seal of the Enterprise

APPLICATION FORM

Application Form for Assistance for Enterprise Resource Planning (ERP Assistance)

(Aatmanirbhar Gujarat Scheme for assistance to MSMEs)

(Government Resolution No. MIS-102022- 1271(1)- I(CH) Dated: 05/10/2022)

1.	Name of the Enterprise	
2.	Office Address with pin code No.: Enterprise/Factory Address with pin code No.: Tele No.: Fax No.: Email Id.:	
3.	Constitution of the Enterprise	
4.	Category of Enterprise (General / SC/ST)	
5.	Category of Enterprise (New/Existing)	
6.	Category of Enterprise (Micro, Small and Medium) (As per GR Dated 05/10/2022)	
7.	Name, address & contact details of the Promoter/Directors/Partners	
8.	Name, designation & contact details of the Authorized Person	
9.	PAN card number of the Enterprise	
10	PAN card number of promoters/Directors/Partners and authorized signatory.	
11	Udyam/IEM/LOI Reg. No	
	1 Manufacturing item	
	2 Investment in P&M:	
	3 Date of Commencement of commercial Production(DoCP)	
12.	(A) ERP System :	
	1) Name and address of ERP System /Module supplier	
	2) Detailed features of the ERP system/Module installed.	
	3) Date of installation of ERP system.	
13	Details of cost incurred, along with CA certified statement	

14	Details of any other financial assistance Applied/granted by GOG/GOI on same component. If Yes. Provide details	
15.	Bank Details for assistance	
	Bank Name	
	Bank Account Name	
	Bank Account No.	
	ISFC Code No.	
	Branch Code No./Branch Name	
16.	Declaration: I hereby declare that information, statement & documents submitted are to the best of my knowledge & belief, true and correct in all particulars. I abide with the terms, conditions, eligibility criteria and parameters specified in the Government Resolutions, Guideline and as emended from time to time, under Aatmanirbhar Gujarat Scheme for assistance to MSMEs. I also declare that I am authorized by the enterprise to sign and submit then application and related details with relevant documents.	

I/We undertake to comply with the terms, conditions, eligibility criteria, particulars and parameters of the Government Resolution No. MIS-102022-1271(1)-I(CH) Dated:05/10/2022, Guideline and as amended from time to time, and applicable resolutions under Aatmanirbhar Gujarat Scheme for assistance to MSMEs of Government of Gujarat.

I/We, applying for Assistance for Enterprise Resource Planning (ERP) Assistance scheme will observe the following conditions and if I/We will violate any condition of GR/Guideline/these conditions than I/We shall be liable to pay back the assistance paid and the same will be recovered.

1. I/We confirm that, my/our enterprise is having manufacturing activities.
2. In no case the actual expenditure incurred by my/our enterprise for the said purpose exceeds the total assistance given by GOG and GOI.

Date:
Place:

Signature of the Authorized Person
Name of the Authorized person:
Designation of the Authorized person:
Seal of the Enterprise