

Application Form

For

Scheme 6

Assistance to SME for raising Capital through SME Exchange

Under -New Industrial Policy – 2015

**BharatRatna Dr. Baba Saheb Ambedkar Udyog Uday Yojna for SC/ST
Entrepreneurs of MSME**

Government Resolution No MSM-102017-332-Ch Date: 24-10-2017.

1	Name of Enterprise	
2	Office Address with Pin Code No:	
	Factory Address with Pin Code No:	
	Telephone No	
	Mobile Phone No	
	Email ID	
3	Details of All proprietor/partners/Directors/Promotors	
	1) Name Address Contact details Category	General/SEBC/ST/SC
	2) Name Address Contact details Category	General/SEBC/ST/SC
4	Name and Designation of Authorized Person	
	Telephone No	
	Mobile Phone No	
	Email ID	
5	The place where establishing the enterprise in Gujarat.	Place: Taluka: District:
6	Constitution of Enterprise	

7	MSME Acknowledgment No. & date	
	EM Part-I	
	EM Part-II	
	Udyog Aadhaar No and Date	
	As per registration Category of Enterprise	Micro/Small/Medium
	As per registration Activity of Enterprise	Manufacturing/Servicing/Trading
	As per registration manufacturing Item	
8	Details of registration with SEBI	
9	Details of other registrations/Licenses/ approval/Permission	
10	Item of Production	
11	Name & Address of Registrar of Capital Issue of an Enterprise	
12	Name & Address of Banker of Capital Issue of an Enterprise	
13	Cost of Project	
14	Details of Means of Finance	
15	Date of Capital Issue published	
16	Listing Date of Capital Issue	
17	Total Amount of Equity Capital for which Capital Issue arranged	
18	Amount of Equity Capital raised out of that.	
19	Is the equity generated by Capital Issue used for the enterprise located in Gujarat? If it is different from above item no 4, State the location & address of that enterprise. Projection of implementation of project /Commissioning Projections:	
20	Head wise details of Expenditure incurred for raising of fund through SME Exchange	
	Paid Expenditure	
	Unpaid Expenditure	

21	Has the project started its commercial Production? YES / No	
22	Expected date of commencement of Production.	
23	Employment Details	Managerial
		Supervisory
		Workers
		Total
	Nos. of Local employ out of that	
24	As per Audited Balance Sheet investment in Plant and Machinery	
25	Whether any other assistance obtained in any other scheme of Government of Gujarat / GoI / Others.	
26	Name of the Bank of Enterprise	
	Address of Bank	
	IFS Code	
	Account No	

Place:

SEAL

Date:

**Signature of Applicant
(Name of Signatory)
(Designation of Signatory)
Rubber Stamp**