MP INVESTMENT FACILITATION RULES 2010 (AMENDMENT)

www.govtpressmp.nic.in 27] (1) (a) FÄR, 6 15, 1940 (3) 12 2018 20-01/ 2018/ tr-vqnv:: vag w-20-32-2008411 29.12.2010 auT æu-&HT) 2010" auT 201811 7Ttr 381 382 2/ 6 2018 4 (11) 3-1Tå<GT-q aur 2018" 1 afifia 8-1* DYNAMIC CAF "INVEST" DYNAMIC CAF "INVEST" Portal aT7k 3•rrqvzr tl mwr, at•-TßT, aiJT-$T 'INVEST" Portal -satr 2018 fi. 20-32-2008- 2008 21 2008) 15 17 *azt gr, 29 2010 (æiF 2010", t (R, t aqr 20 (1) 2018" {Madhya Pradesh Investment Promotion (Online Dynamic Combined Application Form and Time Limit for Processing of Applications) Rules 2018}, t, 6 2018 t, 2008 21 2008), 3(1) 3iÄ- Rtrzr t, QF,-16 -11-2014- 2 2015 2014' 3 3.21 æ:atrzr t, (q) t U-rq-12 (Y) t, m-TßT 3ß-fr7 Gtrzr (GO " 2006" t, 2006" t, ($) " z:iF t, 3 3-nru q/ t, 383 4 (71)] 6 2018 385 (3) DYNAMIC CAF 3-Ta•afr7 *71T. DYNAMIC CAF t, (2) 3*qr 6 (DYNAMIC CAF) 3i•afia 3-@an 386 6 2018 (71) *zrr at ttr fir R?-117T/ 4. (1) ag-a-r t ai3T t, (DYNAMIC CAF) (2) 3ar (3) æiF 3.i-a•afi-a t, ür-$T 4 (71) 6 2018 at.fifi?T 9-trax, ztrmrtr fiat *atr DYNAMIC CAF t, 3-N7T R3-J17T/ 37*r Ä3•1WT/ 3ifrJT 387 388 6 2018 [q-ITTT 4 (TD 6. - (I) #q-r *7tr 3Ta•V7, t Vr aft (4), JT.g. R. tR, "Feedback') 3Trt (Regulatory Reforms) 4 (TT)] 6 2018 389 3-ß.ra•r y: (2) ai07 Otr 31T$-gr tar æiQ•at (4) 3-rqar 3rraz-at as-TTJT, 390 6 2018 IFikir avr 2018" 3.rl 3@7T t ai•sr t, (DYNAMIC CAF) 2. 'INVEST DYNAMIC CAF t; 37 OTT, tl DYNAMIC CAF GMr, 31t7tr, DYNAMIC CAF Zina 3. 2006 2006 (TT)] 6 2018 391 (DYNAMIC CAF) 4. *tazifi-$r, (tfr F. 10 (DYNAMIC CAF) 2006 I 5. (DYNAMIC CAF) QJT.€r. 6. (DYNAMIC CAF) 1 2 3 4 2006 *utr altr 2006 afi altr 2006 aT8r 2006 F. 500 F. 2000 F. 5000 F. 20000 392 6 2018 [(IT) 7. (DYNAMIC CAF) fir, 8. ai@a (Personal Deposit Account) datil araT IINt 3ßa-7T 6 2018 t DYNAMIC CAF (DYNAMIC CAF) q-rq 3&Rr fä-%3.fr F) (t) a-Rr t 13. 14. qrqr- aar«r/ 15. 37 (DYNAMIC CAF) 31Ba•rå t a21T 16, 2008 18(1) avr 393 394 6 2018 17. *r avr &ITI atr qfr;zrr t, qåÄTzrt, avr 2018" 18. - 19. Karr [4 (TT) aisr 6 2018 tl vra•ær 2008 qrq18(1) 3. qlRT DYNAMIC CÄF (1) 3-TÄQzr$ (H) ü31Ttr- (1) *r 1974 1981 (2) 2016 (6) (REtr) 395 396 6 2018 (30 arqr, æiQ-TUT (2) 1974 1981 (3) (gif.GT) 2016 (4) 2016 16 ava (6) 1948 ava (7) æiRar 1970 ava (8) 1979 ava (9) (qrä) 1996 ti-$rüUT (10)æifiar 1970 (11) 1958 (12) 1923 1923 1923 (15)aiqaq 1923 397 A. 1. 2. 6 2018 Online Dynamic CAF Form • Pre Establishment Services (MP Pollution Control Byard) Consent to Establish (Under Water Act 1974 & Air Act 1981) / Consent to Operate (Under Water Act 1974 & Alr Act 1981) Authorization for Hazardous and other waste {Management and Transboundary Movement) Rules, 2016 Application Form (Same for above mentioned services) S. No. 1. 2. 3. 4. 6. 7. 8. 9, 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30

31. Fields captured in the applTcation form Applicant's Name with Designation Nationality PAN CARD Mobile no Email 'd Industry Name : Old Industry Name (if any) Site Location Address with Survey/Plot/T.C No/Khasra No / Pin . Does it fail in: industrial estate, in notified area, in SIDC, I/A, not in any of these DIC/SIA/IEM No/License No. Distrlct Tehsil Block Latitude & Longitude Constitution Type Regd. Office Address: Phone, Fax & web site URL E- mail for official Correspondence Industry Sector : Select Project Cost (Investment in Gross fixed Assets, cost without depreciation) (Rs. in lakhs) Investment in plant and machinery (Rs. in lakhs) Scaie of industry (L/M/S) Plant Commissioning /Production Date Premises Area in Sq. meters Built up Area / Open Area / Plantation Area (sq m) Environmental Clearance Directors' Name Designation Address + Phone No of director Mobile No of director DIN {Director Identification No.) Field Type Text Text Numeric Numeric Text Text Text Text Drop down(Np of Fields — 4) Alphanumeric Drop down Drop down Text Two Text field Drop down Fields- 8) Text (No of Alphanumeric Text Drop Down (No of fields 69) Numeric Numeric Drop down Date (DO/MM/YYYY} Numeric Numeric Check Box Text Text Alphanumeric Numeric Alphanumeric Mandatory / Opttonat Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory R/O/G (Auto Generated) Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory 398 32. 33. 34

35. Application Type Application date Application under Air Act/Water Act/ Hazd, Waste Rules Explain the purpose of this application and any other relevant information to be mentioned in the A/W/H

Form 6 2018 Drop Down Date (Auto generafer:i) Check box Text Information under Water Act : WC Water Consumption / WWG Waste Water Generation (KLS / DAY) 36.37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58- 59. so. 61. 62. 63. 64. 65, 66. 67. 68. 69

70. Water Code Water Source Water Source Water Consumption KL/Day Waste Water Generation KL/Oay Remarks Disposal Mode (IND) Di5posai Mode (Domestic) Point of Disposal Details (Land/River/Publjc Sewer/Recycle/ Any other) Ultimate Final Body (Name the catchment of natural water course) Discharge Point (Mention discharge point location) Fresh WC Kipd OND/DOMI WWG Kipd [IND/DOMI Tube wells/Boilers Bore weils/D.G Sets Capacity of Pumps(HP) / CSTP Membership ETP Chamber Capacity Units Date of Commissioning STP Chamber Capacity Units Remarks Emission Type Stack Attached To Ht-Mt Remarks/Capacity Stack Monitoring Facility (SMF) Fuel Used(e.g LDO, Coal, Wood) APC (As per consent) Diameter(cm) Consumption/Hour &Unit Air Pollution Control Measures Orop down(No of Fields -12) Drop Down(No of Fields -13) Text Numeric Numeric Text Drop down(No of Fields ¯ 14) Dro Down{No of Fields - 14) Text Text Text Numeric Numeric Numeric (two fields) Numeric (two fields) Numeric Drop down(No of Fields— 2) Drop Down(No of Fields - 70) Numeric Text Date DD/MM/WYY Drop Down(No of Fields - 70) Numeric Text Text Drop down(No of Fields —4) Drop Down (Na of fields — 82) Numeric Text Drop down Fields — 04) (No of Drop Down(No of Fields — 25} Check box Numeric Numeric Check Box Multipie selection I (No of Fields— 27) [4 (Tl) Mandator,' Mandatory Mandatory Mandatory Mandatory Mandaton/ Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Optional Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory 4 (71)] 71. 72. 73. 74. 75

76. Waste Category Waste Name Quantity/Year Unit As Per Consent {APO Management of Hazardous Waste Disposal 6 2018 Drop down (Noof Fields —63) Dependent Drop down for point 70 (No of Fields — 421) Numeric Drop down Check Box Check Box Multiple Selection Text Drop down(No of Fields— 15} Numeric Text Checkbox Text Drop down Numeric Text Checkbox Text Numeric Numeric Multiple check box(No of Fields — 4) Multiple check box(No of Fields — 4) Text 399 Raw Material & Product: (Multi Row) 77. 78. 79. 80. 81. 82. 83. b4. 85

86. Product Name unit Applied Quantity Remarks As Per Consent (APC) Name of Main Raw Materials & Auxiliary Chemicals Used Unit Existing Quantity Remarks As Per Consent (APC) Solid Waste Do not Enter Hazardous Waste Details): 87.88. 89

92. Waste Name QUantity Per Month Unit Solid Waste Disposal Solid waste collection Remarks Mandatory Mandatory Mandatory Mandato Mandatory Mandatory Mandatory Mandato Non Mandato Non Mandatory Non Mandatory Non Mandato Non Mandatory Non Mandatory Non Mandatory Non Mandatory Non Mandato Non Mandatory Non Mandato Non Mandatory Documents Required S No 1 2 3 4 5 6 7 1 2 3 4 5 1 2 1 2 3 Documents Required Land allotment letter/}and allotment LOI Satellite imagery of roject / indust site Layout plan of the project/industry Project report including complete details of manufacturing process / raw materials NOC of Gram sabha local body Article of Association memorandum of Under standing Compliance of Environment clearance conditions (If applicable) Documents for Water Consent: Effluent/Sewage Treatment Plant Technical Report on ETP/STP Drawing of ETP/STP Permission of CGWA Of applicable) Water Cess returns (if applicable) Documents for Air Consent: Technicak Specification of Air Pollution Control Arrangements Schematic Diagram of Monitoring facility (Port Hoje & Plate forrn with Spiral ladder) Documents for Authorization for hazardous waste; Details Of SLF/tnclnerator (If applicable) List of hazardous waste generated

Form —4 & 13 400 6 2018 B. Department of Industry policy and Investment 3. Building Plan Approval by AKVN Application Form S.No. 1. 2. 3. 4. 5. 6. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19

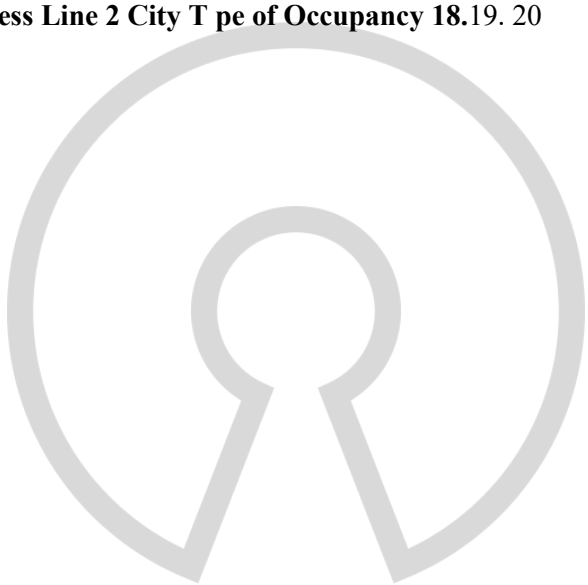
20. Fields Name of applicant Site area (Sqm) Total built up area (Sqm) Address Mobile Email Phone no. Fax no. Building no. Plot no. Or Khasra no, Colony / mohalia / bazar Village or Town Tehsil District Payment details Engineer / architect Engineer / architect license no Whether land is diverted Purpose of construction Approval from Town and Country Planning Department (If Located outside Notified Industrial Area) Data type Text Alphanumeric Numeric Text Text Text Text Alphanumeric Alphanumeric Alphanumeric Alphanumeric Text Text Text Text Alphanumeric Drop Down Alphanumeric Drop Down Mandatory / optional M andatory M andatory M andatory M andatory M andatory M andatory M andatory M andatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory mandatory Mandatory Mandatory Mandatory mcuments Required S.No 1 2 3 4 5 6 Enclosures Required details (annex. A 2 to a 7) as prescribed in MPBVR— 2012 Copy of valid license of architect / engineer Receipt of current year property tax Copy of receipt of application fee, Eabour welfare fee, roof water harvesting fees and other fees prescribed by the competent authority Key Plan/ Combines Site Plan & Layout Pian Building Plans 6 2018 401 4. Water Connection by AKVN Application Form s.No 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19, 20

form Link for Terms and Conditions download (Please refer Annexure 2) Customer Name Unit Name Select AKVN Industrial Area (Annexure 1) Address Plot No. Email Mobile Number Date of Application Office of-DTiC Government Registration No Registration Date Water Requirement (Per Day) Minimum Size of Water Connection Applied Application Fees Water Security Deposit (Rs) Water Fee (Rs.) Total (Amount to be paid in Rs.) Possession Letter This is to certify that the information furnished above is true and correct to the best of my knowledge and belief Data type "l AGREE" Check Box Text Text Drop down{No of Fields — 7) Drop down(No of Fields - 88) Numeric/Text Numeric Alphanumeric Numeric Cafendar Text Numeric Calendar Numeric Numeric Auto calcuEated Auto calculated Auto calculated Auto calculated Upload ACCEPT" Check Box Mandatory / optional Mandatory Documents Required S.No, 1 Enclosures Possession Letter 402 6 2018 C. Urban Development and Housing Pcp-art-ment 5. NOC from Fire Department Application Form S.No Fields captured in the Application Form Applicant Details Data Type Drop Dewn 1. 2. 3. 4. 5. 6. 8

9. Title First Name Middle Name Last Name Type of NOC Mobile No. Telephone No. E mail Address Application Date • • Text Texts Text Mr Miss Mrs Mis Pravisionaj Numeric Numeric Alphanumeric Date {DD/MM/WYY) (Auto- Address of AppElcant 10. 11. 12. 13

14. Address Line 1 Address Line 2 City Select Your State Pin Code Address of Property 15.16

17. Address Line 1 Address Line 2 City T pe of Occupancy 18.19. 20



21. Select Your Occupancy Height of Building (in Meters) Plot Area Plot area unit Documents Required • Mandatory populate) Alphanumeric Alphanumeric Text Dropdown Numeric Alphanumeric Alphanumeric Text Dropdown(No of Fields Numeric Numeric Dropdown(No of Fields -12) -3) Mandatory Optional Mandatory Mandatory Optionai Mandatory Fixed Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory S. No. 1 2 3 4 5 6 Enclosures Copy of Ownership Document (Lease Deed / Registry (Summarized copy) / khasra) Building Fire Plans (each floor),Etevation Plan of Building,Section Plan of Building Copy of Certificate of Fire Consultant Qualification (If not listed in Department Website) Checklist (53 Points) certified by the fire consultant , owner or authorized person as pe r rules Copy of Approval letter and Approved Building plan (each floor) by competent Authority (Scanned in original size) Copy of Approval letter and Approved layout plan (each floor) by competent Authority (Scanned in original size) Either S or 6 D. Encru-ngpacunenl 6. Energy Conriection (HT) a, DISCOMs AppllcaUon

Form 6 2018 Oaka T pe Text Oate DDMMYYW Numeric Alphanumeric Numeric Text (Auto Populated) • HT Drop down (Auto Populated) Boolean {Radio Button) Date DD/MM/YYYY Date DD/MM/YYYY Orop Down(No of Fields -11) Drop Dos•.m (dependent , (No of Fields -11) Text Drop Down Drop Down Drop Down Dro Down Check Box Numeric Text Text Text Text Alphanumerlc Alphanumeric Alphanumeric Date (DO/MM/YYYY) Drop Down Alphanumeric 403 S.No 1. 2. 3. 4. 5. 6. 8. 9, 10. 11. 12. 13. 14. 15. 16. 17. 18, 19. 20. 21. 22, 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33, 34, Fields captured In the a Applicant Name DOB Aadhar Mobile No Aadhar Email ID Aadhar No Type of connection Applicatioo Type ilcation form Type of Electric Connection Start Date (for Temporary connection} End Oate (for Temporary connection) Category of Electric Connection Objective of Electric Connection Connealon address Khasra / Plot No CIRCLE Block Panchayat / Zone Ward / Viltage Communication address Same as above PIN code State Olstrlct Applicant Firm Name Name of Father/Husband/Manager/Partnet PAN card No TIN No in case of Government Agency) Registration No of Firm End Date of Registration Bank Name IFSC code Account NO Re-enter account number Required Load (KVA) Required Supply Voltage Contract Demand in phased manner Numeric Numeric Numeric Drop Oown(No Of Fields —4) Drop Down(No of Fields — 2 Numeric Mandatory / O tional Mandatory Mandato Optionab O tional Mandato Mandatory Optional Mandatory if electric connection = temporary If electric connectlon tem oracy Mandatory Mandatory Mandato Mandato Mandato Mandatory Mandato Optlonal Mandatory Mandato Mandato Mandato Mandatory Mandatory O tional Optional Mandatory(Optional for Gov Agency) Mandatory(Optional for GOV Agen) Mandat ory(Optlonat for Gov A ency O tional Mandatory Mandatory Mandatory Option al If yes, mention contract demand {ia KVA) From Date To Date Documents Required s.No. 1 2 Documents Requlred Registration deed of Land Partnership Deed / Proof of proprietor / :ite ot registrati01' com pany 404 Pre Operation Services 6 2018 A- Food. Civil Supplies & Consumer Protection Pepartmept 1. License as Manufacturers of Weights & Measures Application Form s.No 1 2 3 4 5 6 7 8 9 10 11 12 13 14 16 17 19b 19c 19d 20 21 22 23a 23b 23c Ftetds captured in the application form Benefician/s Aadhar Number Name of Applicant Fathers/Husband's Name Gender Category Email Mobile No Address (House No/MohalIa) District Tehsil Kshetra Ward Name of manufacturing concern for whom license is desired Premise Type Complete address of the concern whether the land is owned/rented/on lease along with supporting documents Date of establishment of workshop/factory Is this Limited Company (Yes/No) Type (Proprietor/Partner/ Managing Director) Name Father's/Husband's Name Address Current registration number of factory/shop/establishment/municipal trade license Date of factory/shop/establishment/munjcipa! trade license Nature of manufacturing activities at present The types of weights and measures proposed to be manufactured viz: Weights Details Measures Details Weighing instruments Details Data Type Numeric Text Text Dropdown (No of Fiejds -3) Dropdown (No of Fields — 6) Alphanumeric Numeric Alphanumeric Dropdown Dropdown Dropdown(No of Fields -2) Dropdown Text Radio Button (No of Fields — 3) Alphanumeric Date (DD/MM/YYW) Radio Button Mandatory/ Optional Optional Mandatory Mandatory Mandatory Mandatory Optional Optionai Mandatory Mandatory Mandatory Mandaton/ Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory • • Text Text YES 01, NO = 02 Proprietor = 01, Partner = 02, Managing Director Alphanumeric Alphanumeric DD/MM/YYYY Alphanumeric Alphanumeric Alphanumeric Alphanumeric = 03 Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory qPT4 (TI)] 24a 24b 24c 24d 26 27 28 29 30 31a 31b 32 33 34 36a 36b 37 38 39 6 2018 Alphanumeric Numeric Numeric Numeric Numeric Alphanumeric Alphanumeric Alphanumeric Alphanumeric Alphanumeric Radio Button Yes = 01, No -02 Text Alphanumeric Alphanumeric Alphanumeric Alphanumeric Radio Button Yes = 01, No = 02 Date DD/MM/YYYYY Alphanumeric Radio Button (No of Fields — 3) Alphanumeric Date DO/MM/YWY 405 Measurin instruments Details The number of persons employed/proposed to be employed Skilled Semi-skilled Unskilled Specialist trained In line The monogram/ttademark intended to be imprinted on weights and measures to be manufactured Details of machinery, tools, accessories owned and used for manufacturing weights and measures etc. Details of foundry or workshop facilities arranged. Whether ownership or long term lease etc. Facilities of steel casting and hardness testing of vital arts etc. Or other means Availabliity of electrical ener Whether any loan received from government or financial institution. If yes give details Name of bankers Loan details GST number Professlonal_Tax registration Number IT Number Have you applied previously for a manufacturer's license? If yes when with what result. Previousl

manufacturer's license date Previousl manufacturer's license details Whether the items proposed to be manufactured will be sold Details of Model Approval received from Government of India {ii) When can you produce for inspection samples of your products for which license is desired (OD/MM/YYYY) * Documents Required S.NO Enclosure/Attachment 1 2 3 4 5 6 7 8 9 10 Scan Copy of Completely filled and signed self-declaration and Consent letter form Model Approval Document from Govt. of India/AppIication submitted for model approval to Govt. of India scan cop of PAN CARD scan cop of AADHAR CARD Scan Copy of Proof of Educational Qualification Scan Copy of Certificate of Registration under Shop. and Establishment Act. ScanCo of Electricity Bill of Premise Scan Copy of Name and AADHAR No of all the workers/Empjoyees engaged in Manufacturing.(Self Attested) Scan Copy of Registration certificate from Industries department if registered as factory/Unit Scan Cop of GST/Professional Tax Registration Number/lT Number Mandatory Optional Optional Optional Optional Mandatory Mandatory Mandatory Mandatory Mandato Mandatory Mandatory if yes) Mandato (if es) Optional O tional Optional Mandatory Mandatory if yes) Mandato (if es) Mandatory Mandatory Mandatory Mandatory/Optio nal Mandatory Mandatory Mandatory Mandatory Optional Optional Optional Optional Optional Optional 406 6 2018 B. Department of Environment (MP Pollution Control Board) 2. Consent to Operate (Under Wates Act 1974 & Alr Act 1981) Application Form — Same as Consent to Establish (Under Water Act 1974 & Air Act 1981) 3. Authorization under E Waste (Management) Rules, 2016 Application Form S.No 1. 2. 3. 4. 5. 6. 7. 8. 10. 11. 12. 13. 14. 15. 16. 17. 18

19. Flelds Applicant Type No.of workers Dismantling or Recycling Process Waste generation in processing e-waste Provide details of disposal of residue Name of Treatment Storage and Disposal Facility utilized for Details of e-waste proposed to be procured from re-processing Occupational safety and health aspects Details of Facilities for dismantling both manual as well as mechanised Details of storage for raw materials and recovered materials Authorisation required for Total quantity e-waste generated in MT/A Quantity refurbished (applicable to refurbished) Quantity sent for recycling Quantity sent for disposal Detalts of Storage Fa.dlities Details of HandEEng Facilities Details of Treatment Facilities Details of Refurbishing Facilities Data Type Text Numeric Text Text Text Text Text Text Text Text Text Numeric Numeric Numeric Numeric Text Text Text Text Multiple Records {E-waste Processed during Last 3 Years) 20. Year (last 3 Year Processed) 21. Product ()ast 3 Year Processed) (last 3 Year Processed) 22. Quanti Multiple Records (Instalted Capacity) 23. Product Name (Installed Capacity) 24. Capacity (Installed Capacity) 25. Capacity Unit (Instatled Capacity) Documents Required Text Text Numeric Text Numeric Text Mandatory/Optional Mandatory Mandatory Mandatory Man datory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Ma ndatory Ma ndatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory M and atory Mandatory Mandatory Mandatory Mandatory Mandatory S No 1 2 3 4 5 6 Endosures Copy of agreement with Collection Centre Copy agreement with Producer Details of storage for dismantled e-waste Copy of agreement with Recycler Detai!s of Facilities for Recycling Details of storage for raw materials and recovered materials 6 2018 4. Authorization under Solid Waste Management Rules 2016 Applicatlon Form S.No 1. 2. 3. 4. 5. 6. 8. 9. 10, 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24

25. Fields Name of the locat body/agency appointed by them/ operator of facility Correspondence address Telephone No. Fax No. e-m ail Nodal Officer Name (Officer authorised by the local body or agency responsible for operation of processing/ treatment or disposal facili) Nodal Officer Designatlon (Officer authorised by the local body or agency responsible for operatlon of processinü treatment or disposal facility) Authorisation required for setting up and operation Of the facllity (Please tick mark) Processing/recycllng/treatment of solid waste (i) Total Quanti of waste to be processed per day (a) Quanti of waste to be recycled (b)Quantity of waste to be treated (c)Quanti of waste to be disposed into landfill (ii)Utillsatlon programme for waste processed Product utilisation iii)Methodology for disposal {attach details) Quanti of leachate Treatment technology for (lv)Measures to be taken for prevention and control of environmental pollution (v)Measures to be taken for safety of workers working In the plant (vi)Details on soild waste processindrecycline/treatment/disposal facility (to be attached) Disposal Of solid waste Number of sites identified Quanti of waste to be disposed per day Detalls of methodology or criteria followed for site selection (attach) Details of exlstFng site under operation Methodolo and operational details of landfilling Measures taken to check environmental pollution Any other information. Data Type Text Text Numeric Numeric Alphanumeric Text Text 1. Waste Processing 2. Recycling 3. Treatment 4.

Disposal at l.andfill Numerlc Numeric Numeric Numeric Numeric Numeric Numeric Numeric Attachment Numeric Numeric Attachment Numeric Numeric Text Text 407 Mandato /Optiona) Mandatory Mandato Mandato Mandato Mandatory Mandatory Mandatory Mandatory Mandatory Mandato Ma nda to Mandato Mandatory Mandatory Mandatory Mandatory Mandatory Mandato Mandato Mandatory Mandatory Mandato Mandato Mandatory Documents Required S.No. 1. 2, 3

4. Enclosures Site clearance (local body) Proof of Environmental Clearance Consent for establishment Agreement between municipal authority and operating agency Investment on the project and expected return 408 6 2018 c. Laug.ur-nep.arungnt 5. Factory Plan approval under the Factories Act, 1948 Application Form

FORM-I A Particulars of the drawings along with information is submitted according to the requirement of Rule 3-A S. No Flelds captured In the applicatlon form Detalls of Applicant 1 2 Name of Occupier Fathers name Data Type Text Text Applicant's address on which he wants correspondence In this regard 3 4 s 6 7 8 9 Address State District Pin Code Moble No E Mail 'D Aadhar No. & Passport (In case of Aadhar is not avallabte with NRI) Full Name and address of the Factory 10 11 12 13 14 Factory Name Postal address of factory District Division Pin Manufacturing Process 15 16 17 TO be carried (if new factory)/being carried (if exins) give description Whether it Involves hazardous processes as interpreted under section 2 cb (give details) Whether it Involves any dangerous operation wholly or party as declared under sub-rule (1} of the rule 107 under section87 (give details) Workers Details No. of workers employed in every room in Factory 18 Deol's of Machines Whether lifts/hoists/Llfting Machines of any kind 19 Installed/ to be Installed in the plant, If yes, the same should be shown in drawing. lob Description Whether worker will be required to work at different 20 floors or at a height from where he is likely to fall or work at a @ngested place due to machines or fittings or in a confined space, pit or sums ? Escape of dangerous fumes / gases / fire or explosions details: Whether there is any possibility of escape of dangerous 21 fumes / gases / fire or explosions? What materials are uæd / to be used for construction of Building (give details) 22 Roofing (give details) 23 Industry under Factory Act 1948 Type of Factory 24 No, of Workers expected 25 Documents Required Alphanumenc Drop down Drop down Numeric Numeric Alphanumeric Numeric Text (with special chars.) Alphanumeric Drop down Drop down Numeric Text Drop down in case of YES Drop down In case of YES Numeric Drop down(No of Fields — 2) Drop down(No of Fields - 2) Drop down(No of Fields - 2) Text Text Drop down Drop down Mandaton / O tional Mandat ory Mandatory Mandato Mandato Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mand aton Mandatory Mandatory Mandatory Man datary Mandatory Mandatory Mandatory Mandatory S.N0. 1

2. Enclosures grief description of process along with List of Raw material with quantity to be used in manufacturing process Drawings - As per rule 3-A of Madhya Pradesh factories Rules, 1962, site plan drawn to scale not less than 1:500 and plan, elevation, cross section, of various buildings including all details relating to door, windows, ventilators, emergency exits, out of plant machinery drawn to scale not less than 1:100.(Only upload pdf generated by AutoCAD software Details of materials used for bulldlng construction and roofing. 6 2018 409 6. Ucense under the Factories Act, 1948 Application Form

FORM- 4 (Prescribed under Rule & 10) Application for Registration and Grant or Renewal of License for the Year and notice of occupation in section 6 and 7 Fields captured In the application form S. No Factory Details 1 2 3 4 5 FAC.No. Factory Name LIN Number Factory licence if already registered Application for the Registration of License for the Year Full Postal Address and situation of factory Data Type Numeric Alphanumeric Numeric Drop down Yes 1

2. No If Yes License No Drop down Alphanumeric Drop down Drop Down Numeric Check Box 6 7 8 9 10 If 10 no, 11 12 13 14 Address District Division Pin Code Whether Factory Address is same as communication address Mandatory /Optional Optiona Mandatory Optiona I (As per GO' directions) Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Optionai Full Postal Address to which communication relatlng to factory should be sent Address State District Pln Code Alphanumeric Drop down Drop down Numeric Manda tory Mandatory Mandatory Mandatory Full name and resldentiat address of the person who shall be the occupier of the factory for the purpse of the Act 15 16 17 18 19 20 21 22 23 24 Full Name of the Occupier Fathers Name Category of occupier Address State Distrlct Pin Code Mobile No Email ID Aadhar No.& Passport (in case of Aadhar is not available with NRI) Text Text Drop down Proprietor / Partners in the Firm / Director of Company /others Alphanumeric Drop down Drop down Numeric Numeric Alphanumeric Numeric Mandatory Mandatory Mandatory Mand atory Mand atory Mand atory Mand atorv Mandatory Mandatory Mandatory Full name and residential address of the person who shall be the manager of the factory for the purpose of the Act 25 l' Full Name of the manager I Te•xt Mandatory 410 26 27 28 29 30 31 32 33 Fathers Name Address State District Pin Code Mobile No Email ID Aadhar No. 6 2018 Text Alphanumeric Drop down Orop down Numeric Numeric Alphanumeric Numeric Mandatory Mandaiory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Full name and residential address of the owner of the premises or building (including the precincts thereoO referred to in Section 93 of the Act 34 35 36 37 38 39 40 41 42 Full Name of the Owner Fathers Name Address State District Pin Code Mobile No Email ID Aadhar No. & Passport (in case of Aadhar is not available with NRI} Nature of manufacturing process or processes 43 44 45 46 47 Carried on in the factory in the last 12 months (in case of factories already in existence) to be carrled on in the factory during the next 12 months (in the case of all factories) Whether it involves hazardous processes as interpreted under Section 2 (cb) give details Whether it Involves any dangerous operation wholly or partly , as declared under sub-rule (I) of the rule 107 under sectlon 87 (give details) Whether any chemical substance as specified under second schedule of the Act is used, handled, stored or processed thereat Worker Details 48 49 so Fee Schedule Applicable Maximum Number of worker proposed to be employed on any one day during the year Maximum Number of workers employed on any one day during the la5t twelve months (in case of factories already in existence) Number of workers to be ordinarily employed in the Factory Nature and total amount of powers (HP) Installed Machinery Power in Horse Power Text Text Alphanumeric Drop down Drop down N umeric Numeric Alphanumeric Numeric Text Text Drop down In case of YES Drop down In case of Yes Drop down 1. Yes 2. No Drop down Schedule A- Schedule B- Schedule C- Drop down -26) (No of Fields Drop down (No of Fields — 26} Numeric Drop Down : For Schedule A Schedule B Schedule C Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Optional Mandatory Mandatory Reference numbers(s) and date (s) of appcoval of plans under rule 3-A of M.P factories Rules 1962 by chief Inspector of factories. MP (in case of factories already in existence) 53 Reference Number(s) Date of Approval Numeric Date (OD/MM/YYYYY Optional Optional 4 (IT)] Documents required- in case of New Licence 6 2018 411 S No 1 2 3 4 1 2 3 4 Documents Required General documents: For Non - Hazardous & Hazardous Category Proof of Ownership/possession of Premises (Sale Deed/Rent Deed/Lease Deed eTc.) Proof of being Occupant(Proprietor / Partners in the Firm / List of Director of Company + Memorandum & Article of Associations) Stability certificate Form no.-2 issued by a competent person Copy of self cess assessment

Form-I under BOCW Act, 1996 Additional documents: For Hazardous Category Proof of submission of On-Site Emergency Plan. If Pressure vessels and lifting machines are installed, Test Report issued by Competent Persons in case of solvent plants - Plant fitness certificate and operator fitness certificate Issued by a competent person is also required. A copy of Bill issued by Madhya Pradesh Electricity Board as a proof for installed horse power Name & Max Quantity of Chemicals & Raw Material to be used and stored in premises

7. Pemlssion for engaging Contract Labour by a Contractor under provisions of the Contract Labour (Regulation and Abolition) Act, 1970 : (Licensing of Contractor) Application Form Fields captured in the application form S. No Contractor Information (ii) 2 3 4 5 6 7 8 9 10 Name of Contractor / Contractor Establishment Name of father / husband (if Contractor is Individual) Address PIN Code Telephone no E mail ID Mobile Number District Nearest Labour Office in the District (Issuing Office) Aadhar No. (if Contractor is Individual) Date of Birth (if Contractor is Individual) Data Type Text Text Alphanumeric Numeric Numeric Alphanumeric Numeric Orop down Drop down Numeric Date (DD/MMNYYY) Mandatory / Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Appilcant Details (Applicant Information- if applicant is other than Contractor) Boolean 11 12 13 14 15 16 17 18 Name of Applicant Father's / Husband's Name Designation (applicant's status in the firm) Applicant's address for Correspondence Mobile Number E mail ID Aadhar No, Date of Birth Text Text Drop down (No of Fields — 5) Alphanumeric Numeric Alphanumeric Numeric Date (DD/MM/YYYY} Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory 412 6 2018 Details of Principal Employer / particulars of establishment / Institution to whom contractor suppues contract labour 19 20 21 22 23 24 26 27 Name of PE Estabtishment Address of PE Establishment Certificate of registration for establishment (Principal Employer file number) Date of Registration Issuing office Name of the Owner / Occupier / Director / Manager who is responsible for the affairs of employment of Contract Labour in PE Establishment Address of the Responsible person PE Mobite no. Email-ID Specifications of Contract Workers 28 29 30 31 32 33 Nature of the work for which contract labour is employed in the establishment Maximum number of contract workers to be employed Proposed start date of contract work Proposed end date Qf contract work Contractor's Agent or Manageris Name Address of the Agent or Manager Other Details 34 35 36 37 38 39 40 41 Has the contractor been convicted of any crime 'n the last five years? If yes, then details Was there any order to cancel or suspend the license against the contractor or forfeiture of the security deposit ever? Date of Order Has the contractor worked in any other establishment during last five years? Name of the Principal Employer Establishment's Name Nature of Work Documents Required Text Text Alphanumeric Date (DD/MMNYYY) Drop down Text Text Alphanumeric Alphanumeric Text Numeric Date (DD/MM/YYYY) Date (DD/MM/YYYY) Text Alphanumeric Boolean Text Boolean Date (DD/MM/YYYY) Boolean Text Text Text Mandatory Mandatory Optional Optional Mandatory Optional Optional Optional Optional Mandatory Mandatory Mandatory Mandatory Optional Optional Mandatory in case of Yes Mandatory In case of YES Ma ndatory In case of YES in case of YES In case of YES S No 1 2 3 Documents Required Passport size photograph of Applicant (JPG) Copy of any one photo Identify of applicant Voter ID/ Aadhar/ Driving License/ Passport or PAN card (PDF Format) Certificate in

Form V issued by Principal Employer under Rule 21 (2) of Permission for engaging contractor for contract labour under provision of The Contract Labour (Regulation and Abolition) Act, 1970 4 (71)] 6 2018 8. Registration of Principal Employer Establishment under the Inter-state Migrant Workers 413 Act, 1979 Appllcation Form Fields captured in the application form S. No, EstabUshment Details 1 2 3 4 5 6 7 8 9 10 Name of Establishment (English) Name of Establishment (Hindi) Address PIN CODE Telephone No. Fax No. E Mail ID District Issuing Ofice Nature of work carried on in the Establishment Applicant Details 11 12 13 14 15 16 Name of A plicant Fathers/ Husband Name Status of Applicant Mobile No. E Mail ID Aadhar No. Data Type Text Te»å Alphanumeric Numeric Numeric Numeric Alphanumeric Drop Down Drop Down Text Text Test Drop Down(No Fields — 5) Numeric Alphanumeric Numeric of Mandatory / Optional Mandatory Mandatory Mandatory Mandatory Mandatory Optional Mandato Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Principal Employer Details (not applicable if ap licant & Principal Employer are same) 17 18 19 20 Name of Prindpal Employer Address Mobile No. E Mail ID Text Text Numeric Alphanumeric Manager Details (not a pllcable if applicant & manager ate the same) 21 22 23 24 Mana er Name Manager Father / Husband Name Manager Mobile No. Email Text Text Numeric Alphanumeric Mandatory Mandatory Mandato Mandato Mandatory Mandatory Mandatory Mandato Particulars of ALL CONTRACTORS and ISM worker employed by them Multiple entries populated in grid) 25 26 27 28 29 30 Name of Contractor Address Nature of Work Nature of work to be carried by the contractor in Establishment Maximum no. of contract labour to be employed in any day by this Contractor Estimated Date of Termination of employment of contract la bour *ADD CONTRACTOR Oocuments Required Text Text Text Text Numeric Calendar Optional O tional Optional Optional Optional Optional S NO 1. 2. 3, 4. mcuments Required Passport size photograph of Applicant (JPG) Photo identity Proof of applicant — (Voter IO, Aadhar, Driving License, Passport, PAN Card (any one) Copy of any one for address / place oof of Principal Emp!oyer / Contractor Establishment Rent agreement, Electricity Bill Telephi Bill, Ownership deed, PalMbership deed, Memorandum of Association Copy of Contract in case of Partnership firm and Copv of Memorandum of Association tn case of Limited company 6 2018 9. Registration of Establishments under the Building and Other Construction Workers (Regutatton of Employment and Conditions of Service) Äct, 1996 Application Form [4 (TT) S.No Fields captured In the application form Establishment 1 2 3 4 5 6 7 8 9 10 11 12 Name of Establlshment (English) Name of Establishment (Hindi) Present Address of Establishment Pin Code Permanent Address (If Any) Pin Code Complete Address of the place of construction Telephone No. Fax No. Email District* Nearest Labour in the District (Issuing Office) Applicant/ Employer Details 13 14 15 16 17 18 19 Name of Applicant Father's / Husband's Name Address Status of Applicant Email ID Aadhar Moblle No. Data Type Text Text Alphanumeric Numeric Alphanumeric Numeric Text Numeric Numeric Alphanumeric Drop Down Drop Down Text Text Test Drop down(No of Fields— 4) Alphanumeric Numeric Numeric Mandatory / Optional Mandatory Mandatory Mandatory Mandatory Optional Optional Mandatory Mandatory Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Detai$s of Manager I person responsTb'e for supervision & control of establishment 20 21 22 23 24 Manager Name Manager Father/Husband Name Address Manager Mobile no. Email IO Work Details Text Text Alphanumeric Numeric Alphanumeric Date (DD/MM/YWY) Date (DD/MM/YYYY} Drop down Mandatory Mandatory Mandatory Optional Optional Mandatory Mandatory Ma ndatory 25 26 27 No 1. 2. 3, 4, Estimated Date of Commencement of Work Estimated Date of Completion of work Maxlmum number of labour to be employed in any day Documents Requlred Docurnents Required Passport size photograph of Applicant (JPG) Copy of Applicant photo ID (any one voter ID, Aadhar card, Driving License, either Passport or PAN) (in PDF Format) For the authentication of Construction Establishment place and address copy of any one Rent AgFéement Telephone bill Electric payment Ownership deed Partnership deed I Memorandum of Association Copy of contract in case of partnership firm OR In case of Compa ny Ltd copy of memorandum of association (PDF Format) 6 2018 10. Registration of Principal Employer Establishment under Contract Labour (Regulation and Abolition) Act, 1970 Application Form 415 S.No Fields captured in the application form Establishment Details 1 2 3 4 5 6 7 8 9 10 11 Name of Establishment (English) Name of Establishment (Hlndi) Address Pin code Tetephone No. Fax No Aadhar No (in case of person) Email bd District Nearest Labour Office in the District Nature of work carried on in the Establishment Applicant's Detalls 12 13 14 15 16 Name of Applicant Father's / Husband's Name Status

of Applicant in the Establishment Mobile No. Email ld Aadhar No :: Princ!pal Employer Details :: 18 19 20 21 Name of Principal Employer Address Mobile No. Email ld Data Type Text Text Alphanumeric Numeric Numerlc Numeric Numeric Alphanumeric Drop down Drop Down Drop Down Text Text Drop down Numeric Alphanumeric Numeric Text Alphanumeric Numeric Alphanumeric Manager Details {not applicable if applicant is manager himself) 22 23 25 26 27 Manager Name Manager Father/Husband Name Address Manager Mobile no. Email ld Aadhar No Text Text Alphanumeric Numeric Alphanumeric Numeric Mandatory / Optional Mandatory Mandatory Mandatory Mandatory Mandatory Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Manda tory Mandatory Manda tory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Particulars of all Contractors and Contract Labour employed by them (Multiple values captured in a Grid) 28 29 30 31 32 Name of Contractor Address Nature Of Work for which Contract Labour is engaged. Maximum number of contract labour to be employed on any day by this contractor Proposed date of Termination of Text Alphanumeric Text Drop down Date (DD/M M/YYYY} Optional Optional Optional Optional Optional 416 33 6 2018 Contract +ADD CONTRACTOR Documents Required S No 1. 2. 3. 4, Documents Re ulred Passport size photograph of Applicant (JPG) Copy of Applicant photo ID (any one voter 'D, Aadhar card, Driving License; eithe r Passport or PAN) (in PDF Format) For the authentication of place and address of establishment copy of any one Rent Agreement Telephone bill Electric payment Ownershlp deed • Partnership deed* Memorandum of Association* (*lf these documents have many pages than scan and upload only consistent information pages only in PDF format) Copy of in case of partner in partnership firm and Copy of memorandum of association in case of Limited company.(PDF Format) 11, Registration of Shops and Commercial Establishments under MP Shops and Establishments Act, 1958 Appllcation Form Fields captured In the application form Applicant Details 1 2 3 4 5 6 7 8 9 Name of Applicant Father's / Husband's Name Applicant's Status in the Shop/ Establishment Labour identification Number (LIN) Date of Birth (DD/MM/YYYY) Address of Ap tlcant Mobile No Email Id Aadhar No. Data Type Text Text Drop down Numeric Date (DD/MM/YYYY) Text Numeric Numeric Mandatory / Optional Mandatory Mandatory Mandatory Optional Mandatory Mandatory Mandato Mandatory Mandatory Family Members / Other Partners involved in the business (Multiple Entries Added to a Grid) 10 11 12 Name of Family Member/ Other Partner Designation Address [(Add more)) Button to add more members) Shop / Establishment Details 13 14 15 16 Name of 5hop / Establishment Address District Issuing Office / Nearest Labour Office in the District Text Text Text Text Text Drop Down Drop Down Optional Optional Optional Mandatory Mandatory Mandatory Mandatory 17 18 19 20 21 22 23 Category of Shop/Establishment Business Type Shop Type (Employee Wise) Day of Weekly Off Owner Type Business Start Date No. of Years for Registration 6 2018 Drop down(No of Fields — 4) Drop Down Dependent on Category of Shop/ Estb. Drop down (No of Fields - 4) Drop down (No of Fields - 8) Manager and Employees Details 24 25 26 27 28 29 30 31 Manager Name Manager Father/Husband Name Date of Birth(DD/MM/WW) Manager Mobile no. Address Number of Employees, Male and Female. Name of Account/ Business Executive Address of Account/ Business Executive Drop Down 1. Proprietorship 2. Partnership 3. Limited Firm Date (DD/MM/YWY) Numeric '5' Text Text Date (DD/MM/YYYY) Numeric Alphanumeric Numeric Male (Nosl ilemale [Nos) Text Text 417 Mandatory Mandatory Mandatory Mandatory Mandatory Mandators/ Mandator,' Mandatory Mandatory Mandator,' Mandatory Mandatory Mandatory Mandatory Documents Required S.No 1. 2. 3. 4, 5. Documents Required Passport size photograph of Applicant (JPG) Copy of Applicant photo ID (any one voter ID, Aadhar card, Driving Lice nse, either Passport or PAN) (in PDF Format) For the authentication of place and address of shop & establishment copy of any one (PDF) Rent Agreement ,Telephone bill ,Electric payment ,Ownership deed*,Partnership deed* Memorandum of these documents have many pages than scan and upload only consistent information pages only in PDF format} Photograph of shop/ establishment in which name panel is visible. (JPG/ PDF format) Partnership deed / MOU (PDF) - In case of Company / Partnership firm 418 6 2018 D. Department Qflndusny PQlicy. and Investmellt Prmnqtiqn 12, Registration under Boii•éi' Act, 1923 Application Form S.N0 1 2 3 4 5 6 7 8 9 10 11 12 Fields captured in the application form Type of Registration Type of Boiler Total Heating Surface Area (Sq mt.) Name of Manufacturer Boiler / Economiser Works Number Manufacturing place Manufacturing year Maximum Evaporation (Tonne/Hr) Maximum Working Pressure (KÜcm2) Power generation in MW Maximum

Working Temperature in o c Piping Involved Data Type Radio button • Boiler • Small Industrial boiler • Economiser Drop down(No of Fields— 5) Numeric Alphanumeric Alphanumeric Alphanumeric Numeric Numeric Numeric Numeric Numeric Drop down (No of Fields — 2) Mandatory/ Optional Man datory Mandatory Man datory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Documents Required 5.No 1 2 3 4 5 6 7 8 9 10 11 Documents Required IBR Certificate form : 11 (1) or 11 (2) Form Ill Form Ill C Form IVA Form VII Form Vill Form WII Steam pipe line Drawing Duly Signed by Owner Registration Certificate of Contractor Certificate of Welder Details of Supervisor 6 2018 13. Transfer of Boiler under Boiler Act 1923 Applicatioa$orm S.No 1 2 3 4 5 6 7 8 9 10 11 12 Fields captured in the application form Type of Registration Registration number Type of Boiler Total Heating Surface Area (Sq mt.) Name of Manufacturer Manufacturing place Manufacturing year Maximum Evaporation (Tonne/Hr) Maximum Working Pressure (KÜcm2) Power generation in MW Maximum Working Temperature in c Piping Involved Data Type Radio button(No of Fields 2) Aiphanumeric Drop Down(No of Fields - 5) Numeric Alphanumeric Alphanumeric Numeric Numeric Numeric Numeric Numeric Drop down (No of Fields— 2) 419 Mandatory/ Optional Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Documents Required S.No 1 2 3 4 5 Documents Required Form 2D Steam pipe)ine drawing duly signed by Owner Registration certificate of Contractor Certificate of Welder Details of Supervisor 420 6 2018 14. Manufacturing of Boilers under Boilers Act 1923 Application Form S,N0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 Fields captured in the application form Name of Firm Firm Type Drop down. In addition to CAF (HUF/Society/Department Undertaking) PAN TAN EPFO Registration EST Registration Telephone Fax Website URI Official Email id Block No/ House No/ Plot No Road/Street/Land Area/LocaiIty Pin code District Data Type Alphanumeric Drop Down(Additional No of Fields — 4) Alphanumeric Alphanumeric Alphanumeric Alphanumeric Numeric Numeric Alphanumeric Alphanumeric Alphanumeric Alphanumeric Alphanumeric Numeric Drop Down Ma ndatory/ Optional Mandatory Mandatory Mandatory Optional Optional Optional M andatory Optional Optional Optional Mandatory Mandatory Mandatory Mandatory Mandatory Board Member Detail (Add button required in case of more than 1 member , for rows to be added) optional , Service Specific Members Name Gender Category Knowledge level Equity Participation (in rupees) Equity Participation {in Ya) Contact Person Details Representative Name Mobile Number Aadhaar Number Email Documents Required Text Drop Down(No of Fields — 3) Drop Down (No of Fields 6) Orop Down(No of Fields 6) Numeric NumerEc Text Numeric Numeric Alphanumeric Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Optional Mandatory S.No. 1 2 3 Documents Required Drawing Certificate of Welder Registration Certificate 6 2018 15. Registration & Renewal under Boiler Act 1923 to work as Manufactufefl/Repairer/Erector 421 Application Form I S.NO I Fields captured in the application form Application for (multiple selection are 1 allowed) 2 Data Type Check Box Manufacturer Repairer Erector Drop Down Mandatory/ Optional Mandatory Mandatory Class Documents Required • Special Class Class I Class El Class Ill S.No 1 3 4 [5 6 7 Documents Required Form XVIIE : i Details of Machinery : Details of Manpower : Details of Employed Weiders : Registration Certificate : Details of Workshop Details of Power(Electricity) : 422 6 2018 3-3-2017-qRZlJ 21 2018 Rlfh $1 2017—18" u-q-lq I RTfh a-u-r€r -a utrr— / ga.g,g.å.. 6 2018 VT-GQ asré. åf&rr. eya ZB grvr $1 !üvr 3.1 3.1 (1) 3.1 (2) 05 8i3T i 3.1 (3) 3.1 (4) g. -Q nreiTjr Qir 05 423 [4 (11) 424 6 2018 3-1 (5) tT2.7T QTr 3.1 (6) 5000 3.1 (7) fig 3.1 (9) 3.1 05 50.00 I 6 2018 3.1 (11) 3.2 3.2(1) 03 02 3.2(2) R-ærr J 3.2(3) arrR I 3.2(4) ft-ant 3.2(5) BufVT I 3.3 qu-•l ; 425 6 2018 426 3.4 fi•.F 3.4(1) q-rt 3.4(3) 3.h(5) qogo 6 2018 3TI-q *rHT 3.4b) 3.4(8). 3ßfÄ I 15 $1 3.4(9). 30 03 fig 3.5 a-Ri R-zrq 427 6 2018 428 3.6 3.7 ÜTTTI 3.8 3.9. 3.10 ' föf.fi 6 2018 429 1 2 3 (31) 08 800 d00 (-qq-utvf 30.000 / (qivf alam) 30.000 / — 1.000/— op-%fäzff 500 / *en-$ra 430 6 2018 qbræ 3.10(3) fi•drq .3.10(4) $1 75 •tnQ-Q-TlQ I 3.10(5) 15 trq TruT 3.10(6) 03 car 45 4 (71) xrqq*, 6 2018 431 25 3.10 (7) 3.10(8) ea 75 geg 3.11 ÄVT<7:- itrwi 432 6 2018 3.12 qfQ1eT0f 2.00000/— HE) qh-y-a 3.13 Q: eg gi-€r 50 i -$1 70 3.14 onTrrtr 3.15 3.16 JTfh-åu I Q.TITT 4 (TT)) No. B-3243 6 2018 433 Jabalpur, the 26th June 2018 AMENDMENT IN "THE HIGH COURT OF MADHYA PRADESH RULES, 2008 " Sub-rule 3 (A) of rule 18 in chapter-Xll as published in the Madhya Pradesh Official Gazette Notification dated 6th April 2018 (Part-IV €1)] is withdrawn. By order of Hon'ble lhe Chief Justice, A. K. SHUKLA, Registrar General.