

PLEASE PRINT THIS MATTER ON YOUR COMPANY LETTER HEAD

Date :

The Hon. Secretary
**Indian Speciality Chemical
Manufacturer's Association (ISCMA)**
1156, Bole Smruti Co-Op Housing Society,
Suryavanshi Kshatriya Sabhagriha Marg, Off :Veer Savarkar Marg,
Dadar (West), Mumbai- 400028.

Sub: Membership application

We hereby apply for membership of **Indian Speciality Chemical Manufacturer's Association (ISCMA)** under the category of (tick the applicable category).

Please enrol me / us as Life Member / Large Scale Manufacturer / Small Scale Industry / Service Industry / Dealer of your association from _____ (Month, Year)
I/we have read the charter of the organisation and agree to abide by the rules and regulations set by ISCMA from time to time.

We are enclosing herewith Cheque / Demand Draft / NEFT receipt / RTGS receipt / in favour of Indian Speciality Chemical Manufacturers Association.

We are also enclosing the documents as per the requirements of the form.

Thanking you

**Name / Designation and signature of Applicant (With the stamp)
Regular Membership (To be renewed yearly)**

1. Medium / Large Scale Industries
2. Small Scale (SME) Industries
3. Businessman (Trading)
4. Service Industry

**INDIAN SPECIALITY CHEMICALS MANUFACTURERS' ASSOCIATION
APPLICATION FORM**

No.	Type of Membership	Tick	Membership	Entrance fees	Membership Fees
1	a) Life Membership		Turnover more than 100 Crores	-	Rs. 1,00,000.00
	b) Life Membership		Turnover between 50 Cr. To 100 Crores	-	Rs. 75,000.00
	c) Life Membership		Turnover below 50 Crores.	-	Rs. 50,000.00
2	a) Yearly Membership		Small Scale Industry (Small Scale Manufacturer)	1,000.00	Rs. 2,500.00
	b) Yearly Membership		Turnover below 50 Crores (Medium Scale Manufacturer)	1,000.00	Rs. 11,000.00
	c) Yearly Membership		Turnover above 50 Crores (Large Scale Manufacturer)	1,000.00	Rs. 20,000.00
3	Yearly Membership		Service Industry (Associate Member)	1,000.00	Rs. 5,000.00
4	Yearly Membership		Dealers (Associate Member)	1,000.00	Rs. 5,000.00

*Except Life Membership, other categories are on Annual Basis.

PLEASE FILL UP THE REQUIRED INFORMATION

S.No.	Requirement	Detail
1	Name	
2	Designation	
3	Name of the Company	
4	Office Address	
	Factory Address	
5	Pan No. (copy to be attached)	
6	Aadhar Card No. (copy to be attached)	
7	Landline tel. No.	
8	Mobile No.	
9	Email ID	
10	Website	

11	Name of Representative/ s with Designation and contact details (email id & Cell No.)	
12	Proposer	N.A
13	Secunder	N.A.
14	Constitution of the Company/ Firm (tick the applicable one)	a. Public Limited b. Private Limited c. Partnership Firm d. Proprietorship Firm e. Other
15	Category : Large Scale Industry/ Small Scale Industry/ Service industry/ Dealers (proof to be attached- copy of licence issued by local authority)	
16	Details of items manufactured	
17	Details of items exported	
18	Total number of employees	
19	Year of establishment (a) Registration Number of the Company (attach copy) (b) GST Number (attach copy)	
20	Turnover of last three years	1. 2. 3.
21	Name of other trade association where the applicant is member	
22	Authorized signatory	

I hereby confirm that the information given above is true to the best of my knowledge and belief.

Name / Designation and signature of Applicant (with the rubber stamp)