MOHALI INDUSTRIES ASSOCIATION
(An ISO 9001:2015 Certified Association)
MIA Bhawan, Bay No. 143-144, Opp. E.S.I. Hospital, Industrial Area, Phase VII
S.A.S. Nagar (Mohali)-160 055 (Pb.) Phone: +91-172-2236576, 5091399
Website: www.mohaliindustries.com, e-mail: miaphase7@gmail.com

50th ANNIVERSARY
1973 to 2023

The President,
Mohali Industries Association,
Mohali.

Dear Sir,

1. I/We, M/s _____-
_____
(Name and Address)

_____ are interested to get ourselves enrolled as a member of Mohali

Industries Association.

2. I / We have read the aims and objectives of the Association and agree to abide by its constitution, rules and regulations thereunder / enforced from time to time.

3. I / We nominate Shri _____
(Name and Designation)

_____ as my / our representative.

4. I/ We are remitting Entrance Fee of Rs. _____ and Annual Subscription of Rs. _____ for the year _____ by cheque/draft. No./NEFT _____ dated _____ in favour of "Mohali Industries Association" Account no.30014596195, IFSC Code: SBIN0063809, SBI Phase VII, Industrial Area Mohali Branch.

5. Information about our company is furnished in the prescribed forms enclosed herewith.

6. Mandatory requirement: Copies of (1) Udyam Registration (2) GST Registration (3) Certificate of Incorporation (4) MoA are attached along with the form.

7. I/We shall be thankful if you will kindly enroll me/our company as a member of the Mohali Industries Association.

Yours faithfully,

(Name and Designation)

Place:

Dated:

Encl: as above

(Documents to be attached: Copy of Udyam Registration, Copy of GST regn, 2 passport size photographs, application form fully filled up, signed and stamped along with signature of Proposer & Seconder)

MOHALI INDUSTRIES ASSOCIATION

MIA BHAWAN, BAY NO. 143-44, INDUSTRIAL AREA, PHASE VII,
OPP. ESI HOSPITAL, MOHALI – 160055. TEL:0172- 2236576, 5091399
E-mail: miaphase7@gmail.com, mohaliindustriesassociation@yahoo.co.in
Website: www.mohaliindustries.com, **Twitter @MIA**26531406 **(ISO9001:2015)**

Photograph of the Representative

QF/ADM/009 **Rev:03**
Dated: 04.11.2022

INFORMATION ABOUT THE APPLICANT COMPANY

1. Name of the Unit/Company _____
2. Address of the Unit/company _____
   _____
   _____
3. Registered Office, if any _____
4. Date of Establishment _____
5. Name of Prop/ Managing Partner/
   Partner/MD/CEO _____
6. Telephone Nos. Mobile _____ Factory_____
   Office _____ Resi. _____
   Fax _____ e-mail _____
   Website _____
7. Status of Industry Small ☐ Medium ☐ Large ☐
8. Whether the unit is enrolled with
   (a) State Directorate of Industries as SSI unit (if so, attach copy) Yes ☐ No ☐
   (b) UAM registration No.: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
   (c) GST registration No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
9. Please Tick Whether?

Private Limited	☐	Proprietorship	☐
Public Limited	☐	Partnership	☐

10. Type of Membership sought

Large Scale (Annual Turnover above Rs. 20 Crore)	☐
Medium Scale (Annual Turnover upto Rs. 20 Crore)	☐
Small Scale (Annual Turnover upto Rs. Rs.6 Crore)	☐
Associate Member	☐

11. Annual Turnover of previous three years, in lakhs

Year 2019-20 Rs. _____
Year 2020-21 Rs. _____
Year 2021-22 Rs. _____

12. Whether covered under:

(a)	Central Excise	Yes	☐	No	☐
(b)	Income Tax	Yes	☐	No	☐
(c)	Employees Provident Fund	Yes	☐	No	☐
(d)	GST	Yes	☐	No	☐
(e)	ESI	Yes	☐	No	☐
(f)	Service Tax	Yes	☐	No	☐

13. Sanctioned Power Load _____ KW

Power Supply category SP ☐ MS ☐ LS ☐

14. (a) Entrance Fee : Small Scale : Rs.5,000/-, +18% GST
Medium Scale: Rs.10,000/- +18% GST
Large & Associates Members: Entrance Fee is Equal to one year's subscription + GST 18%

(b) Annual Subscription (Paid in Advance)

Large Scale	Rs. 15,000/- + 18% GST
Medium Scale	Rs. 7,500/- + 18% GST
Small Scale	Rs. 4,000/- + 18% GST
Associate Member	Rs. 7,500/- + 18% GST

15. (a) No. of Persons employed _____

(b) No. of Qualified employees MBA's ☐ BE / B.Tech ☐
Diploma Holders ☐ Graduate ☐
Skilled ☐

(c) No. of Unskilled employees ☐

16. No. of shifts working Single ☐ Double ☐ Triple ☐

17. Type of Industry Engineering ☐ I.T. ☐
Services ☐ Marketing ☐

18. Information about Products / Service

(a) Name of finished products _____

(b) Brand Name if any, _____

(c) Catalogue if any Enclosed ☐ Not Available ☐

19. If you are an exporter please indicate :

(a) the products exported _____

(b) the countries to which they were exported during the proceeding twelve months _____

20. Products category under which unit should be enlisted

Abrasives	☐	Apparels/Textile	☐	Auto/Tractor Components	☐	Castings	☐
Chemicals	☐	Dairy	☐	Educational	☐	Electrical Fittings	☐
Electrical Rewinding	☐	Electronics / Computers	☐	Electroplating	☐	Fabricators	☐
Fasteners	☐	Food Processing	☐	Forgings	☐	Furniture	☐
Generator	☐	Health Care	☐	Industrial Gases Products	☐	IT Enabled Services	☐
Leather Products	☐	Medical Instruments	☐	Packaging	☐	Paints	☐
Pharmaceutical	☐	Plastics	☐	Pollution Control	☐	Railway Equipment	☐
Refrigeration	☐	Rubber Products	☐	Sanitary Goods	☐	Sports Goods	☐
Tools/Dies	☐	Water & Beverages	☐	Weighing machines	☐	Others	☐
Website Develop	☐	Water tanks	☐	Transformers	☐	Scaffolding	☐

21. Approximate investment in Plant Machinery, in lakhs : Rs : _____

22. Type of machinery installed CNC ☐ Conventional ☐
Fully automated ☐ Semi Automated ☐

23. Spare Capacity for such machines, if any _____

_____

24. No. of Computers installed _____

25. (a) Access to internet/e-mail Yes ☐ No ☐

(b) Using Internet for Marketing ☐ Purchase ☐

Correspondence ☐ Recruitment ☐

26. In case of more than 1 plant please mention the address of other plant locations _____

_____

27. Is your Organization

(a) ISO 9001 :2015 Certified Yes ☐ No ☐

(b) ISO 14001:2004 Yes ☐ No ☐

(c) TS 16949: 2002 Yes ☐ No ☐

If yes, then please specify the Certification Agencies (a) _____
(b) _____
(c) _____

If no, are you interested being an ISO Certified unit Yes ☐ No ☐

28. Recruitment Procedure through Job Consultant ☐ Advt. ☐

Personal contact ☐ Others ☐

If others, please specify _____

29. Are you interested in serving MIA _____

If yes, then in what position / specialization _____

30. Membership of other Associations, if any _____

_____

31. Do you require trainees in your organization Yes ☐ No ☐

If yes, then specify the no.

Degree holders ☐ Diploma ☐

MBA ☐ Others ☐

If no, why _____

Do you know the benefit of having trainees at your work place?

List of benefits delivered ☐

32. Personal Information of the nominated Representative

Date of Birth _____ Marriage Anniversary _____

Residential Address _____

Declaration:"I will abide by the Rules and Regulations of the Association as mentioned in the Memorandum of Articles of Association as amended"
Thanking you,

Yours faithfully,

Name and Designation

for M/s _____

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Proposed by:

Name & Address ----------Signature ----------

Membership No. _____

Seconded by :

Name & Address _____ Signature _____

Membership No. _____

N.B. (1) Information provided in the form will be kept confidential

(2) The cheque should be drawn in the name of **MOHALI INDUSTRIES ASSOCIATION,** payable at Mohali or You can send the fee online to Mohali Industries Association at State Bank of India, Indl Area Phase VII Branch, A/c no.30014596195, IFSC Code: SBIN0063809)

FOR USE IN ASSOCIATION OFFICE

1. Receipt No.& date _____ Amount received Rs. _____
2. Date of acceptance _____ Membership Registration No. _____
3. Remarks _____ ___

Recommendations of Membership Development Committee after scrutiny of form

Recommended / not recommended for being placed before the Executive Committee for grant of membership of Mohali Industries Association.

CHAIRMAN MEMBERSHIP DEVELOPMENT COMMITTEE **GEN. SECRETARY** **PRESIDENT**

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