**Annexure-II**

**PROPOSAL FORMAT**

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| **ToT Request for**  |
| 1. | Name of the Company |  |
| 2. | Type of the CompanyPSU/Public Ltd/Private Ltd/RegisteredPartnership firm/Others(specify) |  |
| 3. | Certificate ofRegistration /Incorporation No.*(Attach a copy of the**Certificate* ) |  |
| 4. | (a) Whether STARTUP YES/NO |  |
| 5 | Address of the Registered Office |  |
| 6 | Name & Designation of Contact Person |  |
| 7 | Address with telephone No. & Email ID of Contact Person |  |
| 8 | Website address |  |
| 9 | Products/Service handled by theCompany |  |
| 10 | No. of years of experiencein the related area of Activity |  |
| 11 | Annual Turnover for the last three years *(Attach copy of the**audited statements)*  | **2019-2020****2020-2021****2021-2022** |
| 12 | Details of Income TaxRegistration, Sales Tax registration, ServiceTax registration, ExciseDutv Registration | *Managerial* *Engineers/**Scientists**Semi-Skilled**Un -skilled* |
| 13 | PAN number |  |
| 14 | Available Manpower |  |
| 15 | Manufacturing andTesting Facility*(Infrastructure**Equipments)* |  |
| 16 | ISO certification/In-house QA if any |  |
| 17 | Any other information,the Organization wishesto provide |  |
| **Declaration**I/We hereby, declare that the information given in the application and documents attached herewith are true & correct to the best of my/our knowledge and belief. I/We agree that in case any particulars are found incorrect at any time, C-MET has the right to cancel the license of technology transfer for --- ------ --- and all the payments to the C-MET shall stand forfeited.**Date** :**Place:** **Authorized Signatory** **(with official seal)**  |