APPLICATION FORM FOR CLAIMING REIMBURSEMNT OF EXPENSES INCURRED FOR IMPLEMENTATION OF BARCODING REQUIREMENTS

Date:

01	Name of the company with address	
02	IEC No.	
03	RCMC No.	
04	FOB Value of the exports for the preceding financial Years	
05	Address of the Plant where the equipment installed	
06	No. of production lines and Products category of the production lines	
07	List of Equipment, software installed, civil Works carried, professional services etc. (Detailed to be provided as per Annexure A)	
08	Details of products manufactured and countries Exported if any. (Provide a separate note on this)	
09	Particulars of product registration approvals by the Company from the Overseas Food and Drug Authority. (if any)	
10	Copy of Good Manufacturing Practices (GMP) Certificate issued by the Overseas Regulatory Authority. (if any)	
11	Whether bar cording on export consignment is Implemented or not? (if yes enclose cartons of secondary packing and label on tertiary packing showing barcoding)	
12	(Provide a separate note on this) Details of the shipment of barcoded export	
12	consignment	
13	Whether company has registered with iVEDA or not.	
	(enclose copy of registration details if any)	
14	Manufacturing license issued for the plant wherein barcoding equipment is installed with validity (enclose copy)	
15	Actual amount incurred (100 %)	
16	Amount claimed (50% of the amount incurred is eligible for reimbursement)	

DECLARATION

I solemnly declare that the particulars given in the above statement are correct. I bound myself and the company accountable and responsible for any incorrect information given in the above statement and shall immediately refund amount received on the basis of wrong information provided in the above statement.

Signature	:	
Name	:	
Designation	:	
Office Seal	:	

Countersigned by CEO/CHAIRMAN/MD of the Company:

Signature	:	
Name	:	
Designation	:	
Office seal	:	
Place	:	
Date	:	