



## the dyestuffs manufacturers' association of india

46-47, 4<sup>th</sup> floor, 296, Samuel Street, Vadgadi, Mumbai-400 003.

Tel. : 23420752 \* Fax : 23411036 \* E.Mail : dmai@vsnl.com \* Website : www.dmai.org

### ANNUAL MEMBERSHIP APPLICATION FORM

To  
The Hon.Secretary,  
The Dyestuffs Manufacturers' Association of India  
46-47, 4<sup>th</sup> floor,  
296, Samuel Street, Vadgadi,  
Mumbai-400 003.

Dear Sir,

We desire to be admitted as an Ordinary (Non SSI/SSI)/Associate member of your Association. Necessary information and Annual Membership Fee is enclosed with this application stating therein the category of membership. We agree to abide by the Rules and Regulations of the Association.

Proposed by

Seconded by

Yours faithfully

(Signature and Rubber  
Stamp of Co.)

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Stamp of Co.)

Admission fee for Non SSI/SSI/Associate member	Rs.3000.00
Annual Membership fee for SSI Unit	Rs.3000.00
Annual Membership Fee for Non SSI Unit	Rs.5000.00
Annual Membership fee for Associate member	Rs.3000.00

Category of membership (3 below)

- SSI Unit
- Non SSI Unit
- Associate member

Payment : Cheque/Draft No.....Dtd. .... Name of Bank.....  
.....Amount .....

Note : Applicant has to furnish the details as written in the enclosed form.

Proposer and Seconder members should be of good standing.

The Associate members shall not hold any elected post.

The Associate members shall also have no right to vote at any meeting of the Association.

**ORDINARY MEMBERSHIP**

**FOR ASSOCIATION USE ONLY**

Date of	
M.C. Meeting	:
Decision	:
Hon.Secretary Signature	:

**DETAILS OF APPLICANT**

**Name of the Organization  
with Registered address** :

**Correspondence Office Address** :

**Factory Address** :

	Registered Off.	Corresp.Off.	Factory
<b>Telephone Nos.</b>			
<b>Fax No.</b>			

**Email ID** :

**Date of Establishment/Incorporation** :

**Type of Establishment** : Joint Stock Co.  Pvt.Co.,   
(tick what is applicable)

Partnership  Proprietorship

**Name of Directors/Partners/Proprietor** : Name/s Res.Phone No.

**Name of authorised representative/s  
and Designation** :

**Names of Products Manufactured  
(If necessary please attach separate sheet)**

**Production capacity**  
a) Dyestuffs :  
b) Dye Intermediates :

**No. of Labourers employed**  
a) Technical staff :  
b) Non-Technical staff :  
c) Workers :

**Registration No. allotted by the concerned  
Authorities (attach copy of registration  
certificate)**

- 1) SSI/DGTD
- 2) I.E. Code No.
- 3) Central Excise
- 4) Pollution Control consent

(Signature & Rubber Stamp of Co.)

