

# COMPOSITE APPLICATION FOR LICENCES/CLEARANCES

## PART I

### I. GENERAL INFORMATION

|    |                                                                                                                                                |                                                                                                                                                                                                                                                                             |
|----|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1  | Name of the applicant                                                                                                                          |                                                                                                                                                                                                                                                                             |
| 2. | Full Postal Address Office<br>.....<br>.....<br>.....<br>.....<br>.....<br>.....<br>.....<br>Pin.....<br>Tel No.....<br>Fax.....<br>Telex..... | Factory [existing/proposed<br>.....<br>.....<br>.....<br>.....<br>.....<br>.....<br>.....<br>Pin.....<br>Tel.No. ....<br>Fax.....<br>Telex.....                                                                                                                             |
| 3  | Category                                                                                                                                       | SSSBE/SSI/SMALL/MEDIUM/LARGE                                                                                                                                                                                                                                                |
| 4. | Type of Legal Organisation                                                                                                                     | Proprietary/partnership/partnership joint<br>family/private limited company/public limited<br>company/co-operative society/charitable<br>society/public corporation/organizations set up<br>under special act of parliament or state<br>legislature/others (please specify) |
| 5. | Whether Ancillary or not                                                                                                                       | Yes/No<br>If yes, name and address of parent unit<br>.....<br>.....<br>.....                                                                                                                                                                                                |
| 6. | Location                                                                                                                                       | Indl. Estate/indl. Devpt. Area/Devpt. Plot/Growth<br>Centre/Export Processing Zone/any other Indul.<br>Area approved by Govt. /other locations.                                                                                                                             |
| 7  | Is there NRI participation                                                                                                                     | Yes/No. If yes, give details<br>.....<br>.....<br>.....<br>.....                                                                                                                                                                                                            |
| 8. | Name and designation of the Chief Executive                                                                                                    | .....<br>.....                                                                                                                                                                                                                                                              |
| 9  | Name and designation of the occupier (as under Factories Act)                                                                                  | .....<br>.....                                                                                                                                                                                                                                                              |

|                           |                                                                                                                          |                                                                         |
|---------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
|                           |                                                                                                                          |                                                                         |
| 10                        | Is the proposal for ---- establishment of new undertaking/Expansion/modernization/diversification                        |                                                                         |
| 11                        | In case of existing undertaking (please specify)<br>(a) Industrial Licence No.<br>(b) DGTD Regn. No.<br>(c) SSI Regn No. | .....<br>.....<br>.....                                                 |
| II DETAILS REGARDING LAND |                                                                                                                          |                                                                         |
| 12                        | Whether the land is owned by the applicant or held on lease rent                                                         | Owned/Held on lease/Rent/otherwise (specify)<br>.....<br>.....<br>..... |
| 13                        | If not owned, name and address of the title holder                                                                       | .....<br>.....                                                          |
| 14                        | No. and date of title deed/lease deed/rent deed                                                                          | .....                                                                   |
| 15.                       | Name of Sub Registry Office                                                                                              | .....                                                                   |
| 16                        | Name of Panchayath/Municipality/ Corporation Ward/Division No.                                                           | .....<br>.....<br>.....                                                 |
| 17                        | Name of Development Authority (if applicable)                                                                            | .....                                                                   |
| 18.                       | Village.....<br>District.....                                                                                            | Taluk.....                                                              |
| 19                        | Survey Nos. with Sub Division Nos.                                                                                       | .....                                                                   |
| 20                        | Extent of land                                                                                                           | .....                                                                   |
| 21                        | Area available for disposal of effluent (if applicable)                                                                  | .....                                                                   |
| 22                        | Boundaries : East..... West .....                                                                                        | North ..... South.....                                                  |
| 23                        | Other information from in----<br>(a) Nearest Police Station and distance from it<br>(b) Nearest Railway Station and      | .....Km<br>.....K m                                                     |

|                                   |                                                                                                                                                                                                                                                            |                                                            |
|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
|                                   | distance from it<br>(c) Nearest Community water supply/Canal/ River/Well/Pond/Backwaters and distance<br>(d) Nearest House No. and distance from site<br>(e) Nearest Educational Institution/Religious Worship Centre<br>(f) Distance from other buildings | .....K m<br>..... Km<br>..... Km<br>.....Km<br>.....       |
| III. DETAILS OF FACTORY BUILDINGS |                                                                                                                                                                                                                                                            |                                                            |
| 24                                | Building No.(if existing).....                                                                                                                                                                                                                             | Ward..... Grama Panchayath/ Municipality/Corporation ..... |
| 25                                | Name of Road/Street                                                                                                                                                                                                                                        | .....                                                      |
| 26                                | Regn. No. and Full Address of Architect/Engineer/Supervisor/                                                                                                                                                                                               | Regn. No.....<br>.....<br>.....                            |
| 27                                | Reg. No. & Address of Electrical Contractor                                                                                                                                                                                                                | Regn. No. ....<br>.....<br>.....                           |
| 29                                | If for expansion of Existing Factory Building please specify<br>(a) Year of Establishment<br>(b) Building Permit No. and date of issued by Local Body                                                                                                      | .....<br>.....                                             |
| 30                                | Purpose of Construction                                                                                                                                                                                                                                    | .....                                                      |
|                                   |                                                                                                                                                                                                                                                            | Existing                      Proposed                     |
| 31                                | Plinth Area (Floor wise)                                                                                                                                                                                                                                   | .....Sq. Mtr. ....Sq. Mtr.                                 |
| 32                                | Carpet Area (Floor wise)                                                                                                                                                                                                                                   | ..... .....                                                |
| 33                                | Height of the Building                                                                                                                                                                                                                                     | ..... .....                                                |
| 34                                | Set back from boundaries (for proposed construction only)                                                                                                                                                                                                  | ..... .....                                                |
| 35                                | Details of Open Spaces                                                                                                                                                                                                                                     | ..... .....                                                |
| 36                                | Estimated cost of Proposed construction                                                                                                                                                                                                                    | ..... .....                                                |

#### IV. MACHINERY AND POWER

##### 37. Details of Plant & Machinery

| Sl No. | Item | Number | Price | Name of supplier |
|--------|------|--------|-------|------------------|
|        |      |        |       |                  |
| Total  |      |        |       |                  |

##### 38. Details of Power Requirement

| Bulb/Tube           | Fans                | Plugs, Heaters etc. | Motors | Total Demand |
|---------------------|---------------------|---------------------|--------|--------------|
| No. Wattage of Each | No. Wattage of each | No. wattage of each | KW/KVA |              |
|                     |                     |                     |        |              |

|    |                                                                                                                                                                      |                                           |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| 39 | Actual requirement of of Electric Connection (Whether Power Requisition is for :- New Service/reconnection/an alteration to existing installation/Temporary service) |                                           |
| 40 | Installed capacity for 8 hours                                                                                                                                       | .....<br>.....<br>.....<br>.....          |
| 41 | Proposal for augmentation, if any                                                                                                                                    | .....<br>.....<br>.....<br>.....<br>..... |

| V CAPITAL INVESTMENT |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                        |
|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| 42                   | <p>Total estimated cost of the project (if the proposal is for expansion or far diversification, information only about the additional investment required may be indicated here (in Rupees)</p> <p>(a) Land</p> <p>(b) Building</p> <p>(c) Plant &amp; Machinery</p> <p>    (i) Imported</p> <p>    (ii) Indigenous</p> <p>(d) Miscellaneous assets</p> <p>(e) Contingencies</p> <p>(f) Preliminary/pre-operative expenses</p> <p>(g) Margin money for working capital</p> <p>Total</p> | <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> <p>Rs.....</p> |
| 43                   | Working Capital (total requirement at 100% capacity utilization)                                                                                                                                                                                                                                                                                                                                                                                                                         | Rs.....                                                                                                                                |
| 44                   | In the case of existing units please indicate the total investment in fixed assets (the information should pertain to all the existing units/factories belonging to the same undertaking)                                                                                                                                                                                                                                                                                                | Rs.....                                                                                                                                |
|                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                        |

| VI RAW MATERIALS |                                                                                                                     |                             |               |            |        |
|------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------|------------|--------|
| 45               | A. Annual requirement of main raw materials, consumables etc. ( at 100% capacity utilization, 8 hours single shift) |                             |               |            |        |
| Sl No.           | Name of the Item                                                                                                    | Quantity (Pl. specify unit) | Cost per Unit | Total Cost | Source |
|                  |                                                                                                                     |                             |               |            |        |
|                  |                                                                                                                     |                             |               |            |        |
|                  |                                                                                                                     |                             |               |            |        |
|                  |                                                                                                                     |                             |               |            |        |
| Total            |                                                                                                                     |                             |               |            |        |

|                  | B.Details of Imported Raw materials |                             |               |            |        |
|------------------|-------------------------------------|-----------------------------|---------------|------------|--------|
| Sl No.           | Name of the Item                    | Quantity (Pl. specify unit) | Cost per Unit | Total Cost | Source |
|                  |                                     |                             |               |            |        |
| Total            |                                     |                             |               |            |        |
| Grand Total[A+B] |                                     |                             |               |            |        |

A. No. of Shifts Proposed: .....

|                         |                                                          |                                     |                                               |             |     |
|-------------------------|----------------------------------------------------------|-------------------------------------|-----------------------------------------------|-------------|-----|
| VII CAPITAL INVESTMENT  |                                                          |                                     |                                               |             |     |
| 48. Using Fuels         |                                                          |                                     |                                               |             |     |
| Sl No.                  | Item                                                     | Quantity consumed per day (8 hours) | Fuel analysis report if available attach copy |             |     |
|                         |                                                          |                                     |                                               |             |     |
| VIII FINISHED PRODUCTS  |                                                          |                                     |                                               |             |     |
| 47                      | Details of Products                                      |                                     |                                               |             |     |
| Sl No.                  | Item (include bye-products & Intermediary products also) | Total product                       | Unit price (Ex-factory)                       | Total value | Use |
|                         |                                                          |                                     |                                               |             |     |
| IX MANPOWER REQUIREMENT |                                                          |                                     |                                               |             |     |
| 48                      | Details of Employment                                    |                                     |                                               |             |     |

| Sl No.                                                                                                        | Description                                                                                                                                                                 | Existing                                  | Proposed | Total |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------|-------|
| [[a]                                                                                                          | Managerial                                                                                                                                                                  |                                           |          |       |
| [b]                                                                                                           | Supervisory<br>Technical<br>Non-technical                                                                                                                                   |                                           |          |       |
| [c]                                                                                                           | Skilled Labourer<br>Unskilled Labourer                                                                                                                                      |                                           |          |       |
| [d]                                                                                                           | Semi-skilled Labourer                                                                                                                                                       |                                           |          |       |
| [e]                                                                                                           | Others                                                                                                                                                                      |                                           |          |       |
| X MISCELLANEOUS DETAILS                                                                                       |                                                                                                                                                                             |                                           |          |       |
| 49                                                                                                            | Working Time                                                                                                                                                                | .....<br>.....<br>.....<br>.....          |          |       |
| 50                                                                                                            | Scope for future expansion, if any,                                                                                                                                         | .....<br>.....<br>.....<br>Signature..... |          |       |
| XI POLLUTION CONTROL<br>(To be filled up only by units which require permission from Pollution Control Board) |                                                                                                                                                                             |                                           |          |       |
| 51                                                                                                            | Investment proposed on<br>(a) Effluent Treatment and disposal<br>(b) Mission Control<br>(c) Solid Waste Processing and Disposal<br>(d) Sound Pollution Control<br><br>Total | .....<br>.....<br>.....<br>.....<br>..... |          |       |
|                                                                                                               |                                                                                                                                                                             |                                           |          |       |

| 52                             | Water consumption per day<br>[a] Boiler<br>[b] Cooling<br>(1) Contact<br>(2) Non-contact<br>(c) Domestic purpose<br>(d) Process/Production<br>(e) To other purpose<br><br><div style="text-align: center;">Total</div> | .....<br>.....<br>.....<br>.....<br>.....<br>.....<br>.....                                    |                |                    |                            |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------|--------------------|----------------------------|
| 53                             | Source of Water                                                                                                                                                                                                        | .....                                                                                          |                |                    |                            |
| 54                             | Trade effluent and Sewage Effluent                                                                                                                                                                                     |                                                                                                |                |                    |                            |
| (a)                            |                                                                                                                                                                                                                        |                                                                                                |                |                    |                            |
| Ref. No. of Outlet in the Plan | Unit Source of Effluent                                                                                                                                                                                                | Effluent Quantity m <sup>3</sup> /Day                                                          | Quality        |                    |                            |
|                                |                                                                                                                                                                                                                        |                                                                                                | Characteristic | Unit               | Concentration              |
|                                |                                                                                                                                                                                                                        |                                                                                                |                |                    |                            |
| (b)                            |                                                                                                                                                                                                                        |                                                                                                |                |                    |                            |
| Ref. No. of Outlet in the Plan | Outlet Location Possession/access                                                                                                                                                                                      | Effluent Discharged into Stream/Well, Sewer/Land for Irrigation and for percolation (identify) |                | Effluent Treatment |                            |
|                                |                                                                                                                                                                                                                        |                                                                                                |                |                    |                            |
| 55                             | Solid wastes                                                                                                                                                                                                           |                                                                                                |                |                    |                            |
| Unit source                    | Quantity (per day in tonne)                                                                                                                                                                                            | Quality                                                                                        |                |                    | Mode of treatment disposal |
|                                |                                                                                                                                                                                                                        | Characteristic                                                                                 | Unit           | Concentration      |                            |
|                                |                                                                                                                                                                                                                        |                                                                                                |                |                    |                            |



| 56                                                                  | Emission                                                 |                  |                    |               |               |
|---------------------------------------------------------------------|----------------------------------------------------------|------------------|--------------------|---------------|---------------|
| (a)                                                                 |                                                          |                  |                    |               |               |
| Stack No.                                                           | Emission Sources*                                        | Height M         | Inside dimension M |               |               |
|                                                                     |                                                          |                  | Top                | Bottom        |               |
|                                                                     |                                                          |                  |                    |               |               |
| * State type and quantity per hour of fuel in case of boiler stacks |                                                          |                  |                    |               |               |
| (b)                                                                 |                                                          |                  |                    |               |               |
| Stack No.                                                           | Velocity of flow                                         | Emission Quality |                    |               | Control means |
|                                                                     |                                                          | Characteristics  | Rate               | Concentration |               |
|                                                                     |                                                          |                  |                    |               |               |
| 57                                                                  | Sound Pollution Significant Sources and Control Measures |                  |                    |               |               |
|                                                                     |                                                          |                  | Signature<br>Name: |               |               |
|                                                                     |                                                          |                  |                    |               |               |

Register Regarding application submitted to the Industrial Area Board/District Board/State Board

|  |                                                               |      |
|--|---------------------------------------------------------------|------|
|  | S No.                                                         | [1]  |
|  | Name and address of the applicant                             | [2]  |
|  | Licence applied for (specify)                                 | [3]  |
|  | No.& Date of Acknowledgement receipt                          | [4]  |
|  | Date of presenting in the Board                               | [5]  |
|  | Decision of the Board                                         | [6]  |
|  | Signature of Chairman                                         | [7]  |
|  | Date on which the application sent to the licencing authority | [8]  |
|  | No. and date of licence given                                 | [9]  |
|  | Date of clearance final decision of the Board                 | [10] |
|  | Remarks                                                       | [11] |

FORM C  
[See Rule 9(2)]

GOVERNMENT OF KERALA  
Certificate issued from Industrial Area Board/State Board

CERTIFICATE

Certified that necessary clearance/ No objection Certificate/Licence in respect of M/s.  
.....  
..... (Name and address of the Industrial Undertaking) in Survey Nos.  
..... Of Village of ..... Taluk .....District  
..... In ..... Industrial Area/Plot/Estate/Growth  
Centres/Park/Industrial Township Authority is deemed to have issued as per the Resolution  
No..... dated ..... of the meeting of the Industrial Area Board/.....  
Industrial Township Authority for conducting the activity of ..... in exercise of the  
powers conferred on this Board by Section 26 and 27 of Kerala Industrial Single Window Clearance  
Boards and Industrial Township Development Area Act, 1999 under Section 10 of the said Act.

This certificate is issued today the .....th day of ..... month ..... year  
under the seal of undersigned.

(Seal)

Name  
Designation

..... Industrial Area Board/District  
Board/ State Board/ Industrial Township Authority  
(Delete which are not applicable.)

FORM D  
[Sea Rule 11)  
Appeal submitted to the State Board

1. Name of the applicant :
2. Address :
3. Details of the Industrial Unit
4. Details of the application rejected and from :  
which Single Window Board
5. Date on which intimation regarding rejection :  
of application is received and reasons if any  
with details thereof.
6. Details of the records enclosed herewith :

Place

Date:

Name and Signature of the applicant.

FORM E  
(See Rule 1)  
Appeal submitted to the Government

1. Name of the Applicant
2. Address
3. Details of the Industrial Unit
4. Date on which the notice of rejection  
Received from the State Board and the  
Reason specified if any with details.
5. Details of the records presented herewith:

Place  
Date

Name and Signature of the applicant.

## FORM F

Appeal to the District Board from the Small Scale Industrial Entrepreneurs which has an investment not less than 2 lakhs.

1. Name of the applicant
2. Address
3. Details of Small Industrial Unit:
4. Details of the authority which has  
Rejected the clearance of Licence  
Or Certificate of recommended with  
Modification.
5. Date on which the notice of rejection  
Received and reason with details.
6. Details of records presented herewith.

Place:

Date:

Name and Signature of the applicant.

FORM G

(See Rule 11(4))

Register regarding the Appeal Application.

| S.No. | Name and address of the applicant | No.& date of acknowledgement receipt | Nature subject of appeal | Appeal from which Board | No. & date of licence issued | Remarks |
|-------|-----------------------------------|--------------------------------------|--------------------------|-------------------------|------------------------------|---------|
| [1]   | [2]                               | [3]                                  | [4]                      | [5]                     | [6]                          | [7]     |
|       |                                   |                                      |                          |                         |                              |         |

FORM H

[See Rule 17]

Receipt regarding Fees, Service charge remitted in the Board, name and Place of the Board.

1. Name and address of the applicant :  
remitting the amount
2. To which Industrial Unit the amount is remitted:
3. Service charge :
4. Details of Fees:

| Name of the Authority |                                 | Amount remitted |
|-----------------------|---------------------------------|-----------------|
| 1                     |                                 |                 |
| 2                     |                                 |                 |
| 3                     |                                 |                 |
| 4                     |                                 |                 |
| 5                     |                                 |                 |
| 6                     |                                 |                 |
| 7                     |                                 |                 |
| 8                     |                                 |                 |
| 9                     |                                 |                 |
| 10                    |                                 |                 |
|                       | Total amount remitted above 3&4 |                 |
|                       |                                 |                 |

Place:

Date:

Name, Designation and Signature of the  
Officer who received the amount

Seal of the Board.