

PROFORMA

1.	Name of the purchaser company along with the address	:			
	(a) Name of the contact person	:			
	(b) Phone No. & Fax No.	:			
	(c) E-mail Address	:			
2.	Purpose for which permission has been granted	:			
3.	Area of Land for which permission granted (in Ha.)		Area of Land Purchased (in Ha.)	Area Required (in Ha.)	Pherphar Done (in Ha.)
4.	Have you purchased the total/partial land from the land owners	:	Yea/No If "YES" please submit the Affidavit of land purchased.		
5.	Details of land purchased	:	Ha.		
	(a) Survey/Gut No.	:	Information should be submitted on Separate Sheet		
	(b) Villages	:			
	(c) Taluka	:			
	(d) District	:			
6.	Have you obtained the Change in Zone Certificate from Town Planning Department/MMARDA for bonifide industrial use.	:	Yea/No If "YES" please submit relevant copies		
7.	Have you paid non-agricultural assessment tax levied by the Collector under Section 67 & 115 of the Maharashtra Land Revenue Code, 1996?	:	Yea/No If "YES" please enclose NA tax payment receipt copies		
8.	Whether you have submitted intimation letter to the Competent Authority about the change of use of land with date?	:	Yea/No If "YES" please submit the acknowledgement copy of intimation letter.		
9.	Have you obtained consent from Maharashtra Pollution Control Board (MPCB) Environment clearance/approvals/permissions from respective departments to set up your Project?	:	Yea/No If "YES" please submit the relevant copies of permission/approvals/Documents etc. which are applicable		
10.	Have you commenced the land use for bonafide industrial purpose?	:	Yea/No If "YES" please quote the date of Commencement of Project. If "No" what is		

			the proposed date of commencement for project	
11.	Total Investment	Investment in Plant & Machinery	Employment Generated (Nos.)	Local Employment (Nos.)
12.	In case of SEZ Projects, give the details of percentage of Processing area and Non Processing area utilized. Is it as per the norms of SEZ Act?		:	1) Copy of formal approval
				2) Copy of Notification
				3) Copy of approval of Authorised operations

Place :-

Date :-

Signature of Proprietor/ Director/ Partner
with Seal or Stamp
(Authorised Signatory)