



The Secretary
Automotive Component Manufacturers Association of India
6th Floor, The Capital Court
Olof Palme Marg
Munirka
New Delhi-110 067

Dear Sir,

ENROLLMENT AS MEMBER

We wish to be enrolled as a member of the Automotive Component Manufacturers Association of India under the " **Ordinary member**" category and are hence submitting this Application.

We agree to abide by the Memorandum and Articles of Association of ACMA and further agree to Provide data for the Annual Statistical Return, ACMA Buyers Guide, Business outlook survey, ACMA Membership survey and any other data / information which the Association or its authorized agencies may ask from time to time.

We declare that the information provided by us in the Form is complete in all respects and true to the best of our knowledge.

(Company Stamp)

For and on behalf of

Date : _____

Signature & Designation

* Proposed by :

* Seconded by :

Name : _____

Name : _____

Company : _____

Company : _____

Note : Both Proposer and Seconder should be members of ACMA and this Form should be signed and stamped by their authorised representative only.

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Encls. : 1) Cheque/D.D. No. _____ dated _____

Rs. _____ drawn on _____
towards admission fee and subscription for the current year and payable to Automotive Component Manufacturers Association of India. (See attached Eligibility Criteria for Charges)

- 2) Certificate of Incorporation from ROC (Registrar of Companies)
- 3) Annual Report/ Audited Balance Sheet/ Certificate from Auditor certifying your company's GST (Gross Sales Turnover) for Last 3 years.
- 4) One set of Product Catalogue/ web-link to the E-brochure.
- 5) SSI Registration Certificate (if applicable).

Note : It is mandatory to provide details for all queries to ensure quick processing. Please ensure that the Form is accompanied with all relevant enclosures.

FOR OFFICE USE ONLY

(Secretariat)

Admitted on : Date _____ Place _____

Rejected due to : _____

Payment due (if any) : _____

(Signature: Head, Membership Department)

(Date)

(Regional Office)

Regional Chairperson's Approval : _____
(Signature)

(Date)



Automotive Component Manufacturers Association of India
(THIS FORM SHOULD BE SUBMITTED TO THE RELEVANT ACMA REGIONAL OFFICE)

MEMBERSHIP APPLICATION

- 1) a) Company Name : _____

- b) Address to which : _____
communications are _____
to be sent _____

- Phone (s) : _____
- Fax : _____
- E-mail : _____
- Website : _____
- c) Address of Registered Office : _____

- Phone (s) : _____ Fax _____
- E-mail : _____
- d) Main Plant Address: _____

- Phone (s) : _____ Fax _____
- E-mail : _____
- e) Year of incorporation/ : _____
establishment
- f) Year of commencement : _____
of commercial production
- g) Whether a Public/Private: _____
Ltd. company or a
Proprietary/Partnership Firm
- h) Trade Mark : _____
- i) Name of Managing Director/: _____
Directors/Partners/Proprietor
(with exact designations)

- j) Name of Director/Partner/: _____
 Senior Executive authorised
 to represent on behalf
 of the organisation (with exact designation)
- k) Name of Chief Executive : _____
 Sales-in-charge : _____
 Export-in-charge : _____
 (with exact designations)

2. Registration

- a) SSI Reg. With State Director : Reg. No. : _____
 of Industries or with the
 Development Commissioner Date : _____
 for SSI or otherwise
- b) The company is register as : Large Medium
 (if not SSI)
- c) Reg. Under Factories Act, 1949 Reg. No. : _____
 Date : _____

Note : If a SSI unit, please enclose SSI Registration Certificate.

3. Is your company certified to ISO 9000, TS 16949, OSHAS 14000 and QS 9000 ? If so, please give details of the certification and also enclose a copy.

<u>Certificate</u>	<u>Certifying Agency</u>	<u>Date of Issue</u>	<u>Validity</u>
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4. Manufacturing Plant (s)

Address of the Plant(s) with Ph/fax/E-mail	Name and Designation of head of the Plant	Manufacturing Activities (Products)
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5. Collaboration (s), if any

Name of collaborator/JV Partner and country	Nature of collaboration (Financial, Technical, both or others)	Products	Equity share(%) or 100% subsidiary
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6. Customer Profile

a) Domestic Market

Customer Name (Including Replacement Market)	Vehicle Model	Products Supplied
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b) Overseas Market

Customer Name & Country (Including Replacement Market)	Vehicle Model	Products Supplied
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7. Production achieved in the last three financial years

Product	Year :		Year :		Year :	
	Quantity	Value *	Quantity	Value *	Quantity	Value *

(Value * in Rs. Lakhs)

8. Sales profile for last 3 years

(Value in Rs. Lakhs)

	Year	Year	Year
a) OEM	: Rs.		
b) Replacement Market	: Rs.		
c) Export	: Rs.		
Total	
	

9. Export performance for the last 3 years

Year	Export		% of Export/Sales for the last 3 years
	Quantity	Value	

10. Financial Data (As at) (Value in Rs. Lakhs)

a) Reserve & Surplus	: _____
b) Employment of Capital	
Land & Buildings	: _____
Plant & Machinery	: _____
R & D	: _____
Working Capital	: _____
Total	: _____

Note : Annual Report/ Audited Balance Sheet/ Certificate from Auditor certifying your company's GST (Gross Sales Turnover) for the last 3 years are to be enclosed.

11. Employment (As on _____)

Skilled	:	_____
Semi-skilled	:	_____
Unskilled	:	_____
Casual	:	_____
Temporary	:	_____
Supervisory	:	_____
Managerial	:	_____
R & D Staff	:	_____

Note : All employees including those in the factory, office and field are to be included.

12. Material consumption during the last three financial years

Type of Raw Material	HS Code (6 digit)	Sourced Indigenously		Imported	
		Quantity (MT)	Value	Quantity (MT)	Value

13. Excise duty paid on products manufactured

Product	CET No.	Rate of Duty	Duty paid in the last financial year

14. a) Membership with other Associations/Bodies

b) Member of ACMA Earlier

Yes

No

15. Awards/Certificates received, if any

16. Name & Address of Bankers and Chartered Accountant

17. Any other information

Signature: _____ Form filled by: _____

Date : _____ Designation: _____