Form -'A'

(See rule 3)

Employer

Photo

APPLICATION FOR REGISTRATION

1	Name of the Establishment	:-		
2	Address and situation of the	:-		
	Establishment			
3	Date of commencement of Business			
4	Nature of Business	:-		
	Whether establishment falls under			
	Public Sector or Private Sector			
	Note- (a) Establishment in public sector r	nean	is an establishment owned or managed	
	by (i) the Government or Department of the Government, (ii) a Government			
	Company as defined in clause (45) of sec	ction	2 of the Companies Act, 2013 (18 of	
	2013), (iii) a Corporation (including co-operative society) established by or under			
	any Central Act or State Act which is owned, controlled and managed by the			
	Government, (iv) a Local Authority.			
	(b) Establishment in private sector means an establishment which is not an			
	establishment in public sector.			
5	Address of the office, storeroom,			
	godown, warehouse or work place, if			
	any, other than the above address.			
	(should be filled only when office,			
	showroom, etc. is not separately			
	registered under the Act.)			
6	Name of the Employer.			
7	Residential Address of the Employer.			
	Status/ Designation			
	Mobile No. and E-mail ID			
	Adhar Card No. (upload copy)			

8		•			
0	(1) Category of Establishment (i.e.	:-			
	Shop/ Establishment/ Residential Hotel/				
	Restaurant/ Theatre/ Other places of				
	public				
	amusement or entertainment and other				
	establishment)				
	(2) Type of organisation (i.e. Proprietor,				
	Partnership, LLP, Company/ Trust/ Co-				
	operative Society/ Board)				
9	Details of the Partner/ Director/ Trustee/	:-	Name and		Mobile No.
	Board and Society Members.		Residential	Card	and e-mail id.
			Address	No.	
10					
10	Government Resolution No. in case of	:-			
11	Board/ Corporation. (upload copy)				
11	In case of Company or LLP, certificate of				
	incorporation or partnership registration				
	certificate of appropriate authority (upload				
10	copy)				
12	In case of Co-operative Society or Trust, the				
	certificate of registration of appropriate				
1.0	authority (upload copy)				
13	Registration No. of Reserve Bank of	:-			
	India/Securities and Exchange Board of				
	India/ Insurance Regulatory and				
	Development Authority, etc. or any such				
	registration number which is mandatory				
	before starting such business as banking/				
	share/ mutual fund/ insurance/ finance				
	lending institute, etc.				
	(upload copy)				

14	Name of the members of employer's family	:-	Name of	the person	Relation
	employed in the establishment				
15	Total		Ma	-	W 7
15		:-	Mei	n	Women
	a) No. of the persons occupying position of management				
	b) No. of persons engaged in confidential capacity				
	Total				
16	Details of Manpower/ Workers	:-	Mei	n	Women
	No. of Workers	:-			
	No. of apprentices under the Apprentices Act, 1961 (52 of 1961)	:-			
	No. of contract labour	:-			
	No. of part-time workers	:-			
	Total	:-			
17	a) Name and Residential Address of Authorized person	:-	Name and e-mail ID	Aadhar Card No.	Mobile No.
	b) Name and Residential Address of Manager		Name and e-mail ID	Aadhar Card No.	Mobile No.
18	(A) Is the place of business conducted in	:-	Yes / No	I	
	owned premises?				
	If yes, details of the owner as per	:-	Name of the owner -		
	agreement.		Address –		
			Plot No		
			Gala/ Shop	No. –	
			City Survey	y No	
			Name of the	e Building/	Society -
			Name of th	e Road –	
			Locality, D	istrict, Talu	ka, Village –
			Pin No		
	f the place of business is located in self owned premises documents mentioned at serial				
	number (4) of Part-A of the Schedule should be uploaded alongwith the application.				
	(B) Is the place of business conducted in rental		Yes / No		
	or leased premises?				

	If yes, details of the lessor as per agreement.		Name of the lessor -
			Address –
			Plot No
			Gala/ Shop No. –
			City Survey No
			Name of the Building/Society -
			Name of the Road –
			Locality, District, Taluka, Village –
			Pin -
	If the place of business is located in rented	or	leased premises documents mentioned at
	serial number (5) of Part-A of the Schedule		
	The employer must also upload any one o		-
19	premises which is rented or leased as per Sr. Is the business conducted in the premises		Yes / No
19	owned/rented by any member of the		1037110
	family/relative?		
	If yes, no objection letter for doing such		
	business in the premises of such owner shall		
	be obtained and uploaded, alongwith		
	documents mentioned in column No. 18.		
20	Is the place of business is conducted in a	:-	Yes/ No
	flat/apartment or residential unit in a		
	housing society?		
	If yes, obtain and upload a no objection		
	certificate from the society or any such		
	authority responsible for the maintenance of		
	the premises, alongwith documents		
	mentioned in column No. 18.		
21	Period for renewal which is required. (No.		No. of years
	of years maximum upto 10		
	years)		
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22.

Self-Declaration

I/ We hereby solemnly affirm and state that the business which I/we have started is not banned or prohibited by any Act, Rules, Law or Order of any Court of Law or any competent authority and the premises where I am/ we are conducting the said business is free from violation of any Act, Rules, Order of any Court of Law or any Competent Authority.

I/ We hereby declare that the information provided above is true and correct to the best of my/our personal knowledge, information and belief. I am/ we are fully aware about the consequences of giving false information. If the information is found to be false, I / We shall be liable for prosecution and punishment under the Indian Penal Code (45 of 1860) and /or any other law applicable thereto.

I/ We have obtained necessary licenses, permissions, permit for the conduct of this business and the place of business from the appropriate Authority.

I/We shall be responsible and liable for legal action if the business is conducted without proper licence, permission, permit from the appropriate Authority.

I / We submit and declare that I/We will not undertake any illegal activity or any business prohibited in law in force in India.

I / We declare that the place of business is not located in any area wherein commencing / running of such business is prohibited by any law or order of any Competent Authority.

I / We hereby declare that the copies attested by me are true copies of original documents. I am /we are well aware of the fact that if the copies are found false/forged, I shall be liable for prosecution and punishment under the Indian Penal Code (45 of 1860) and /or any other law applicable thereto.

I / We undertake to abide by the provisions of the Maharashtra Shops and Establishments (Regulation of Employment and Conditions of Service) Act, 2017 (Mah. LXI of 2017) and the Rules and orders passed thereunder by any Authority.

Date:

Place:

Name and Signature of Applicant.