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## MEMBERSHIP FORM

Name of the Company/Organization \_\_\_\_\_

Complete address \_\_\_\_\_

Registration No. \_\_\_\_\_ Registration Date \_\_\_\_\_

CIN No.

GST No.

PAN No./TIN No.

\_\_\_\_\_  
Name of the CEO

\_\_\_\_\_  
Nature of business

\_\_\_\_\_  
Annual turnover

\_\_\_\_\_  
Email ID

Mobile No.

Landline No.

Telefax No.

\_\_\_\_\_  
Signature of the applicant

\_\_\_\_\_  
Name of the applicant

\_\_\_\_\_  
Designation

\_\_\_\_\_  
Date & Place

Send the below mentioned documents on email id - [ddg\\_ace@indiaace.org](mailto:ddg_ace@indiaace.org) :-

1. Copy of Memorandum and Article of Association of your Company/Organization duly certified by the Company Secretary of your Company/Organization.
2. CIN No, PAN/TIN No and GST Registration Certificate of your company/Organization.
3. Copies of Authorization letters/license issued by PNGRB/Central Government and Concerned State Govts.
4. Details of allotted Geographical areas.
5. Certified Copies of the Annul Reports and audited A/Cs for the last 2 years of your Company/Organization.