FORM-I

[See rule 7(v) and 9(1)(a), (2)]

FORM OF APPLICATION FOR ISSUE OF LICENCE TO ESTABLISH/RENEW/RELOCATE/EXPAND/OPERATE THE WOOD BASED INDUSTRIES

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To,

The Principal Chief Conservator of Forest And Head of Forest Force, Assam, Aranya Bhavan, Panjabari, Guwahati-37.

(Through the Divisional Forest Officer, Dibrugarh Division Division)

Sir,

I/We Shri 22 son of VRAJLAL inhabitant(s) of test under Baksa Police Station, District Baksa By profession, do hereby apply for Crant of license to establish/renew/expand/operate the Wood Based Industries as mentioned below using as raw materials. The particular of the Wood Based Industry are given herein below:-

1. APPLICANT DETAILS:

a. Name of the Applicant (Block Capitals)
(Owener, Partner, Director etc.)

a. Father's Name : vrajlal

a. Aadhaar Card No. (copy attached)
 b. 123456789123
 a. Pan Card No. (copy attached)
 b. 123456789
 c. 123456789
 d. GST No. (if any)
 d. 78945612137

a. Postal Addressb. TESTa. Permanent Home Addressc. test

a. Mobile No. : 1234567890

a. Email ID : nakul.cognisun@gmail.com

2. TYPE AND CATEGORY OF THE PROPOSED UNIT TO BE SET UP: (Tick Mark)

- a. Sawing of round logs / sawn timber
- b. Vennening / Peeling
- c. Splint & match box
- d. Others (specify)

3. DETAILS OF THE PROPOSED UNIT:

a. Name of the Wood Based Industry : Cognisun : TEST a. Location / Address : TEST a. GPS co-ordination of the boundary

a. Forest Range/Division : Dibrugarh Division

a. District : Baksa : TEST a. Name of the Industrial estate

a. Licence No. with date of validity (for renewal) a. Period for which the licence are to be renewed

a. Registration No. of the unit in Commerce and : 1321213 Industries Department (if already registered)

a. Whether the unit is functioning or not If yes, since : NO when it was functioning

a. Name of the new location in case of relocation along with GPS co-ordination

a. Reason for relocation the wood based industry

4. Nature of ownership (document to be attached) (Tick nark whichever is applicable)-a. PRIMARY5. Details of machinery to be installed

SL.	Type of machines	With or	Size of	Horse	Number	Installed o	
No.	with specification size	without	Specification	Power		cu.mt. (annual)	
		trolley				Round	Sawn
						logs	timber
1	Horizontal band saw						
2	Vertical band saw						
3	Circular saw						
4	Peeling Machine						
5	match stick making						
	machine						
6	others						
7	Horizontal band saw						
8	Vertical band saw						
9	Circular saw						
10	Peeling Machine						
11	match stick making						
	machine						
12	others						

6. Total Capital Value of the unit

7. Rated capacity (volume of timber etc.) per year in cu.mt.:

Approved By EAC North Zone Dibrugarh Division 13-Mar-2023 10:27:AM

		Appro
8. Expected source/sources of raw materials	:	Dibruga 13-Mar-202
9. Employement		

a. Strength of regular employees

a. Strength of regular employeesa. Strength of daily workers

10. Whether the applicant is involved in any Criminal/forest/wildlife offence cases :

11. Whether the applicant possessing any other Wood Based Industry in the State, if yes, details thereof

12. Whether the Licence fee is attached, if so, No. and date of the challan

Documents to be enclosed (Tick mark whichever is applicable)-

- a. Registration Certificate of the Firm/Soociety/Partnership or Company.
- b. Registration Certificate of the unit in Industry Department.
- c. No Objection Certificate from Pollution Control Board.
- d. Document showing ownership / allotment of land.
- e. Copy of Receipt of application fee.

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f. Location map of the unit showing the approach rold

I hereby declare that the information provided to be is true and that if found false subsequently, my application for Licence may be rejected.

I also undertake the I will abide by the terms and conditions of the Licence and relevant rules, guidelines and instructions issued by the Government, Principal Chief Conservator of Forest and the quthorized officer from time to time and that I will not violate the provisions of the Assam Wood Based Industries (Establishment and Regulations) Rules, 2022.

Place:	
Date:	
	Yours faithfully

Signature(s) of the applicant(s).

22