## Format-III

1.	In- principal registration No. a	nd date						
	issued by the RO of Textile							
	Commissioner							
2. Date of application of unit received from the unit in PO for UT immediate								
	from the unit in RO for JIT ins							
3.	Name & Address of the unit	with pin						
	code							
	Taluka/Tahasi	l/Mandal·						
		District:						
		State:						
		Pin code:						
	Whether premises is Owned or	r Rented		(Please at	tach cop	y of electricity bill of the unit)		
	Phone No./Mobile No.							
	Fax No.							
	E-Mail ID							
	PAN No.							
	Name of Contact Person							
			Contact N	0.:		Mobile No.:		
4.	a) IM No. / Powerloom Pern	nit No. &						
	Date							
5.	b)Registering Authority5.a)Constitution of Firm		Description (Destroyable (Det 141/Occurrention (Others					
э.	/		Proprietor	Proprietorship / Partnership / Pvt. Ltd / Cooperative /Others				
	b) Name of Proprietor / F	artners /						
	Managing Director(s)							
6.	Name & Address (with pin code) of the							
	Bank, Branch, Phone No.							
	Account No.							
7.	IFSC No.	A 44 1 4	- /1-'+- /T+					
1.	Name of the manufacturer of Attachment		facturer	Invoice	Otv	0 digit aada na		
	Item	Ivianu	lacturer	No. & date	Qty.	9-digit code no.		

## <u>Certification on Installation and Commissioning of Attachments / Kits by Joint Inspection Team under</u> In-Situ Upgradation of Plain Powerlooms for SSI Powerloom Sector

(PTO)

8.	Attach	ments/Kits applied for with details										
	S.N.	Attachments	Quantity	Rate	Total	Eligible						
			-		Amount	Amount						
	i)	Weft stop motion										
	ii)	Warp stop motion										
	iii)	Semi-positive let off motion										
	iv)	Efficient braking device										
	v)	Anti Crack device										
	vi)	Self-lubricating nylon parts										
	vii)	Dobby										
	viii)	Jacquard										
		TOTAL										
	(Pleas	e attach copy of Final Invoice /Bill	, stamped &sig	gned by the unit &signed by all JIT members)								
9.	Payme	Payment Details:										
	(Please attach payment receipts acknowledged by the attachments/kits supplier duly stam											
		& countersigned by JIT members)										
	C M											
	S.N.	Manufacturer	Invoice	Payment receip	pts No.	Amount on						
	5.N.	Manufacturer	Invoice Value	Payment receip & date	pts No.	Amount on receipts						
	i)	Manufacturer			ots No.							
	i) ii)	Manufacturer			ots No.							
	i)	Manufacturer			pts No.							
	i) ii)	Manufacturer			pts No.							
	i) ii) iii)	Manufacturer			pts No.							
	i) ii) iii) iv)	Manufacturer			pts No.							
	i) ii) iii) iv) v)	Manufacturer			pts No.							
	i) ii) iii) iv) v) v) vi)	Manufacturer			pts No.							
	i) ii) iii) iv) v) v) vi) vi)	Manufacturer			pts No.							
10.	i) iii) iv) v) vi) vii) viii)	TOTAL	Value	& date								
10.	i) iii) iv) v) vi) vii) viii)		Value	& date								
10.	i) iii) iv) v) vi) vii) viii)	TOTAL	Value	& date								
10.	i) iii) iv) v) vi) vii) viii)	TOTAL	Value	& date								
10.	i) iii) iv) v) vi) vii) viii)	TOTAL	Value	& date								

I/ unit have not availed any benefit on the above attachments / kits earlier under any scheme of Government of India.

Signature of applicant & Seal of the unit

Certified by: (1) (2) (3) JIT members

Date: Place:

(Each page of JIT report should be stamped and signed by unit as well as signed by JIT members).

(Certification by OIC of RO)