## Application Form For Marketing Development Assistance For participation in Trade Fair/Exhibition/BSM/Trade delegation abroad

Ref.No Date:	
01.Name of the firm with full address.	
IEC No 02.EH/TH Certificate No. & Date	
Valid upto	
03. FOB value of exports during the last Financial year (Rs.in crores)	
04.Particulars of fair/exhibition/BSM/  Trade Delegation	
Name of event:	
Place: Country: FromTo	
05.Particulars of visit Date of departure from India	
Date of arrival in India  06.Details of proposal(s) already  Submitted in the same financial year.	
07.Details of earlier participations in the same event with MDA assistance	Э.
08.Name and designation of the person going abroad	
Place:	
Date: Signature:	

## Claim Form for Marketing Development Assistance For Participation in Trade fairs/Exhibitions/BSM/Trade Delegation abroad

<b>Ref. No</b> Date:
01 Name of the firm with full address
IEC No
02 Approval letter No. and date
03 F.O.B. value of exports during the last financial year.
Rs. in crores 04 Particulars of event Name: City: Country Duration of fair fromTo
05 Date of actual departure from India.
(please attach self certified photocopy of passport duly highlighting date of departure).
06 Date of actual arrival from India.
(please attach self certified photocopy of passport duly highlighting date of arrival).
07 Name & Designation of person
who attended the event.
Contd
08 No. of proposals already submitted in the same financial year.
09 Details of participations made with MDA assistance in the past in the same event.

10 Whether assistance availed from other Govt. Bodies/EPCs/Commodity Boards/APEDA/MPEDA/ITPO etc. for the activity under reference?  Yes/No. (If yes, please give full details)
11 Expenditure incurred
a) Actual return airfare by economy excursion class
b) Actual expenditure incurred on stall, decoration, water & electricity charges.  Rs Rs (Please attach original air ticket/jacket used during the journey along with self certified photocopies of receipt, bank advice etc. evidencing payment made)
12 Amount claimed Rs
Undertaking and Declaration
I/We hereby solemnly undertake/declare that the particulars stated above are true and correct to the best of my/our knowledge and belief.
No other application for claiming assistance for this participation and/or travel cost has been made or will be made in future against purchase covered by the application.
Any information, if found to be incorrect, wrong or misleading, will render/us liable to rejection of our claim without prejudice to any other action that may be taken against us in this behalf.
If as a result of scrutiny any excess payment is found to have been made to me/us, the same may be adjusted against any of the subsequent claims to be made by my/our firm or in the event no claim is preferred, the amount overpaid will be refunded by me/us to the extent of the excess amount paid.
Signature :  Name in Block Letters Designation : :::  Name of the Applicant Firm Company  Seal

Place: Date:

## ANNEXURE VII

## CHARTERED ACCOUNTANT CERTIFICATE

I/We hereby confirm that I/We have examined the claim papers,, books of account and the prescribed documents in respect of the claim of M/s. and hereby certify that:

- The participant is regular employee/director/ partner/proprietor of the company
- (ii) Participation is as per the maximum permissible participations under the MDA
   Scheme.
- (iii) Minimum of 14 days clear advance notice had been given to the concerned EPC/Trade Body.
- (iv) The participant company/firm/concern is not under investigation/charged/prosecuted/ debarred/black listed under Foreign Trade (Development & Regulation) Act, 1992, FEMA, Customs Act 1962
- (v) The total number of participations in this particular trade fair/exhibition is not exceeding three.
- (vi) The date of return to India is within 45/90 days of the date of making this application.
- (vii) The f.o.b. value export figures during the last financial year is less than Rs. 30 Crores
- (viii) It has been ensured that the information furnished is true and correct in all respects, no part is false or misleading and no relevant information has been concealed or withheld.

Neither I/We nor any of our partners is a partner/Director or an employee of the above named entity or its associated concerns.

I fully understand that any submission made in this certificate if proved incorrect or false, will render me/us liable to face any penal action or other consequences as may be prescribed in the law or otherwise warranted.

Signature & Stamp/seal of the Signatory
Name
Membership No.
Full address
Name and address of the Institution where registered. Date:
Place: