

FEDERATION OF ANDHRA PRADESH SMALL AND MEDIUM INDUSTRIES ASSOCIATIONS (FAPSIA)

Plot No.35, 1stLane, Srinivasa Nagar Bank Colony 3, Vijayawada – 520008 Phone: 7382333233

APPLICATION FORM FOR MEMBERSHIP

To The President FAPSIA Vijayawada

Dear Sir,

I / We request you to admit me / us as a member in your Federation.

I / We hereby agree that in the event of my / our admission as a member, I / We shall be bound by the Bye laws of the Federation.

I am / we are aware that my membership is subject to approval and in case it is not approved, the amount paid by me will be refunded to me / us and subject to realization of cheque.

(a) Name of the Organization (b) Date / Year of establishment	
2. (a) Address	
(b) Telephone with STD code	(c) Hand Phone
(d) E-mail	(e) Website
	Proprietorship Individual
3. Constitution	Partnership Pvt. Ltd. Co.
	Public Ltd. Co Association
4. Name (s) Proprietor / Partner / Directors / President or Office bearer as the case may be	

5. Name of the authorized representative	Name
	Designation
Please affix Latest Photograph	Signature
Line of Activity Manufacturing/ Service of	
7. Are you an Exporter	Yes / No
8. EM Part II / SSI / Udyog Aadhar / Registration Certificate (Association)	Certificate Number (enclose copy))
Payment Details FAPSIA	Cash / Cheque / DD / NEFT
Account No. 116611100001282 Andhra Bank , Bharathi Nagar Branch, Vijayawada	No Date
IFSC : ANDB 0001166	Bank
Place	Signature
Date	Name
	Designation
Proposed by:	Approved by:
FOR FAPSIA OFFICE USE ONLY	
C.R. No Date	
Date of Admission Membership No	