



Towel Manufacturers' Association of Pakistan

ENROLMENT FORM

M/s. _____

REQUIREMENT OF DOCUMENTS

- 1) C.N.I.C of Proprietor / Partners / Directors
- 2) N.T.N Certificate
- 3) Income Tax / Last Returned Filed
- 4) Sale Tax Registration
- 5) Partnership Deed/ Memorandum & Articles of Association (Attested By Notary Public)
- 6) List of Directors / Partners along with Cell # on company Letter Head
- 7) Lease / Rent Receipt / Rent Agreement (Attested By Notary Public)
- 8) Utilities Bills K.E / Gas Bill (Name of Company)
- 9) EOBI Certificate
- 10) Social Security Certificate
- 11) Export Performance Certificate (02 Years) / Bank Certificate Showing Creditability
- 12) List of Product Manufactured Name on Company Letter Head
- 13) Pictures; Premises Outside & Inside with Dpt. wise & Looms Rental Owned

14)	Admission Fee	Rs. 50,000
	Current Subscription	Rs. 15,000
	Memorandum & Articles	Rs. 100
	Membership Certificate	Rs. 50
	Total	Rs. 65,150

PROCESSING FEE OF APPLICATION FOR NEW MEMBERSHIP IS NON-REFUNDABLE / NON-TRANSFERABLE

SPECIMEN INFORMATION OF THE COMPANY

Name of Authorized Representative :- _____ Designation :- _____

Signature :- _____ Company Stamp :- _____

	NAME OF PARTNERS/DIRECTORS	CELL #	C.N.I.C.#	SIGNATURES
1.				
2.				
3.				
4.				
5.				
6.				

USE ONLY FOR ASSOCIATION

DATE OF FORM RECEIVED	DATE OF SURVEY	DATE OF APPROVAL	ALLOTMENT OF MEMBERSHIP #	REF MEETING

HEAD OFFICE



T.M.A House 77-A, Sindhi Muslim Corporative Housing Society Karachi-74400



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**APPLICATION FORM FOR ENROLMENT AS MEMBER
OF
THE TOWELMANUFACTURERS' ASSOCIATION OF PAKISTAN**

PHOTOGRAPH

We / I _____ hereby apply for membership of the Towel Manufacturers' Association of Pakistan and furnish below the necessary particulars, and further declare that We / I will abide by the Rules and Bye-Laws laid down in the Memorandum of Articles of the Association and agree to provide all information about Export, Production, Prices and other particulars as and when called for by the Association for record, statistical of representation purpose.

1. Name of Factory : _____
2. Type of Entity Individual AOP Public Ltd. Private Ltd.
3. Date of Establishment : _____ National Tax No _____ STRN No. _____
4. EOBI Registration No. : _____ SESSI Reg. No : _____
5. Address of Office : _____
6. Location of Factory : _____
7. Status of Factory Owned Rented Status of Looms Owned Rented
8. No. of Looms _____ Jacquard Dobby Local Imported Shuttles Air Jet
9. Manufactured Category : _____ Brand Name : _____
10. Phone Nos. Office : _____ Email Address : _____
11. Phone Nos. Factory : _____ Website : _____

SR.#	YEARS	TOTAL LOCAL SALE (RS.)	TOTAL EXPORTS (\$)	PRINCIPAL ACTIVITY
01				MANUFACTURER
02				<input type="checkbox"/> Exporter <input type="checkbox"/> Local seller

13. Name of Authorized Representative : _____ Designation : Proprietor Director Partner
- a) Father's Name : _____ C.N.I.C # : _____
- b) Telephone # : _____ Mobile # : _____
- c). COMPANY STAMP d). Specimen Signature : _____ Date : _____

	NAME OF COMPANIES	AUTHORIZED REPRESENTATIVE	SIGNATURE	COMPANY SEAL
Proposed By:				
	Member Ship #	Cell #		
Seconded By:				
	Member Ship #	Cell #		

USE ONLY FOR SURVEYOR

OPTION 1	OPTION 2	Signature
<input type="checkbox"/> NOT APPROVED	<input type="checkbox"/> APPROVED	With Date :
Reason <input type="checkbox"/> No. of Looms Qty Wrong	<input type="checkbox"/> No. of Looms _____	Name of Surveyor :
<input type="checkbox"/> Fake Addresses Looms are not installed	<input type="checkbox"/> Running Capacity _____	Company Stamp :
<input type="checkbox"/> Looms are not Working Condition.	<input type="checkbox"/> Stitching Capacity _____	

Signature Secretary
South Circle / North Circle

Signature Chairman
South Circle / North Circle

Name of Chairman: _____