



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)☐
- 12) List of Product Manufactured Name on company Letter Head☐
- 13) Pictures; Premises Outside & Inside with Dpt. wise / Looms☐

14)	Admission Fee	Rs.10,000
	Current Subscription	Rs. 7,500
	Memorandum & Articles	Rs. 100
	Membership Certificate	Rs. 50
	Total	Rs.17,650
PROCESSING FEE OF APPLICATION FOR NEW MEMBERSHIP IS NON-REFUNDABLE / NON-TRANSFERABLE		

USE ONLY FOR ASSOCIATION

NAME OF BANK				RECEIVED FEE AMOUNT	Rs. 17,650/-
PAY ORDER #		DATE OF PO		PAY ORDER RECEIVED DATE	
PO RECEIVED PERSON				PAYORDER RECEIVED SIGNATURE	

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 SocietyKarachi-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.

- Name of Factory : _____
- Type of Entity ☐ Individual ☐ AOP ☐ Public Ltd. ☐ Private Ltd.
- Date of Establishment : _____ National Tax No _____ STRN No. _____
- EOBI Registration No. : _____ SESSI Reg. No : _____
- Address of Office : _____
- Location of Factory : _____
- Status of Factory ☐ Owned ☐ Rented

Status of Looms

☐ Owned ☐ Rented
- No. of Looms _____ ☐ Jacquard ☐ Dobby ☐ Local ☐ Imported ☐ Shuttles ☐ Air Jet
- Manufactured Category : _____ Brand Name : _____
- Phone Nos. Office : _____ Email Address : _____
- Phone Nos. Factory : _____ Website : _____

12. Detail of Local Sales & Export Last 2 Years	SR.#	YEARS	TOTAL LOCAL SALE (RS.)	TOTAL EXPORTS (\$)	PRINCIPAL ACTIVITY
	01				MANUFACTURER <input type="checkbox"/> Exporter <input type="checkbox"/> Local seller
	02				

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 : _____

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

USE ONLY FOR SURVEYOR

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

Signature Secretary
South Circle / North Circle

Signature Chairman
South Circle / North Circle

Name of Chairman: _____