

Format of An Application to make a Presentation to Micro & Small Enterprise
Facilitation Council

Sr. No.	Particulars	: To be filled by Applicant	Page No.
1	Name of the Applicant, Micro/Small Enterprise (Seller Unit)		
	Address of Applicant, Micro /Small Enterprise (Seller Unit)		
	Phone No. /Mobile No.		
	Fax No.		
	E-mail address		
2	Name of the Proprietor Partner /Director or Responsible Officer of Seller unit		
	Address of Proprietor Partner /Director or Responsible Officer of Seller unit		
	Phone No. /Mobile No.		
	Fax No.		
	E-mail address		
3	EM Part-II No. & date Product Manufactured / Services Rendered (Copy to be attached)		
4	Name of the Buyer unit		
	Address of the Buyer unit		
	Phone No. /Mobile No.		
	Fax No.		
	E-mail address		

5	Name of Proprietor /Partner / Director or Responsible Officer of Buyer unit	:		
	Address of Proprietor Partner /Director or Responsible Officer of Buyer unit	:		
	Phone No. /Mobile No.	:		
	Fax No.	:		
	E-mail address	:		
6	Whether agreement is made between buyer & seller? If yes details thereof with terms & conditions to supply the item (copy to be attached)	:		
7	Details of order placed by buyer Item & Qty (Copy to be attached)	:		
8	Confirmation letter for order placed by buyer, if any (Copy to be attached)	:		
9	Date of Supply item to the buyer for order placed Challan No. & Date Item & Qty (copy to be attached)	:		
10	Whether quality test carried out by seller before dispatch? If yes copy of test report to be attached.	:		
11	Details of Total Sales Period of sales (Annexure to be enslaved)	:	Sales Rs. _____ Date from _____ to _____	
12	Date of item received by buyer(purchaser)Item/Qty	:		
13	Whether Quality test is carried out by buyer unit after receiving the material, if yes copy to be attached	:		
14	Whether items are accepted by buyer/ purchaser.	:		
15	If not accepted them reason for not accepting/ rejection	:		

16	Details of payment made by purchase / buyer to seller if yes details thereof to be given as under Date & Amount of payment made	:	Rs. _____	
17	Due date for payment	:		
18	Reasons for not making the full payment by purchase/buyer as per invoice.	:		
19	Details of Action taken by seller to recover the outstanding dues	:		
20	Details of outstanding Amount as on..... i) Amount due in Rs. ii) Interest due up to.....in Rs..... iii) Total (Annexure-I,C.A. certified copy to be attached)	:		

***ALL DOCUMENTS MUST BE VERIFIED BY GAZETTED OFFICER OR SELF ATTESTED.**

Annexure-II

To be submitted by the applicant dully verified by GM DIC or notarized

Details of delay payment report

1	Details of applicant unit (Suppliers)	
	1. Name:-	
	2. Complete address	
	3. Tele No.	
	4. Fax No.	
	5. E-mail address	
	6. Mobile No.	
	7. Name of proprietor/ partner/ Director	
2.	Items of goods supplied/ services rendered	
3.	EM Part-II No. date	
4.	Details of goods supplied/services rendered:	Total amount Rs.
	1. Period of supply	
	2. Due date for payment	
	3. Amount of payment made	Rs.
	4. Outstanding amount	Rs.
	5. Interest on outstanding amount	Rs.
	6. Rate of interest	

5	Details of opponent unit (Purchaser)	
	1. Name:-	
	2. Complete address	
	3. Tele No.	
	4. Fax No.	
	5. E-mail address	
	6. Mobile No.	
	7. Name of proprietor/partner/ Director	
6	Date of representation sent to Purchaser by Seller of goods	
7	Date of clarification made by purchaser (opponent)	
8*	Reasons given by purchaser for not making the full payment within stipulated time	
9*	Outstanding amount as per purchaser (opponent)	
10*	Main points of dispute/ dissatisfaction.	
11*	General Manager District Industries Center's recommendations\remarks	

Sign of applicant unit

Check List of documents/Details to be submitted along with Application

Sr. No.			Page No.
1	Name & Address of Applicant Enterprise(Seller)	:	
	Name of Contact person		
	Phone No./Mobile No.		
2	Name & Address of opponent Enterprise(Buyer)		
	Name of Contact person		
	Phone No./Mobile No.		
3	Copy of EM-II		
4	Copy of Annexure-I duly filled & certified by C.A.		
5	Copy of Annexure-II verified by GM DIC or Notarized		
6	Copy of agreement made between buyer & seller in submitted	:	
7	Copy of purchase orders	:	
8	Copies of invoices for which claim is submitted, of supplies of goods	:	
9	Copy of quality test report is attached by seller: internal/third party-agency designated for such test	:	
10	Copy of quality test report submitted by Buyer	:	
11	Copy of confirmation letter for order placed	:	
12	Copy of Delivery Challan dully signed by buyer and by seller	:	
13	Copy of letter indicating reasons for rejection of goods/or for not accepting the goods by buyer.	:	
14	Details of payment made by buyer to seller to be given in Annexure-I	:	
15	Outstanding amount dues to be mentioned -principal & interest amount separately	:	
16	Details of interest to be paid for delay payment (monthly rests)	:	
17	Copy of RPAD Slip submitted (one copy of application along with enclosures sent to opponent unit)		

Annexure-I

Duly certified by chartered Accountant

Statement showing the details of billwise outstanding amount as on Date:-

Name of Applicant Unit

Sr. No.	Bill No.	Date	Amount of Bill	Due date for payment as per P.O.	Details of Payment Received			Outstanding Amount Bill wise(4-6)	Delayed Period From Date.... To Date....	Compound Interest on monthly rest base @18 %	Total Amount outstanding (9+11)
					Amount	R. No.	Date				
1	2	3	4	5	6	7	8	9	10	11	12
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
Total											

Signature & seal of chartered Accountant