

**Application for Coir Board External Market Development Assistance
for Participation in Fairs/Exhibitions Abroad**

Applicant's Ref. No.:-

Date _____

01	Name of the firm with full address	
02.	Number and Year of Registration as Exporter with Coir Board	
03	Are you a holder of EH/TH/STH/ SSTH Certificate	Yes No (If yes, please give details)
04	Whether Merchant Exporter of Manufacturer Exporter If Manufacturer Exporter, give details of Coir Board Industrial Unit Registration No. and date, SSI Registration.	
05	FOB value of exports of coir and coir products during past three financial years, year-wise	(Rs. in Crores)
06	Particulars of fair/exhibition	Name of fair: Place : Country : From.....to.....
07	Particulars of visit	Proposed date of departure from India: - Proposed date of arrival in India: -
08	No. of proposal(s) already submitted in the same financial year	Sales Tour Fair participation LAC Region _____ African Region _____ Other Countries _____
09	Whether participation through ITPO?	Yes No
10	If direct participation, name & full address of the organisers.	
11	Name & designation of the person going abroad.	
12	Whether Women / SC / ST /or from North Eastern Region	

Place:
Date:

Signature:
Name & Designation:
Seal

DECLARATION

(To be made in the letter head of the applicant Exporter)

I/We hereby declare that -

*1. I/We have not participated in any exhibition abroad availing MDA from Coir Board/any other Government Agency.

*2. I/We have participated in the following Exhibitions availing Market Development Assistance from Coir Board/other Government Agencies as detailed below:

* Strike out whichever is not applicable

Sl.No.	Year	Name of Exhibition	Country	From whom Assistance obtained
1.				
2.				
3.				
4.				

Place:
Date:

Signature:
Name & Designation:
Seal

CERTIFICATION BY CHARTERED ACCOUNTANT

We have verified the above declaration with reference to the books of accounts of M/s. and confirm that the above declaration is correct.

(Signature and Stamp Seal of the Signatory/
Chartered Accountant)
Name of the Signatory :
Full address :
Membership No. :

Place:
Date: