FORM NO. 40C

[See rule 77]

Application for recognition

1. Name of the Fund for which recognition under Part A of the Fourth Schedule to the Income-tax Act, 1961 is sought: 2. Permanent Account Number of the Fund: 3. Date of creation of the fund: 4. Name of the employer: 5. Address of the employer: 6. Business/Profession of the employer: 7. Principal place of business of the employer: 8. Total number of employees: 9. Number of employees employed in India: 10. Number of employees subscribing to the fund: (i) In India -(ii) Outside India -11. Place where the accounts of the funds are/will be maintained: 12. The number of trustees of the fund: 13. The name and address of the trustees: 14. (a) Whether it is an irrevocable trust: Yes No (b) If not, the reasons thereof: 15. Please indicate the contribution by the employee as a percentage of his salary: 16. Please indicate the contribution by the employer as a percentage of employee's salary: 17. The contribution being made/proposed to be made by the employer: 18. Whether the establishment is covered under Yes No Employees' Provident Fund and Miscellaneous Provisions Act, 1952 (EPF and MP Act): If yes,

(*a*) whether covered under section 1(3) of EPF and MP Act:

(*b*) whether covered under section 1(4) of EPF and MP Act:

19. (*a*) Whether the establishment is exempt under section 17 of the EPF and MP Act:

(*b*) If yes, please indicate the exemption number/date and enclose documentary proof:

(c) If no, please indicate the date of application and attach proof of receipt from Employees Provident Fund Organization:

20. (*a*) Whether the fund was recognized under the Income-tax Act, 1961 before 31-3-2006:

(*b*) If yes, please indicate the date of approval and attach a copy of letter of approval:

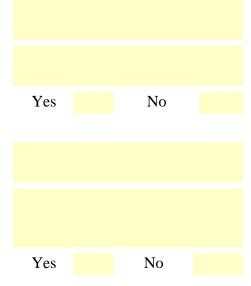
21. If the fund is already in existence, please furnish the following details relevant to the financial year ending prior to the date of application:

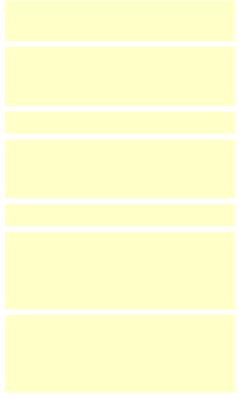
(*a*) the total corpus of the fund:

(*b*) investment pattern being followed [give breakup in accordance with the investment pattern prescribed in rule 67(2)]:

(*c*) a copy of the balance-sheet of the fund:

- 22. Whether the establishment has an approved superannuation fund. If yes, please indicate the approval number and date and indicate the authority which has granted the approval:
- 23. Whether the establishment has an approved gratuity fund. If yes, please indicate the approval number and date and indicate the authority which has granted the approval:





VERIFICATION

I/We_____, the trustees of the above named fund, solemnly declare that the information given in the application is true and correct to the best of my/our information and belief and that the documents sent herewith are the original or true copies thereof.