

Application for reimbursement of ESI & EPF Contribution by the Employer for creating New employment in MSMEs		
1	Name and address of the applicant	
2	Contact Number	
3	Name of Enterprise	
4	Address of the Enterprise	
5	Udyog Aadhaar/ EM part II No.	
6	Whether manufacturing/ Service	
7	Constitution of the Unit (Proprietary/Partnership/Company/Society/ Others)	
8	Date of Commencement of the Unit	
9	Activity/Products manufacturing	
10	Annual turnover as on 31.03.2018 (Rs in Lakhs)	
11	GST No (If any)	
12	Details of Investment (Rs in Lakhs)	
	i Plant & Machinery	
	ii Other fixed assets	
	iii Electrification	
	iv Essential office equipments	
	Total	
13	Total No.of employees in the unit as on 31.3.17	
14	Name and address of Financial Institution from which salary of employees are credited	
15	Number of New employment on or after 01.04.2017	

16	Salary Details of New Employment on or after 01.04.2017						
	Name of Employee	Category of the Employee	Date of Admission	Amount of monthly salary paid (Rs)	Mode of Payment (Transfer/DD/Cheque)	Name of Bank	
17	Details ESI/EPF Contribution of Employer on or after 01.04.2017 for New Employments						
	Name of Employee	Employer Contribution of ESI		Employer Contribution of EPF		Total Contribution (Rs)	Eligible Reimbursement (Rs)
		Period	Amount (Rs)	Period	Amount (Rs)		
	Total						
18	Amount of reimbursement claimed (Rs)						

Declaration

I have read the rules of the scheme and undertake to abide by all the provisions herein. Also submit that I have not availed any grant/assistance from Government of Kerala, Government of India or any other Institutions earlier for the same purpose. I declare that the facts stated above are true to the best of my knowledge and belief.

Place

Signature

Date

Name of the promoter/employer