

TEXTILES COMMITTEE	Application – Handloom Mark Registration	Handloom Mark Scheme
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For Office Use								
Application No.				Date of receipt				
Category (Please Tick)	IW	MW	CO-OP	APEX / HC	RT / TR	MANE	MERE	OTH

General Particulars	
1	Name
2	Address with Tel. / Mobile, Fax & Email
3	Address proof (Please attach photocopy)

For applicants other than Individual Weaver / Master Weaver categories						
4.1	Nature of organization (Please ✓)					
	Public Limited	Private limited	Proprietary	Partnership	Society	Corporation
	Others (Please specify):					
4.2	Registration No. & date			(Attach photo copy of Certificate)		
4.3	DGFT IE code number (in case of export)			(Attach photo copy of Certificate)		
4.4	Export Promotion Council Membership No. (in case of export)			(Attach photo copy of Certificate)		
4.5	Name & designation of Chief Executive / Competent authority / Owner / Partner					
4.6	Name & Designation of the person nominated for liaison with Textiles Committee					
4.7	Name & address of Manufacturing unit/s, if any, with Tel., Fax & Email (Attach separate sheet for more than one unit)					
4.8	Number of weavers / members / suppliers of handloom products					
4.9	Number of handlooms			Own	Suppliers / Members	
4.10	Type of handloom products dealing with			Fabric	Made-up	Garment
4.11	List of weavers / members / suppliers of handloom products			Please fill-in Annexure-I		
4.12	Annual production – sales details of handloom products (Previous year)			Please fill-in Annexure-II		
4.13	Do you have powerlooms / do you deal with powerloom goods			Yes	No	

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5.1	For Master Weaver only	Number of Handlooms under control				
5.2		Number of Individual Weavers	Adults- M		Adult- F	
5.3		Method of products sale	Direct	Coop Soc.	Retailer	Exporter
5.4		List of Handloom Weavers	Please fill-in Annexure-I			
5.5		Annual production – sales details of Handloom products (Previous year)	Please fill-in Annexure-II			
5.6		If you are availing any Govt. promotional / subsidiary scheme, name, Reg. no and year of starting the scheme				
5.7		Do you have powerlooms under your control	Yes		No	
6.1	For Individual Weaver only	No of Handlooms				
6.2		No of family members involved	Adult - M		Adult - F	
6.3		Method of product sale	Direct sale	Master weaver	Co-operative society	
6.4		If you are a member of a Co-operative Society, Name & Address of the Society with Reg. No.				
6.5		If you are working for a Master Weaver, Name & Address of the Master weaver.				
6.6		If you are availing any Govt. promotional / subsidiary scheme, name, Reg. no and year of starting the scheme				
6.7		Do you have powerlooms also	Yes		No	
6.8	Product details					
	Name of the handloom product	Productivity in Metres			Length of Made up	No. of Made ups / Year
		Per loom Per day	Per month	Per Year		

Declaration

I / we hereby declare that the information furnished above is true and complete to best of my / our knowledge. I / we agree to abide by the rules and regulations formulated from time to time under the Handloom mark Scheme.

Place:

Date:

Signature of applicant /
Authorised Signatory of the
applicant with stamp

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Annexure – I
(For categories other than Individual Weaver)

Sr. No.	Name & Address of the weavers / members / suppliers of handloom products	Product procured		
		Fabric	Loom state Made-up	Made-up / Garment
1				
2				
3				
4				
5				

Annexure – II
(For categories other than Individual Weaver)

Sr. No.	Name of the handloom product (Please specify the item name)	Quantity produced / procured (Previous Year) Metres / Nos.		Quantity sold (Previous Year) Metres / Nos.		
		Produced	Procured	Export	Domestic	Stock
1						
2						
3						
4						
5						
Total						

Note: Please attach separate sheet/s for Annexure-I & II, if required.

Authorised Signatory of the applicant
with stamp

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Checklist		
Sr. No.	Particulars	Please tick
1	Photo identity (IW & MW)	
2	Address proof	
3	Registration / Membership certificate copy	
4	DGFT registration certificate (In case of export)	
5	Export Promotion Council Registration certificate (In case of export)	
6	Annexure I duly filled in (Except IW)	
7	Annexure II duly filled- in (Except IW)	
8	Whether all columns are filled-up properly?	

After Onsite Verification	
On-site verification report number & date	Registration number allotted & date

Label category & Entitlement		
Sr. No.	Label Type	Number of labels
1	"DF" (For Domestic Fabric only)	
2	"DM" (For Domestic Made-up & Garment)	
3	"EF" (For Export Fabric only)	
4	"EM" (For Export Made-up & Garment)	

Place: -

Date: -

Signature of Officer-in-charge with name & Stamp of RO

Instructions for filling of application

1. Use Blue / Black colour ballpoint pen only.
2. Don't leave any column blank. If any column is not applicable then write "N/A".
3. For address proof attach copy any one: **Individual / Master weavers** – a. Ration card, b. Voter ID card, c. Group insurance scheme (DHCL), d. Registration with Weavers Service Centre, e. Membership with Cooperative Society; **Other category applicants** – a. Electricity bill, b. Municipal tax bill, c. Telephone bill, d. Registration certificate, e. VAT registration certificate.
4. Please attach separate sheet/s where required.
5. Qualifying age for Individual weaver & Master weaver categories of applicants is 18 years.