



COCONUT DEVELOPMENT BOARD

(Ministry of Agriculture & Farmers Welfare, Govt. of India)

Kera Bhavan, SRVHS Road, Kochi – 682 011, Kerala

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APPLICATION FOR TECHNOLOGY / KNOWHOW

TECHNOLOGY INTERESTED IN
(Please tick the relevant box)

Coconut Milk Processing

1. Name of the Applicant (In block letters) :.....

Existing Business Activity / Occupation :.....

2. Address with Phone / Fax / Email :.....

.....

.....

3. Annual income from all sources :.....

.....

.....

4. a) BUSINESS ACTIVITY

- i) Industrial Activity
- ii) Existing
- iii) Proposed

b) Performance (in case of existing units)

Particulars capacity utilization	Last year	Last but One Year	Last but Two Year
Turnover			
Net Profit			
Retained Profit			

5. a) TECHNICAL BACKGROUND OF EXISTING FACILITY

- i) Name of the products (including by – products) & its (their) use:
- ii) Manufacturing Process, in brief:
- iii) Capacity of units (Quantity in Kg./ Volume in Liters)

b) Local advantages of existing and proposed premises with reference to

- i) Absence of civic restrictions
- ii) Proximity to the source of raw materials
- iii) Financial capability
- iv) Marketing arrangements

DECLARATION

I / We declare that all information furnished by me / us is true that there is no overdues/ statutory dues against me / us / promoters except as indicated in the application: that no legal action has been / is being taken against me / us promoters that I/We shall furnish all other information that may be required by you in connection with my / our application : that this may also be exchanged by you with any agency you may deem fit:: and you, also representatives / any other agency as authorized by you, may, at any time, inspect verify /my / our assets, books of accounts, etc, in our factory / business premises , as given above. In case any misrepresentation of facts is found on verification by the officials / representatives of the Board, my / our application may be rejected

I / We hereby accept the terms and condition of the Board and fully aware of the powers of the Board to accept / reject my application for technology / know how without stating any reasons thereof.

Date:

Signature

Place:

Name & Designation