On Company Letter Head

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Name of Company |   |   |   |   |   |   |
| Address |   |   |   |   |   |   |
| Telephone |   |   |   |   Email Id- |   |   |
| Mobile No. |   |   |   |   Whatsapp No- |   |   |
| E-Mail Address(only one) |   |   |   |   |   |   |
| Name of Authorized Representative/Change if Any |   |   |   |   |   |   |
| Name of Director/Partner/ |   |  |  |  |  |   |
| Proprietor |   |   |   |   |   |   |
| No.of Women Director |   |   |   |   |   |   |
| No.of Women employee |   |  |  |  |  |   |
| GSTIN NO |   |   |   |   |   |   |
| Specialization/Type of cargo Handling |   |   |   |   |   |   |
| Name of Port  |   |   |   |   |   |   |
| Job Handled involving the followed Departments | **AQ** | **PQ** | **ADC** | **FSSAI** | **W/L** | **APEDA** |
|   | **BREAK BULK** | **BULK** | **LIQUID BULK** | **PERCENTAGE CARGO** | **COLD CHAIN** | **DG CARGO** |