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|  | | **INDIAN INSTITUTE OF CHEMICAL ENGINEERS**  ***Dr H. L. Roy Building,  Jadavpur University Campus, Raja Subodh Mullick Road, KOLKATA - 700 032***  ***Phone: (033)-2414 6670,  2412 9314***  ***Email:*** [***iichehq@gmail.com***](mailto:iichehq@vsnl.com) | | | |
| **APPLICATION FORM FOR ORGANISATIONAL MEMBERSHIP** | | | | | |
| 1. NAME OF THE ORGANIZATION  (IN BLOCK LETTERS) | | |  | | |
| 2. Address: (a) Registered Office: | | | | (b) Corporate Office: | |
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| Phone :  Mobile: | | | | Phone :  Mobile : | |
| E Mail ID: | | | | E Mail ID: | |
| 3. Nature of Organization (Please tick):     Company: □ / Academic Institution: □ / R&D Organization: □ | | | | | |
| 4. Names and addresses of the Chief Executive and/or the Board of Directors and Senior Management personnel  *(Please enclose a separate sheet, if necessary)* | | | | | |
| 5. Annual Turnover as per latest Audited Accounts:  Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Crores for the year 20\_\_\_\_\_\_\_\_ *(Please enclose a copy of Annual Report)* | | | | | |
| 6. Major Products/Business:  *(Please enclose a separate sheet, if necessary)* | | | | | |
| 7. List of major technology areas of interest:  *(Please enclose a separate sheet, if necessary)* | | | | | |
| 8. Name of the contact person: | | | | | |
| Address: (a) Official: | | | | (b) Residential: | |
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| Phone : Mobile: | | | | Phone: Mobile : | |
| E Mail ID: | | | | E Mail ID: | |
| **9. PAYMENT DETAILS:**  Payment should be made by Multicity Cheque/Demand Draft(DD) in favour of “INDIAN INSTITUTE OF CHEMICAL ENGINEERS” payable at Kolkata | | | | | |
| Admission Fee:  Rs. ...................../- and the Annual/Life Subscription Fee: Rs......................../-  Total payment enclosed: Rs. ...................../- | | | | | |
| Demand Draft / Cheque on (Bank) ...................................................................................  No. ................................Dated: .............................. | | | | | |
|  | Place:  Date: | | | | Signature with Office Seal |