# **Gujrat Chamber** of Small Traders & Small Industry

2<sup>nd</sup> Floor, Shield Marketing Plaza, Opp AFC Qamar Sialvi Road, Gujrat. Ph: +92 53 3538101, Cell: 0309-6003333 Email: info@gcstsi.org.pk / info.gtcstsi@gmail.comWebsite: www.gcstsi.org.pk



**APPLICATION FOR MEMBERSHIP** 

The Secretary General, Gujrat Chamber of Small Traders & Small Industry. Membership No. .....

# Dear Sir,

Being desirous of becoming member of Gujrat Chamber of Small Traders & Small Industry (GCsTsI), I/We agree to abide by its Memorandum & Articles of Association. A sum of Rs: ..... being the current year's Membership Subscription is sent herewith in anticipation for being enrolled as member. Particulars of my/our business are attached herewith.

# Yours faithfully

Signature of Applicant

Stamp of Firm / Company

Dated:	
Proposed by M/s:	M. No:
Address:	Signature:
Dated:	
Proposed by M/s:	M.
Address:	Signature:

# PARTICULARS OF THE APPLICANT

And I had a feet of the second		Paste Photograph here
Name of Firm / Company:		
Full Address:		
(Ph)(Res)(Email)	(Fax)(I	
Nature of Business:	Name of Bankers:	
Goods Imported/Exported:	NTN:	

## Particulars of Proprietor/Partners/Directors

S.No	Name	Status	N.I.C. No.
1.			
2.			
3.			
4.			
5.			

G.S.T. Year of Establishment: Blood Group:

Name & Designation of Person who will represent the Firm/Company in the Chamber

Designation: \_\_\_\_\_Signature (with Stamp): \_\_\_\_\_

\_\_\_\_\_

# **MEMBERSHIP/RENEWAL CARD FORM**



(TYPE THE FORM IN DUPLICATE, USING CAPITAL LETTERS/WORDS)

Company/ Firm Name: \_\_\_\_\_\_\_
Company Address: \_\_\_\_\_\_

1. Representative's Name: \_\_\_\_\_

4.Tel:	Mob:	Designation:
5.N.I.C.	G.S.T	N.T.N.

Declaration: I/We Solemnly Declare attest that the photograph and signature Affixed on this form are true

Paste Photograph here

6.Signature of Applicant (with Stamp):

#### FOR OFFICE USE ONLY

Card No:	M. No:	
Date of Issue:	Date of Expiry:	
Rs: =200/- received vide receipt No.	Dated:	
The Above Particular are Verified		

Approved By:

**Documents Required for New Membership** 

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# Associate Class:

- 1. Copy of National Identity Card of the Applicant.
- 2. Two Passport size pictures of the Applicant. (White Background)
- 3. Copy of National Tax Certificate & Income Tax Return Copy of Current Year.
- 4. Two Copies of Business Letter Pads and Stamp of Business.
- 5. Account Maintenance Letter of Firm Account.
- 6. In case of Partnership firm or AOP
  - a copy of legalized Partnership Deed
  - Certificate issued by registrar of firm. (Form C)
  - Power of Attorney
  - NTN of All Partners
- 7. In case of private limited or limited company
  - Printed copy of Memorandum of Articles Association.
  - Copy of certificate of Incorporation and Copy of Form 29.
  - Copy of NIC of all the directors and NTN certificates

## Note:

- Incomplete Application form is liable to be rejected
- The financial year of the Chamber is from 1<sup>st</sup> April to 31<sup>st</sup> March, every Year.

## Subscription and Admission fee are as following:

New Membership	Membership	Duplicate Card	Duplicate
Registration Fee	Renewal Fee	Fee	Certificate Fee
3500	2500	500	1000