



The Secretary
Indian Private Ports and Terminals Organisation
Darabshaw House, Level 1
Narottam Morarji Road
Ballard Estate
Mumbai - 400 038

Dear Sir

IPPTA MEMBERSHIP

We wish to apply for IPPTA Membership. The Application Form, duly completed, is enclosed in duplicate, along with the relevant supporting documents. Kindly acknowledge receipt and advise us on admission.

Yours faithfully,

Date: _____

(Signature)

Name : _____
Designation : _____
Organisation : _____
Address : _____

Affix Company Rubber Stamp

N.B.: This application should be proposed by a Core Member and seconded by a Core or an Associate Member of IPPTA

Proposed by Signature : _____
Name : _____
Designation: _____
Company : _____
City : _____



Seconded by

Signature : _____
Name : _____
Designation: _____
Company : _____
City : _____



MEMBERSHIP APPLICATION FORM
(To be submitted in Duplicate)
(Please fill in Block letters)

1	Name of Company/ Organization	:	
2	Year Established	:	
3	Address(If you have other offices in India/ abroad, please attach their complete addresses) Phone Fax Email Internet	:	
4	Chief Executive	:	
5	Designation of Chief Executive	:	
6	City in which Chief Executive is based	:	
7	Name of the Principal Representative appointed to attend IPPTA.	:	
8	Designation of Principal Representative	:	
9	Address of Principal Representative	:	
10 (a)	Company Data Name and address of the Port/Terminal/ multi user facility where the Company is Operating	:	



10		
(b)	Name and address of the Port/ Terminal multi user facility for which the Company has received Letter of Intent, signed agreement (Date of signing and the period of the agreement)	:
(c)	Do you hold directly/ indirectly more than 51% of the Equity in the Company which is engaged/ received Letter of Intent / entered into an agreement.	:
(d)	Constitution of the Company	:
11.	If member of any other Chamber Industry association, please mention name/s	:
12.	How do you expect to benefit from IPPTA Membership? (Attach separate sheet, if necessary)	:
13.	Principal Banker	:
14.	Additional Information (if any)	:

(Note: Please use extra sheets, wherever necessary)

We hereby give our consent to abide by the Rules and Regulations of IPPTA.

Signature : _____

Name : _____

Date : _____

Designation: _____



Payment details

(a) Entrance Fee : Rs. _____

(b) Membership Fee : Rs. _____

TOTAL : Rs. _____

Our Cheque/DD No. _____ dated _____ for Rs. _____

Drawn on _____ is enclosed.

- Encl : (1) Company Profile
(2) Certificate of Registration/ Incorporation
(3) Note on expectations from IPPTA
(4) Demand Draft/ Cheque favouring Indian Private Ports and
Terminals Association.

FOR IPPTA OFFICE USE ONLY

Mg. Com Meeting Approval Date : _____

MEMBER CODE ? CM ? AM ? HM