

**APPLICATION FOR APPROVAL OF AUTHORISED OPERATIONS**

**[Refer rule 9 ]**

1. Name and address of the Developer :
  
2. Letter of Approval No. and date :
  
3. Type of Special Economic Zone :  
Multi-Product / Sector Specific :
  
4. If Sector specific, name of the sector for which approval  
has been given  
:
  
5. Date of notification of the Special Economic Zone :
  
6. Total area of the Special Economic Zone (in hectare) :
  
7. Total processing area of the Special Economic Zone (in hectare):
  
8. Total non-processing area of the Special Economic Zone (in hectare)  
:
  
9. Total proposed investment in the Special Economic Zone (in Rs.

Crore):

10. Investment already made so far (in Rs. Crore) :

11. Total number of people proposed to be employed in the Special Economic Zone :

12. Details of the activities in the processing area for which approval have been sought :

S. No	Name of the authorized activity	No. of Units	Area per unit (in sq.mtrs) as per FSI/FAR norms as applicable	Total area (in sq.mtr) / capacity (in MW)
(1)	(2)	(3)	(4)	(5)

Note : Wherever information is not required, please indicate "NA".

13. Justification for approval sought under S.No. 12.:

14. Details of the activities in the non-processing area for which approval have been sought :

S. No	Name of the authorized	No. of Units	Area per unit (in sq.mtrs) as per FSI norms	Total area (in sq.mtr) / capacity (in
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	activity		as applicable	MW)
(1)	(2)	(3)	(4)	(5)

Note : Wherever information is not required, please indicate "NA".

15. Justification for approval sought under S.No. 14.

I/We hereby declare that the above statements are true and correct to the best of my/our knowledge and belief. I/We will abide by any other condition, which may be stipulated by the Government of India. I/We fully understand that any Letter of Approval granted to me/us on the basis of the statement furnished is liable to cancellation or any other action that may be taken having regard to the circumstances of the case if it is found that any of the statements or facts therein are incorrect or false.

Place:  
Applicant

Signature of the

Date:  
Letters

Name in Block

Designation

Official Seal/Stamp

Tel. No

E-mail

Web-Site, if any

Full Residential  
Address

**Recommendation of Development Commissioner**

The proposal has been examined and my recommendation is as follows:

Signature of Development Commissioner".