COPY OF APPLICATION SUBMITTED ONLINE FOR ALLOTMENT OF REGISTRATION NUMBER

(Acknowledgement Number 3153268873)

(Note: Allotment of Registration Number will be subject to verification of the PAN)

NAME OF THE ESTABLISHMENT : RUSHIKA ENTERPRISES ESTABLISHMENT CODE : PUPUN1504191000

PAN OF THE ESTABLISHMENT

: AMSPP6756C

ADDRESS: LINE 1 : SEC NO 17/19 B 31 406 SAI HOS SOC LINE 2 : SPINE ROAD CHINCHWAD

CITY : PUNE

State : MAHARASHTRA

District : PUNE

PIN: 411062 COUNTRY : INDIA

PHONE NUMBER

: 9823194903

FAX NUMBER

E-MAIL ADDRESS

: rushikaentp2016@gmail.com

WEB ADDRESS

DOCUMENT CHOSEN AS PROOF OF ADDRESS : 1. copy of bank passbook/statement

2. copy of power connection in the name of the establishment

3. any license/certificate/number issued by any Govt. authority

SET UP DETAILS

DATE OF SETUP OF ESTABLISHMENT

: 2016-08-01

DOCUMENT NAME

: Others

REFERENCE NUMBER

: 1631000310462600

DATE OF ISSUES OF DOCUMENT

: 2016-08-08

ISSUED BY, PLACE

: SHOP ACT OFFICE PUNE

BUSINESS ACTIVITY AND OWNER'S DETAILS

ESTABLISHMENT TYPE (Whether a Factory) : NO

COVERAGE UNDER SECTION

: 0001(3)(b)

PRIMARY BUSINESS ACTIVITY

: BUILDING AND CONSTRUCTION INDUSTRY

WHETHER THE ESTABLISHMENT IS

STARTUP

: No

WHETHER THE ESTABLISHMENT IS MSME

LICENSES DETAIL

LICENSE UNDER	LICENSE NUMBER	DATE	ISSUED BY	PLACE OF ISSUE
Shops and	1631000310462600	2016-08-08	PUNE SHOP ACT	SHOP ACT OFFICE
Establishments Act			OFFICE	PUNE

WHETHER ESTABLISHMENT COVERED UNDER ESIC

: No

WHETHER ESTABLISHMENT ID WORKING THROUGH AID OF

: No

POWER

OWNER'S DETAIL

OWNERSHIP TYPE	REGISTRATION/LETTER NUMBER	DATE OF REGISTRATION/LETTER	ISSUED BY/PLACE
PROPRIETORY FIRMS	1631000310462600	2016-08-08	PUNE SHOP ACT OFFICE

PARTICULARS OF OWNERS

SL NO	GENDER, NAME, DESIGNATION	PAN, DIN	DATE OF BIRTH	FATHER'S NAME	ADDRESS	MOBILE NUMBER, E-MAIL ID	DATE FROM WHICH IN POSITION
1	MALE, LALU POMU PAWAR, PROPRIETOR	AMSPP6 756C	1970-06-01	POMU SHANKAR PAWAR	SCT. NO 17 /19, B-31-406	9823194903, rushik aentp2016@gmail.c om	2016-08-01

PARTICULARS OF LESSEE

Whether the Establishment on Lessee: No

EMPLOYEE DETAILS

NUMBER OF EMPLOYEES AS ON DATE OF APPLICATION

:20

DATE ON WHICH the EMPLOYMENT STRENGTH CROSSED 19 : 2016-08-01

NUMBER OF EXCLUDED EMPLOYEES

:0

BANK DETAILS

Whether the establishment is having the Bank details : Yes

	BANK NAME	BRANCH NAME	IFS CODE	ACCOUNT NUMBER	ACCOUNT TYPE
ì	TJSB SAHAKARI BANK LTD	CHINCHWAD BRANCH	TJSB0000031	031120100005570	CURRENT ACCOUNT

BRANCH DETAILS

Whether the establishment is having a single Unit or has several Units (Branches) : Single Unit