

Society of Manufacturers of Electric Vehicles Membership Form-I

For SMEV Membership, please complete the details below in full

Organization Details

Organization Name: _____

Manufacturing Unit Address:

City: _____ **Post Code:** _____

Tel.: _____ **Fax:** _____

E-mail: _____ **Website:** _____

Corporate Office Address:

City: _____ **Post Code:** _____

Tel.: _____ **Fax:** _____

E-mail: _____ **Website:** _____

Collaboration / Joint Venture partner details:

EV Product Category:

- | | |
|---|---|
| <input type="checkbox"/> 4W Manufacturers | <input type="checkbox"/> 3W Manufacturers |
| <input type="checkbox"/> 2W Manufacturers | <input type="checkbox"/> Battery Manufacturers |
| <input type="checkbox"/> Electric Vehicle Auto Components | <input type="checkbox"/> Others Manufacturers please mention the Category |

If Electric Vehicle Manufacturer (2W/3W/4W), number of units sold 2020-22:

Total Turnover (2020-22) in million Rs.: _____

Total number of employees: _____

Representative details who would be attending SMEV Meetings:

Name: _____

Designation: _____

Address: _____

City: _____ **Post Code:** _____

Tel.: _____ **Fax:** _____

E-mail: _____ **Website:** _____

Membership Type:

- | | |
|---|---|
| <input type="checkbox"/> 4W Manufacturers | <input type="checkbox"/> 3W Manufacturers |
| <input type="checkbox"/> 2W Manufacturers | <input type="checkbox"/> Battery Manufacturers |
| <input type="checkbox"/> Electric Vehicle Auto Components | <input type="checkbox"/> Others Manufacturers please specify the Category |

Payment Options:

Please tick the relevant box (Payments through cheque/draft to be in favour of "**Society of Manufacturers of Electric Vehicles**").

☐ Cheque ☐ Demand Draft ☐ ECS

Company GST No.: _____

Brief Description:**Expectations from SMEV**

I agree by the rules, regulations and policies of SMEV, which may be amended from time to time, by the SMEV committee members which will benefit the Indian EV Industry.

Authorised Signatory

Signature: _____

Name: _____

Designation: _____

Date: _____

(Day/Month/Year)

Seal of the Organization: _____

Please send the complete SMEV Membership Form-I at below given address:

Society of Manufacturers of Electric Vehicles

4th Floor, MM Towers, Plot No. 8 & 9, Phase 4, Udyog Vihar,

Sector 18, Gurugram, Haryana 122002

Undertaking:

Please note that SMEV membership does not make you eligible for the NEMMP 2020 or any other Government Incentive Scheme, The eligibility of the manufacturer is to be decided as per the Norms Stated in Official Circular issued by Concerned Govt. Authority.