## **Udyam Application Form**

## Aadhaar verification -

## 2. Name of Entrepreneur / उद्यमी का नाम 4. Aadhaar Number/ आधार संख्या 2. Name of Entrepreneur / उद्यमी का नाम 4. Aadhaar number shall be required for Udyam Registration. 5. The Aadhaar number shall be of the proprietor in the case of a proprietorship firm, of the managing partner in the case of a partnership firm and of a karta in the case of a Hindu Undivided Family (HUF). 6. In case of a Company or a Limited Liability Partnership or a Cooperative Society or a Society or a Trust, the organisation or its authorised signatory shall provide its GSTIN(As per applicability of CGST Act 2017 and as notified by the ministry of MSME vide S.O. 1055(E) dated 05th March 2021) and PAN along with its Aadhaar number. 1. I, the holder of the above Aadhaar, hereby give my consent to Ministry of MSME, Government of India, for using my Aadhaar number as alloted by UIDAI for Udyam Registration. NIC / Ministry of MSME, Government of India, have informed me that my aadhaar data will not be stored/shared. / में, आधार धारक, इस प्रकार उद्यम पंजीकरण के लिए यूआईडीएआई के साथ अपने आधार संख्या का उपयोग करने के लिए सुलल/म०उ० मंत्रालय, भारत सरकार को अपनी सहमति देता हूं। एनआईसी / सूल्वणम०उ० मंत्रालय, भारत सरकार ने मुझे सूचित किया है कि मेरा आधार डेटा संग्रहीत / साझा नहीं किया जाएगा। Your Aadhaar has been successfully verified. You can continue Udyam Registration process.

## PAN verification -

PAN Verification						
3. Type of Organisation / संगठन के प्रकार	4.1 PAN/ पैन					
1. Proprietary / एकल स्वामित्व						
4.1.1 Name of PAN Holder / पैन धारक का नाम	4.1.2 DOB or DOI as per PAN / पैन के अनुसार जन्म तिथि या निगमन तिथि					
,						
I, the holder of the above PAN, hereby give my consent to Ministry of MSME, Government of India, for using my data/ information available in the Income Tax Returns filed by me, and also the same available in the GST Returns and also from other Government organizations, for MSME classification and other official purposes, in pursuance of the MSMED Act, 2006.  Your PAN has been successfully verified. Some fields of the form will be disabled. Disabled fields will be automatically filled after verification from PAN data.  GSTIN (As per applicability of CGST Act 2017 and as notified by the ministry of MSME vide S.O. 1055(E) dated 05th March 2021) is required for Udyam Registration w.e.f. 01.04.2021. You are advised to apply for GSTIN suitably to avoid any inconvineance.						
Have you filed the ITR for Previous Year(PY) (2023-24) ITR?  Yes ◎ No ○ Exempted / ভূ হে মানে						
Note: If ITR has not been filed for PY (2023-24) for some reason or it has been filed in ITR-4 form, all the data below will have to be filled in on self-declaration basis.  In case of option (No) in respect of GSTIN, same would be verified from GSTN.						

6. Mobile Number / मोबाइल नंबर +91-					7. Email / ईमेल			
					Example:- info@gmail.com			
ategoriza	tion of ownership	of the MSMEs on	the basis of %age	Share/Member/C	ontribution of amou	nt		
Sl. No.	Hindu Undivided Family (HUF)	Partnership (By Share)	Co-Operative (By Member)	Private Limited Company (By Share)	Public Limited Company (By Share)	Self Help Group (By Contribution)	Society (By Member)	Trust (By Contribution
ОВС	As per the category	51%	51%	51%	51%	51%	51%	51%
sc	As per the category	51%	51%	51%	51%	51%	51%	51%
ST	As per the category	51%	51%	51%	51%	51%	51%	51%
Women In Case o	if she is Karta	51% enterprise, the cal	51% regory of the unit	51% would be the soc	51% al category of the ov	51%	51%	51%
Women In Case of Second of General Office of Second of S	category if she is Karta of proprietorship e Category / सामाजि eral / सामान्य ः r / लिंग i / पुरूष ः Femal ally Abled(DIVYAN हाँ ः No / नहीं eld 11 will be auto	51% enterprise, the cal क वर्ग C / अनुसूचित जाति e / स्त्री ○ Others eG) / दिव्यांग	51% egory of the unit v ○ST / अनुसूचित :/ अन्य	51% would be the soc	51% al category of the ov : / अन्य पिछड़ा वर्ग	51%		
Women In Case of Second of General Office of Second of S	category if she is Karta of proprietorship e Category / सामाजि eral / सामान्य ं S r / लिंग ally Abled(DIVYAN हाँ ं No / नहीं eld 11 will be auto	51% enterprise, the cal क वर्ग C / अनुसूचित जाति e / स्त्री ○ Others eG) / दिव्यांग	51% egory of the unit v ○ST / अनुसूचित :/ अन्य	51% would be the soc	51% al category of the ov : / अन्य पिछड़ा वर्ग	51%		
Women In Case of Second of Gene Office Gene Male 10. Special Office Yes / Data in fice 11. Name	category if she is Karta of proprietorship e Category / सामाजि eral / सामान्य S r / लिंग i / पुरूष Semal ally Abled(DIVYAN हाँ No / नहीं eld 11 will be auto	51% enterprise, the cal क वर्ग C / अनुसूचित जाति e / स्त्री Others IG) / दिव्यांग ofilled (as received	segory of the unit v ST / अनुस्चित s / अन्य	51% would be the soc	51% al category of the ov : / अन्य पिछड़ा वर्ग	51%		
Women In Case of Second of General Office of Second of S	category if she is Karta of proprietorship e Category / सामाजि eral / सामान्य ं S r / लिंग ally Abled(DIVYAN हाँ ं No / नहीं eld 11 will be auto	senterprise, the care क वर्ग C / अनुसूचित जाति e / स्त्री Others G) / दिव्यांग e filled (as received) धम का नाम	segory of the unit v ST / अनुस्चित s / अन्य	51% would be the soc	51% al category of the ov : / अन्य पिछड़ा वर्ग	51%		

Udyam Pogistration

Flat/Door/Block No./फ्लैट / द्वार / ब्लॉक सं	Name of Premises/ Building / परिसर/ भवन का	Village/Town / ग्राम/शहर	
Flat/Door/Block No.	नाम	Village/Town	
	Name of Premises/ Building		
Block / खंड	Road/ Street/ Lane/सड़क/ मार्ग / गली	City/नगर	
Block	Road/ Street/ Lane	City	
Pin/पिन	State/राज्य	District/जिला	
Pin	Choose State/UT	Choose District	
Add Plant			
3. Official Address of Enterprise / कार्यालय क	<b>ा पता</b>		
Flat/ Door/ Block No. / फ्लैट / द्वार / ब्लॉक सं	Name of Premises/ Building / परिसर/ भवन का	Village/Town / ग्राम/शहर	
Flat/ Door/ Block No.	नाम Name of Premises/ Building	Village/Town	
Block / खंड	Road/ Street/ Lane/सड़क/ मार्ग / गली	City/नगर	
Block	Road/ Street/ Lane	City	
Pin/पिन	State / राज्य	District / जिला	
Pin	Choose State/UT		
5. Status of Enterprise	h what are deal at a florida and a florida a	Data of comments	
DD/MM/YYYY	<ul><li>b. Whether production/business commenced</li><li>Yes \( \cap \) No</li></ul>	Date of commencement  DD/MM/YYYY	
5. Bank Details / बैंक विवरण			
Bank Name / बैंक विवरण	IFS Code / आईएफएस कोड	Bank Account Number / बैंक खाता संख्या	
ENTER BANK NAME	EXAMPLE:- SBIN0001624	Example:- 3047845896	
7. Major Activity of Unit / इकाई की प्रमुख गति	विधि		
OManufacturing / विनिर्माण	वा		
7.1 Major Activity Under Services / सेवा के तह	इत प्रमुख गतिविधि		
ONON-Trading / गैर-व्यापारिक Otrading /	व्यापारिक		
8. National Industrial Classification (NIC) Co	de for Activities(One or more activities can be added)		
earch NIC Code in Lesser Steps (To Avoid 3 St	tep Selection of NIC Activities)		
Search NIC Code			
○Manufacturing / विनिर्माण ○Services / रे	नेवा O Trading / व्यापारिक		
NIC 2 Digit Code	NIC 4 Digit Code	NIC 5 Digit Code	
Choose 2 Digit NIC Code	Choose 4 Digit NIC Code	Choose 5 Digit NIC Code	

Add Activity								
19. Number of persons employed / नियोजित व्यक्तियों की संख्या								
Male / पुरूष	Female / स्त्री	Others / अन्य	Total / संपूर्ण					
Example:- 20	Example:- 20	Example:- 20	Example:- 20					
enterprise. / मैं एतद्भवारा घोषणा करता हूं कि नहीं है। Since you have PAN, your Written Dow been filed for the relevant Previous Ye In case the ITR filed in ITR-4 form, you basis. If you have GSTIN, you may avai the 2023-24 Previous Year(PY) data for	मैं बाल एवं किशोर श्रम (निषेध और n Value (WDV) & Total Turno ar; if it has not been filed in r Total Turnover would be au l of exports benefits if you h r new registration, now since 2026 would be effected on t r OR Equipment (in Rs.)	ver would be auto-filled from your ITR (for I that particular previous year, then these bo ito-filled but Written Down Value (WDV) wo ave exports declared on the GSTN and it wo	ह अवगत हूं और मेरे उद्यम में कोई भी बच्चा नियोजित TRs file in ITR-3, 5 & 6 forms) if the same has xes may be filled in on self-declaration basis. uld have to be filled in on self decleration ruld be auto-filled. It is mandatory to fill in continuation change and/or classification as					
March of the Previous Year 2023-24	Industrial Safety Devices d	uring 2023-24(To be filled in on self-declaration basis)	Machinery OR Equipment					
(A)	(B)		[(A)-(B)]					
Example:- 200000.00	Example:- 200000.00		Example:- 200000.00					

