



INDIAN DRUG MANUFACTURERS' ASSOCIATION

Registered under the Societies Reg. Act., XXI 1860

Reg. No. Bom, 111/1961, G.B.S.D.

Regd. under Bombay Public Trust Act 1950 (Bom. XXIX of 1950)

Reg. No. F-1514 (Bom.) Dt. 11-4-1967

Tel.: 022-6662 6901/022-4972 9227

E-mail: sapna@idmaindia.com/melvin@idmaindia.com/accounts@idmaindia.com

Website: www.idma-assn.org/www.indiandrugsonline.org

GSTIN : 27AAATI3594D1ZO

APPLICATION FOR MEMBERSHIP

The Secretary-General

Indian Drug Manufacturers' Association,

102-B, A Wing, Poonam Chambers,

Dr. A. B. Road, Worli, Mumbai- 400 018

Dear Sir,

We hereby apply for Membership of the Association for the following category and agree to abide by the Memorandum and Rules & Regulations of the Association

☐ **PRINCIPAL MEMBER** ☐ **CORPORATE MEMBER** ☐ **ASSOCIATE COMPANY MEMBER**

(Please ✓ whichever is applicable)

Name of the Firm/Company : _____

Constitution (whether Partnership,
Public or Private Company) : _____

Date of Incorporation : _____

Whether Large/Medium/SSI/LL : _____

Address of Registered Office : _____

Telephone Nos. : _____

E-Mail : _____

GSTIN : _____ State: _____

Billing Address : _____

_____ Pincode _____

Telephone Nos. : _____

E-Mail : _____

Nature of Business / Products Manufactured : _____

Preceding Year's Sales Turnover : Year _____ Turnover ₹ _____

(Please enclose last year's Annual Report, including Statements of Accounts, Balance Sheet, etc.)

Manufacturing Licence No. : For Drugs _____

(Copy of valid Drug Mfg. Licence should be attached)

: For Others: _____

Capital Employed : Fixed: _____ Working: _____ Total: _____

No. of Employees : Technical: _____ Non-Technical: _____

Brief Resume of Company : _____

(Please mention salient features of your
Company's development, Research &
Development, Marketing etc.)

Exports : Value : _____

Countries : _____

Regulatory Approvals received :

CDSCO (India) ☐

WHO-GMP ☐

US FDA (USA) ☐

EU GMP (European Medicines Agency) ☐

PMDA (Japan) ☐

TGA (Australia) ☐

China (NMPA) ☐

Other (please specify: _____) ☐

Department	Person In-charge	Telephone No.	E-mail	Mobile No.
Finance				
Marketing				
R & D				
Q & A				
Manufacturing				
HR				
Regulatory Affairs				

Name of Directors/Partners/Proprietor

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Person authorized to represent the firm: (only two)

Name

Designation

Specimen Signature

1. _____

2. _____

We hereby confirm that foreign equity share capital of our company does not exceed 25% (Twenty Five Percent). Further in the event of percentage of foreign equity in our company exceeding 25% at any time in the future, it is hereby accepted and understood that our Principal Membership of this Association will automatically cease and henceforth our Membership will continue with IDMA as an Associate Company Member.

We hereby agree to abide by:

- a) The aims and objects, as per the Memorandum, Rules and Regulations of the Indian Drug Manufacturers' Association (abbreviated as "IDMA");
- b) Good Manufacturing Practices (GMP);
- c) IDMA UCPMP Guidelines;
- d) IDMA policy on Trade Related Intellectual Property Rights (TRIPS).

We enclose herewith a crossed cheque/demand draft on Mumbai Bank for ₹ _____ in favour of **INDIAN DRUG MANUFACTURERS' ASSOCIATION** towards the membership fee. If the remittance is made through RTGS/NEFT, then the UTR Number _____ dated _____

IDMA Bank Details:

Bank Name: BANK OF BARODA

Bank Account Name: INDIAN DRUG MANUFACTURERS' ASSOCIATION

Current Account Number: 76080200000242, IFSC Code: BARB0DBWORL MICR CODE: 400012232

Branch Address: Dr Annie Besant Road, Worli (Naka), Mumbai-400 018, Maharashtra

Bank Name: STATE BANK OF INDIA

Bank Account Name: INDIAN DRUG MANUFACTURERS' ASSOCIATION

Bank Account Number: 10251614726 IFSC: SBIN0001154

Branch Address: Shiv Sagar Estate Branch, Worli (South), Mumbai - 400 018, Maharashtra

For (Stamp of the firm/co.)

Date: _____

Director/Partner/Proprietor

- i) Application Forms are required to be proposed and seconded by two members of IDMA by their authorized signatory affixing the rubber stamp of the firm/Company.
- ii) The location of the registered office (not location of plants) will determine the State Board in which the company/firm falls.
- iii) The proposer & seconder should have renewed their membership for the current year. Otherwise, the application would be treated as incomplete and liable to be rejected.

PROPOSED BY _____ SECONDED BY _____

FOR OFFICE USE ONLY

Scrutinized & found in order : _____

PUT UP AT THE EXECUTIVE COMMITTEE MEETING HELD ON _____
AND APPROVED.

NATIONAL PRESIDENT, IDMA

Principal Member

This category of membership is open to those firms/companies which have a valid drug manufacturing licence. The membership fee will be as follows: (Please ✓ whichever is applicable)

Sr. No.	Particulars	Annual Membership Subscription ₹	GST @18% ₹	Total Amount ₹	
1	Upto Rs. 20 Crores	10,000	1,800.00	11,800.00	☐
2	Above Rs. 20 crores upto Rs. 50 crores	50,000	9,000.00	59,000.00	☐
3	Above Rs. 50 crores upto Rs. 100 crores	75,000	13,500.00	88,500.00	☐
4	Above Rs. 100 crores upto Rs. 200 crores	1,00,000	18,000.00	1,18,000.00	☐
5	Above Rs. 200 crores upto Rs. 500 crores	1,50,000	27,000.00	1,77,000.00	☐
6	Above Rs. 500 Crores	2,00,000	36,000.00	2,36,000.00	☐

Corporate Membership

- I) Any undertaking or the undertaking, together with an associate, actually engaged in pharmaceutical manufacturing activities, which, in the opinion of the Executive Committee has been enjoying good standing and contributing to economic activities shall be eligible to become a corporate member of the Association.
- II) Each Corporate member shall pay an annual membership fee or subscription of ₹ 2,50,000/- (Rupees two lakh fifty thousand) for each year or part there of and GST as applicable.
- III) Each Corporate Member shall be entitled to nominate one of their Director/Partner/Proprietor/Chief Executive as a member on the Executive committee provided that the total number of nominees of Corporate Members accepted as Members of the Executive Committee for the time being, does not exceed 30.

Sr. No.	Particulars	Annual Membership Subscription ₹	GST @18% ₹	Total Amount ₹	
1	Corporate Membership	2,50,000	45,000	2,95,000	☐

Associate Company Member

This category of membership is open to those firms/companies which are connected with the pharmaceutical industry in India. The membership fee will be as follows: (Please ✓ whichever is applicable)

Sr. No.	Particulars	Annual Membership Subscription ₹	GST @18% ₹	Total Amount ₹	
1	Upto Rs. 10 Crores	25,000	4,500	29,500	☐
2	Above Rs.10 crores upto Rs.50 crores	50,000	9,000	59,000	☐
3	Above Rs. 50 crores upto Rs. 100 crores	75,000	13,500	88,500	☐
4	Above Rs. 100 crores upto Rs. 200 crores	1,00,000	18,000	1,18,000	☐
5	Above Rs. 200 crores upto Rs. 500 crores	1,50,000	27,000	1,77,000	☐
6	Above Rs. 500 Crores	2,00,000	36,000	2,36,000	☐

Associate Company members shall have no voting rights.

(PLEASE NOTE FOR ALL CATEGORY THE MEMBERSHIP YEAR IS FROM APRIL TO MARCH)