

**PRADHAN MANTRI BHARTIYA JANAUSHADHI PARIYOJANA**

**Application for opening "Pradhan Mantri Bhartiya Janaushadhi Kendra" at \_\_\_\_\_**

S. No.	Particulars	Details
1.	Name of Applicant*	
2.	Address of Applicant*	
3.	Category (GEN/ SC/ ST/ OBC or Physically Disabled) *	
4.	Status of Applicant* (Tick Appropriate Box)	<ul style="list-style-type: none"> <li>• Individual entrepreneur <input type="checkbox"/></li> <li>• Charitable Institute/Hospital <input type="checkbox"/></li> <li>• NGO/ Trust/ Society <input type="checkbox"/></li> <li>• Government/ Government Nominated Agency <input type="checkbox"/></li> <li>• Any Other <input type="checkbox"/> (Please specify) _____</li> </ul>
5.	Name of Pharmacist (Self/Employed) *	
	Registration Number of Pharmacist	
6.	Registration Number of Organization & Date of Incorporation (if Applicable)	
7.	Name of Contact Person*	
	Designation	
	Mobile No/Landline No*	
	Alternative No. (if any)	
	Email id*	
8.	Aadhaar Card Number*	
9.	PAN Number*	
10.	Proposed location for opening 'Pradhan Mantri Bhartiya Janaushadhi Kendra':	
	Address Line 1*	
	Address Line 2	
	Block/ Taluka/Mandal*	
	District*	
	PIN Code*	
	State*	
Category of Area, whether 'Rural' (R) or 'Urban' (U)		
<p><b>Declaration:</b></p> <p>1. I have gone through the terms and conditions as mentioned in the guidelines for opening of Pradhan Mantri Bhartiya Jan Aushadhi Kendra and agree to abide by the same.</p> <p>2. I/We hereby declare that all the information as mentioned above is true to best of my knowledge. If any information is found to be incorrect, my/our candidature is liable to be cancelled and may be subject to legal/disciplinary proceedings.</p> <p>3. Supporting documents are attached wherever required.</p>		
Date:	Signature	
Place:	Name and Designation	

Note: Applications without Aadhaar Card shall be summarily rejected. \* Mandatory details to be provided.

<b>List of Self-attested documents required to be attached with Application</b>		
<b>Individual</b>	<b>Institutions/ NGO/ Charitable Institute/ Hospital etc.</b>	<b>Government/ Govt Nominated Agency</b>
1. Aadhaar Card	1. Aadhaar Card	1. Details of Department who has allocated the space, along with supporting documents/ sanction order
2. Pan card	2. Pan card	2. Pan card
3. Certificate of SC/ST or Physical Disability (if applicable)	3. Registration certificate	3. Aadhaar Card
4. Pharmacist Registration Certification	4. Pharmacist Registration Certification	4. Pharmacist Registration Certification
5. ITR for last two years	5. ITR for last two years	5. ITR for last two years, if nominated operating agency is a Pvt. Entity.
6. Bank statement for last 6 months	6. Bank statement for last 6 months	6. Bank statement for last 6 months, if nominated operating agency is a Pvt. Entity.
7. Declaration for GST registration once threshold limit is achieved	7. Declaration for GST registration once threshold limit is achieved	7. Declaration for GST registration once threshold limit is achieved

**Submission Details:**

Duly filled application form along with required self-attested documents shall be submitted to below mentioned address in a closed envelope/cover with clearly superscribed as "Application for The New PMBJP Kendra"

To,

The CEO,  
Bureau of Pharma Public Sector Undertakings of India (BPPI),  
8<sup>th</sup> Floor Videocon Tower, Block E1,  
Jhandewalan Extension, New Delhi – 110055  
Tel – 011-49431800