CHAIRMAN OF ELECTION COMMITTEE, CAPEXIL

& ADDITIONAL DGFT

GOVERNMENT OF INDIA

MINISTRY OF COMMERCE & INDUSTRY

CAMP OFFICE

OFFICE OF THE DEVELOPMENT COMMISSIONER
MANIKANCHAN SPECIAL ECONOMIC ZONE
PLOT NO. 1, BLOCK-CN, SECTOR-V
SALTLAKE CITY, KOLKATA-700091

PHONE: 033-2367 4860/4861/4967,Fax-033-2367 4860 Email: support.mksez@nic.in

## NOTICE

Ref. No.CAPEXIL/2015-16/e-Voting

Dated: 5<sup>th</sup> November, 2015.

TO All THE ELIGIBLE ORDINARY MEMBERS OF CAPEXIL FOR THE FOLLOWING PANELS NAMELY:-

- (1) Paper, Paper Board and Paper Products Panel,
- (2) Plywood & Allied Products Panel,
- (3) Ceramics & Allied Products including Refractories Panel,
- (4) Mfrd. Products of Carbon Graphite, Explosives and Accessories Panel, and
- (5) Cement, Cement Clinker & Asbestos Cement Products Panel

Sub: Invitation for Nomination for the Position of Panel representative (Chairman) in connection with reconstitution of the Committee of Administration of CAPEXIL for the year 2015-16.

This is to inform you that under the provisions of Articles 27.8(b) of the Articles of Association of CAPEXIL, I have been nominated by the Government of India, Ministry of Commerce & Industry, Directorate General of Foreign Trade, New Delhi vide F. No.01/94/180/93/AM16/PC4 dated 20.10.2015 as Chairman of Election Committee of CAPEXIL for conducting election of five panels of CAPEXIL for the year 2015-16 via e-Voting before 57<sup>th</sup> Annual General Meeting.

It is hereby informed that the election process has now started. Further, in terms of the Election Rules, Electoral Roll and Election Bye Laws are available in Head Office and Regional Offices of the Council as well as on the Council's Website for information. The Nomination Form for enabling candidates to file their candidature along with annexures are enclosed for filling up in all respects, due signature and stamping and complying with the provisions of the Election Rules. A Nomination to be valid must satisfy and fulfill the following conditions:-

1) the <u>Original Nomination Form</u> as per Annexure 'A' has to be filled-up properly in all fields mentioning therein the Director Identification Number (DIN) of the contestant, as stipulated u/s 152 (3) of the Companies Act, 2013 has to be submitted.

- 2) CA Certificate has to be submitted by the contestant as Annexure A-1,
- 3) Undertaking for DEL status on the letter head has to be submitted as Annexure A-2,
- a declaration has to be submitted by the contestant in the form **DIR-8** as **Annexure-A-3**, that he / she is not otherwise disqualified to be appointed as a Director of a Company since stipulated u/s 164 of the Companies Act, 2013;
- a consent has to be given by the contestant in the form **DIR-2** (**Annexure-A-4**) to act as a Director of the Council, if elected to the Committee of Administration in accordance with Section 152 (5) of the Companies Act, 2013;
- a disclosure of interest has to be given by the contestant in the form MBP-1 (Annexure-A-5) to the Council, if elected to the Committee of Administration in accordance with Section 184 of the Companies Act, 2013;

**Nominations sent by fax/e-mail will not be treated as a valid nomination.** These must be returned to the office of the undersigned (i.e CAMP OFFICE: Office of the Development Commissioner, Manikanchan Special Economic Zone Plot No. 1, Block-CN, Sector-V Salt lake City, Kolkata-700091) within 14 days i.e. by 19<sup>th</sup> November, 2015 by 5.00 p.m.

(SANJEEV NANDWANI)
ADDITIONAL DGFT &

CHAIRMAN OF ELECTION COMMITTEE, CAPEXIL

#### Encl:

- Prescribed Nomination Form (ANNEXURE-A).
- A specimen format of Chartered Accountant's Certificate (ANNEXURE: A-1)
- Undertaking for DEL status on the letter head as Annexure: A-2,
- A declaration by the contestant in the form DIR-8 as Annexure: A-3),
- A consent by the contestant in the form DIR-2 (Annexure:A-4)
- A disclosure of interest by the contestant in the form MBP-1 (Annexure: A-5)

# **CAPEXIL**

# (Sponsored by Ministry of Commerce & Industry, Government of India)

Vanijya Bhavan (ITFC), 1/1 Wood Street, 3<sup>rd</sup> floor, Kolkata-700016 Phone: 033 - 2289-1721/22/23/25, Fax: 2289-1724 E-mail: evoting@capexil.in Web: www.capexil.com

# ELECTION FOR THE PANEL REPRESENTATIVE IN THE CoA FOR REPRESENTATING THE PANEL FOR THE YEAR 2015-16

# NOMINATION FORM

<ul><li>a) Use BLOCK LETTERS while filling-up th</li><li>b) Please fill in all the columns. Do not leave</li></ul>	
	Date:
SPECIFY PANEL:	
To, The Election Authority/Returning Officer, CAPEXIL.	
Re.: Election of Panel representat Committee of Administration	
Candidate's details:	
I/We, desire to nominate Mr. / Mrs. / Ms	of
M/s	,
an Ordinary Member of CAPEXIL, in the Commit panel in the ensuing election for the year 2015-16.	ttee of Administration (CoA) to represent the above
Proposer:	
Name of the Person :	
Designation in Firm/Company:	
Name of the Firm/Company:	
Serial Number in the Electoral Roll :	
Seal / Rubber Stamp of the Proposer's Firm/Company	I propose the above nomination.
Sear / Rubber Stamp of the Proposer's Firm/Company	Yours faithfully,
	(Signature)

#### **Seconder:**

Designation in Firm/Company:	
Name of the Firm/Company :	
Serial Number in the Electoral Roll :	I second the above nomination.
Seal / Rubber Stamp of the Seconder's Firm/Company	
	Yours faithfully,
	(Signature)
ee's/Candidate's acceptance:	
Name of the Person :	
DIN of the Person :	
Designation in Firm/Company:	
Name of the Firm/Company :	
Serial Number in the Electoral Roll :	
I agree to	o and accept the above nomination/candidatu
Seal / Rubber Stamp of the Nominee's Firm/Company	Yours faithfully,
, , , , , , , , , , , , , , , , , , , ,	

#### **Notes:**

- (1) 'Nominee' **cannot** be a 'proposer' or a 'seconder'
- (2) All the three companies represented by the Nominee, Proposer & Seconder should be the Ordinary Members of CAPEXIL as on date. The member can either propose or second to only one person.
- (3) A member not having **qualifying exports** will not be eligible to be a member of the Committee of Administration of the Council.
- (4) \*Proposer & Seconder should be from the respective panels.
- (5) \*Proposer, Seconder and Nominee should put their firm's Rubber Stamps at the specified places/boxes.
- (6) Kindly note Nomination form shall be valid only in the event of **payment of membership subscription** and **no** other **outstanding dues to CAPEXIL**. In case on **scrutiny**, if it is found that the **stipulated eligibility criteria** are **not fulfilled** as per the provisions of the Articles of Association of CAPEXIL, this **nomination** shall be **rendered invalid** & CAPEXIL may treat nomination as withdrawn & cancelled.
- (7) It is mandatory to fill and submit all the **5 (five)** Annexures (A-1, A-2, A-3, A-4 and A-5) with this nomination form.

### FORMAT OF CHARTERED ACCOUNTANT'S CERTIFICATE IN THEIR LETTER HEAD

	•		Books of Accounts and other records of M/s		
			having thei		
			anc		
-			of CAPEXIL's items (rounded off to the nearest i		
	ikh) during the year (s),				
SR. NO.	YEARS		ysical export of CAPEXIL's Items (Rs. in Lakh)  Deemed Export not included)		
1.	2012-13	INR			
2.	2013-14	INR	in Lakhs		
3.	2014-15		in Lakhs		
4.	Average Export		In Lakhs		
	during last 3 years				
It is al	so hereby cerified that M	1/c	is a Ltd. Co./Pvt. Ltd. Co. a		
			m as per Partnership Act 1932 / LLP / a		
•	•		liss, whose signatures		
			/ Managing Director / Director / Partner /		
Design	nated Partner /Proprietor	/ Karta Or the Sar	d Company / mm.		
Cianat	tures:		Signature:		
_	:				
			Name of the Chartered Accountant		
	on in the firm/company:		or his Company		
			Name of the Person Signing:		
Name	of the exporting firm/co	ompany:			
			Designation:		
Officia	al Seal/Rubber Stamp	of exporting	Registration No.:		
compa	any/firm		Official Seal / Rubber Stamp of the CA firm:		
Place :					
Date :					

#### Note:

- (1) Chartered Accountant's Certificate of FOB value of physical exports of CAPEXIL's items made by the member firm in each of the three preceding years (3rd party and deemed exports should not be included) must be submitted to CAPEXIL.
- (2) Export figures to be rounded off to the nearest Rs. in lakh.
- (3) Photostat copies of CA certificate will not be acceptable.
- (4) Original Certificate duly signed by Chartered Accountant is mandatory.
- (5) A member not having qualifying exports will not be eligible to be a member of the Committee of Administration of the Council.

# (Format of Undertaking for DEL status on the letterhead)

This is to certify that our Company/Firm has not been debarred/black listed under DEL as Foreign Trade Policy of the Govt. of India.

Signature:
(Authorized signatory)
Name:
Designation:
Date:
(Rubber Stamp of Company/Firm )

#### Note:

- 1) Please refer <a href="http://dgft.gov.in.licasp/lecDenQuery.asp">http://dgft.gov.in.licasp/lecDenQuery.asp</a> in relation to above matter.
- 2) This certificate should be printed on the company/firm's letterhead.

## FORM 'DIR-8'

## Intimation by Director

[Pursuant to Section 164(2) and rule 14(1) of Companies (Appointment and Qualification of Directors) Rules, 2014]

Registration No. of Company				
Nominal Capital Rs				
Paid-up Capital Rs				
Name of Company				
• •				
Address of its Registered Office				
То				
The Board of Directors of				
Ison/daughter/wife o	of resident o	of .		
director/managing director/manager in director in the following companies dur	n the company hereby give no			
Name of the Company	Date of Appointment	Date of Cessation		
1				
2				
I further confirm that I have not incurre	ed disqualification under sect	tion 164(2) of the Companies		
Act, 2013 in any of the above compani	ies, in the previous financial	year, and that I, at present,		
stand free from any disqualification from	m being a director.			
OR				
I further confirm that I have incurred disqualifications under section 164(2) of the Companies Act,				
2013 in the following company(s) in the previous financial year, and that I, at present stand				
disqualified from being a director.				
-				
- ,	Date of Appointment	<u>Date of Cessation</u>		
1 2				

Signature (Full Name)

Dated this \_\_\_\_\_ day of \_\_\_\_\_

### Form DIR-2

## Consent to act as a director of a company

[Pursuant to section 152(5) and rule 8 of Companies (Appointment and Qualification of Directors) Rules, 2014]

2014]
To(Name of the company)
(Address of the company)
Subject: Consent to act as a director.
I, hereby give my consent to act as director of (name of the company), pursuant to sub-section (5) of section 152 of the Companies Act, 2013 and certify that I am not disqualified to become a director under the Companies Act, 2013.
1. Director Identification Number (DIN):
2. Name (in full):
3. Father's Name (in full):
4. Address:
5. E-mail id:
6. Mobile no.
7. Income-tax PAN
8. Occupation:
9. Date of birth:
10. Nationality:
11. No. of companies in which I am already a Director and out of such companies the names of

12. Particulars of membership No. and Certificate of practice No. if the applicant is a member of any professional Institute. Specifically state NIL if none.

Secretary, Chief Financial Officer, Manager.

the companies in which I am a Managing Director, Chief Executive Officer, Whole time Director,

#### Declaration

I declare that I have not been convicted of any offence in connection with the promotion, formation or management of any company or LLP and have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act or any previous company law in the last five years. I further declare that if appointed my total Directorship in all the companies shall not exceed the prescribed number of companies in which a person can be appointed as a Director.

Signature:	
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Designation:....

Date:

Place:

Attachments:

- 1. Proof of identity;
- 2. Proof of residence;

# FORM MBP - 1 Notice of interest by director [Pursuant to section 184 (1) and rule 9(1)]

То	-	•		-	
The Board of Dir	rectors				
Limit	ed				
Dear Sir(s)					
I,, so	on/daughter/spous	se of, r	esident of	, being a directo	or in
the company he	ereby give notice	of my interest o	r concern in the	following compan	y or
companies, bodi	ies corporate, firm	s or other associ	ation of individua	ls:-	
I.					•
SI No.	Names of the Companies /bodies corporate/ firms/ association of individuals	Nature of interest or concern / Change in interest or concern	Shareholding	Date on which interest or concern arose / changed	
		MD/	Director/Secretar	Signat ry/Whole time Dire	
Place:					
Date:					