

GUJARAT CHAMBER OF COMMERCE & INDUSTRY

Shri Ambica Mills-Gujarat Chamber Bldg., P.B.No.4045, Ashram Road, Ahmedabad-380009 Fax No.: 079-26587992/Tele. No.: 079-26582301/2/3/4 Email: gcci@gujaratchamber.org Website: www.gujaratchamber.org

FORM FOR ANY KIND OF CHANGE IN MEMBERSHIP OF GCCI

Type of Change Desired: CATEGORY / CONSTITUTION / NAME / REPRESENTATIVE / ADDRESS						
Details of Existing Membership Membership Name:						
Membership Number:		Membership Type: Local / Regional				
	Corporate	Ordinary				
Category: (Tick whichever is applicable)	Lifetime	Patron				
	Business Association	Regional Chamber				
Constitution: (Tick whichever is applicable)	Individual/Professional	Proprietorship				
	Partnership	Limited Liability Partnership (LLP)				
	Private Limited Co.	Deemed Limited / Public Limited Co.				
	Association of People	Specific/Discretionary Pvt. NC Trust				
Registered Address (as per GCCI records)						
•	esentative 1	Representative 2				
Name:		Name:				
Mobile No.:		Mobile No.:				
Email ID:		Email ID:				
	Details of De	esired Change				
Membership Name:	Details of De	esirea change				
Membership Number:		Membership Type: Local / Regional				
	Corporate	Ordinary				
Category:	Lifetime	Patron				
(Tick whichever is	Business Association	Regional Chamber				
applicable)	Business / issociation	negional chamber				
Canatitutian	Individual/Professional	Proprietorship				
Constitution: (Tick whichever is	Partnership	Limited Liability Partnership (LLP)				
	Private Limited Co.	Deemed Limited / Public Limited Co.				
applicable)	Association of People	Specific/Discretionary Pvt. NC Trust				
Registered Address						
Representative 1		Representative 2				
Name:		Name:				
Mobile No.:		Mobile No.:				
Email ID:		Email ID:				
We request you to make the above suggested change		Signature with Stamp				
Name of Signatory: Designation:						



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LIST OF DOCUMENTS TO BE ATTACHED WITH FORM						
Change in Category	Forwarding letter on letterhead					
		uisite Fee (if appl				
Change in Constitution	Forwarding letter on letterhead					
	2. Proof of change in constitution e.g. ROC, MOA, Partnership/LLP Deed,					
	etc.					
	3. Copy of PAN card of new entity					
	4. Business Proof e.g. VAT/GST/Excise/Service Tax/IEC, etc. Registration					
	Cert	Certificate of Changed Entity				
	5. Add	Address Proof (if none of the above is applicable) e.g. Shop &				
		Establishment Certificate/Light Bill/Telephone Bill, etc. registered by any				
	_	government department/body				
		Requisite Fee (if applicable)				
Change in Name	Forwarding letter on letterhead					
		2. Proof of change in name e.g. ROC, MOA, Partnership/LLP Deed, etc.				
	3. Copy of PAN Card of new entity					
	4. Business Proof e.g. VAT/GST/Excise/Service Tax/IEC, etc. Registration					
	Certificate of Changed Entity					
		· · · · · · · · · · · · · · · · · · ·		pplicable) e.g. Shop &		
	Establishment Certificate/Light Bill/Telephone Bill, etc. registered by any					
	government department/body					
Change in Representative	1. Death Certificate of Proprietor (for legal heir)					
	2. New Partnership/LLP Deed/MOA Copy					
	3. Board Resolution on Letterhead mentioning the change duly signed by					
	authorized signatories/partners					
		4. Copy of PAN card of new representative				
Change in Address	5. Photograph of new representative					
Change in Address	Address Proof e.g. Shops & Establishment Certificate/Light Bill/Electric Bill etc. registered by any government department/body.					
Bill, etc. registered by any government department/body						
Cheque/DD No.:		Paymen Date:		mount:		
Bank Name & Branch		Date.	, ,	inount.		
Bank Name & Branch		FOR OFFICE	E USE ONLY			
Application Received on:		TON OTTICE	OSE ONE!			
• •	C	?:				
Approved/Disapproved by Scrutiny Committee on:						
Signatures of Members of Scrutiny Committee:						
1.		2.		3.		
4.		5.		6.		
4.		5.		0.		
7.		8.		9.		
Approved/Disapproved by Executive Committee on:						
Permanent Receipt No.:			Receipt Sent on:			
Membership No.		ID Cards Sent on:				
Signature of Officer In Charge						