ISO 18000/22000/27000 Certification Reimbursement Scheme

The Salient features of the Scheme:

i. The Scheme envisages one time reimbursement of charges of acquiring ISO-18000/ISO-22000/ISO-27000 certifications to the extent of 75% of the expenditure subject to a maximum of Rs. 1,00,000/- in each case in order to enhance the Export & Market Potential. **The Certifications on or after 1st April 2010 are only eligible for reimbursement.**

ii. The **Micro, Small & Medium enterprises (Manufacturing)** having EM Part-II No. Acknowledgement are eligible to avail the Incentive of the Scheme – which can be obtained from DIC as per the MSMED Act, 2006. Applications received without EM Number will be rejected and Returned to the applicants.

iii. The Scheme is applicable to those Micro, Small & Medium (Manufacturing) Enterprises who have already acquired ISO-18000/ISO-22000/ ISO-27000 certification from NABCB registered Certifying Body only.

iv. **The Scheme provides one time reimbursement only to each unit** ; irrespective of the fact whether the concerned Micro, Small and Medium Enterprises has one or more than one Enterprises(s) within the same premises/ location or outside.

v. The applicants are required to submit applications only with the **Director of MSME-D1** in the area where the units are located.

vi. Applicants are required to enclose the **Receipts and Invoice for payments** made by them to the certifying bodies, consultants and other expenses also with other annexures.

vii. Expenditure for the training/ Consultancy will also be reimbursable only if they are by the consultants who are acceptable to this office for consultancy as listed below:
   i. Consultants or consulting bodies registered with NRBPT/NABET
   ii. TQM Division of Textiles Committee
   iii. National Productivity Council (NPC)
   iv. Consultancy Development Centre (CDC)
   v. Small Industries Service Institute (Now MSME-D1s)
   vi. CII/ASSOCHAM

viii. **The Scheme Contemplates norms of reimbursement as under:**

   a. Payments made to Certification Agency (excluding travel & hotel expenses & Surveillance charges) by MSME = Full Amount
   b. Payments made towards
      i. Consultancy
      ii. Training, and
      iii. Calibration

      = Up to Rs. 40,000/-

(Rs. Forty Thousand only)

The entitlement for reimbursement = 75% ( (a) full Amount + (b)up to Rs.40,000/- )up to Rs.1,00,000/-.

Guidelines for filing Application Form, Formats of the Application along with annexure and required documents together with "Check List" are available on the Website- www.msmediagra.gov.in OR www.dcsmse.gov.in, under the link NMCP Scheme named "Marketing Assistance and Technology Up-gradation in MSMEs" having major Activity No. 8 in details and the Annexure-I of the Scheme.

Those Micro, Small & Medium (Manufacturing/ Service) Enterprises who have Filed EM Part- II and fulfilling above criteria are required to submit their Application duly completed (with enclosures) addressed to the Director at the following address:

DIRECTOR
MSME-Development Institute
(Formerly Small Industries Service Institute),
34, Industrial Estate,
Nunhai, Agra - 208006, U. P., India
Phone No. - 0562-2280879
Tele/Fax No. - 0562-2280882
Email : dcms-agra@dcmsme.gov.in,

For more information please visit www.msmediagra.gov.in or contact Sh. A. K. Gautam, Asstt. Director and Nodal Officer (ISO), MSME Development Institute, Agra mobile No. 94123-72661.
Annexure - 1:

Application format for claiming reimbursement of certification charges of acquiring ISO 18000/22000/27000 certificate under the Marketing Assistance and Technology Upgradation Scheme.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Description</th>
</tr>
</thead>
</table>
| 1       | (a) Name and address of the unit  
Office & factory location(s) |
|         | (b) Telephone No. Factory & Office  
(c) E-mail & Fax |
| 2       | Details of E.M.No.  
Date of issue; Directorate of Industries/ GM,  
DIC of the State concerned  
(Enclose an attested copy of all pages of  
E.M.No. Certificate to be enclosed) |
| 3       | Whether SC/ST |
| 4       | Whether Women Entrepreneurship |
| 5       | Item(s) of manufacture/processing as  
indicated in the E.M. Certificate. |
| 6       | Proof of MSME/SSI status and functional  
status of the unit as on the date of  
submission of Application. The following  
document(s) to be submitted  
i) A certificate (in original) from State MSME-DI/GM,DIC confirming MSME and functional  
status of the unit at the time of acquiring  
ISO-18000/ISO-22000/ISO-27000 certificate;  
as on date as per Format at Annexure-1A  
OR  
ii) An Affidavit (in original) from Managing  
Director/Director/Proprietor /Partner of the  
MSME unit duly sworn before a Notary  
Public confirming SSI status and functional  
status of the unit at the time of acquiring  
ISO-18000/ISO-22000/ISO27000 certificate;  
and as on date, (as per Format Annexure-  
1B) accompanied by CA certificate of the  
total investment in plant & machinery as on  
date (original purchase value ) (as per  
Format Annexure -1C) |
| 7       | Details of ISO-18000/ISO-22000 /ISO27000  
Certificate |

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<table>
<thead>
<tr>
<th>Page</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Details of expenditure incurred in acquiring ISO-18000/ISO-22000/ISO27000 Furnish a CA certificate of expenditure (in original) giving the details (as per the Format Annexure-1D).</td>
</tr>
<tr>
<td>9</td>
<td>Details of reimbursement/grant/subsidy Certificate (excluding hotel &amp; travel expenses &amp; surveillance charges). Furnish a CA certificate of expenditure (in original) giving the details (as per the Format Annexure 1E).</td>
</tr>
<tr>
<td>10</td>
<td>Pre-receipt to be furnished as per Format at Annexure-1F.</td>
</tr>
</tbody>
</table>

Declaration:

I (full name).................................................. S/o ...........................................Managing Director/Director/Proprietor/Partner of M/s.............(complete address) hereby declare that the particulars given in the application are correct. In case any of the statement/information furnished in the application/documents later found to be wrong or incorrect or misleading, I do hereby bind myself and my unit to pay to the Government on demand the full amount received as reimbursement in respect of above mentioned activity, within seven days of the demand being made to me in writing.

Name and Signature of Managing Director/ Director/Proprietor/Partner of SSI unit (Full Name)

Note:
The copy of SSI Registration, ISO- Certification must be attested by any one of the following:

(1) GM (DIC) or (2) Director, MSME-DI of the Region or (3) Chartered Accountant (with name of the signatory, CA Stamp, and CA Membership No.)
CERTIFICATE

This is to certify that M/s..............................................with their office at..................................................& factory located at..................................dated..........................is a MSME/SSI unit as per Govt. of India definition and has been functional & in production at the time of acquiring ISO-18000/ISO-22000/ISO-27000 Certification No..........................dated.......... and also continues to be functional & is in production as on date.

Dated

Director of Industries/
GM (DIC)
Name & Rubber Seal
AFFIDAVIT

I ............................................................... S/o ........................................... Managing Director/Manager/Partner, * M/s ............................................................. with their Regd. Office at ................................................................... & Factory located at ........................................................................ with E/M No ...................................................................... dt ...................................... do hereby solemnly affirm and declare as under:

i. The Company/Firm/Establishment has been a MSME/SSI unit as per Govt. of India definition; and has been functional & in production at the time of acquiring ISO-18000/ISO-22000/ISO27000 Certification No ......................................................... dt ......................................

ii. The Company/Firm/Establishment continues to be a MSME/SSI unit; and functional & in production as on date.

iii. As per books of account, the total investment (original purchase value) in plant and machinery in the Company/Firm/Establishment as on ....................................... is Rs .................................... (Chartered Accountant Certificate dated ................. To this effect is attached).

Signed on this day of .................................................. dt .................................................................

DEPONENT

VERIFICATION:

I do solemnly affirm that the contents of the Affidavit are true to the best of my knowledge & belief.

DEPONENT

Date:

Place:

(Note)
*On a stamp paper (of Rs.10/- min) in Delhi/ amount as applicable in the respective State duly sworn before a Notary Public (dually affixed with Notarial Stamp; and with Notary Seal and Notary Registration number) or First Class Magistrate.
Certificate from Chartered Accountant about investment in Plant & Machinery (on C.A. Letter Head)

To whom It may Concern

Verified from the Books of Accounts of M/s............................................. with their Regd. Office at .............................................. & Factory located at.................................................. with E.M. No.................................................. dt..................................................
of the Company as on date*..................................................stands as..............................................(Rupees..................................................)

..............................................

Name & Signature of the Chartered Accountant with Stamp and Membership number.

Place:

Date:

*Date of Application on 31st March of preceding financial year.

To whom it may Concern

The documents & records of M/s............................................. with their Regd. Office at ............................................. & Factory located at............................................. with E.M. No.............................................dt.............................................in respect of expenditure incurred for acquiring ISO-18000/ISO-22000/ISO27000 Certificate (or its equivalent) have been verified; and it is certified that the said company have incurred a total expenditure of Rs.............................................(Rupees.............................................) towards; Application fee; Assessment/Audit fee; Annual fee/ Licence fee; Training; Calibration; and Technical Consultants etc.(excluding hotel & travel expenses Surveillance charges) in obtaining ISO-18000/ISO-22000/ISO27000 from the Certificate Agency namely .............................................; as per the following details of payments:

Details of Payments (Name of Certification Agency/ Orgn.) Amount paid (in Rupees)
   a) Application Fee paid to .............................................
   b) Assessment/Audit Fee paid to .............................................
   c) Annual Fee/ Licence Fee paid to .............................................
   d) Calibration charges paid to .............................................
   e) Technical Consultancy charges paid to .............................................
   f) Training expenses paid to .............................................

Total:.............................................

Place:

(Signature of the Chartered Accountant with Name CA Stamp and Membership number)

Dated:

Payments at (a), (b) & (c) above should be supported by copies of receipts of payments made to the Certification agency duly attested. The payment receipts must indicate the purpose for which the payments have been made to the Certification Agency.

Note: Payments made to the Certification agency directly shall only be eligible for consideration of reimbursement.
To be submitted by the Applicant on a Non-judicial Stamp Paper of Rs.50/- (Min) Delhi/ amount as applicable in the respective State duly sworn before a Notary Public (duly affixed with Notarial Stamp; and with Notary Seal and Notary Registration number) or First Class Magistrate.

UNDEARTAKING/ DECLARATION

I .................................................. S/o. .................................. Managing Director/Director/Proprietor/Partner, M/s. .................................................. with their Regd. Office at ........................................ & Factory located at.................................................................with E.M. No...................................dt........................ do hereby solemnly affirm and declare as under:

(a) (i) That the aforesaid Company/Firm/Establishment (s) have not availed reimbursement/subsidy/grant/incentive for acquiring ISO-18000/ISO-22000/ISO27000 Certification under any Scheme operated by Central Govt. (including O/o DC (MSME), M/0 MSME)/ State Govt./Financial Institution etc.

OR

(a) (ii) That the aforesaid Company/Firm/Establishment (s) have claimed & received reimbursement/subsidy/grant/incentive for acquiring ISO-18000/ISO-22000/ISO27000 Certification amounting to Rs...................(Rupees....................from......................(Name of the Central Govt./ State Govt. Deptt./Financial Institution vide draft/Cheque No.....................dt....................of...........(Name of Bank).

(b) (i) That the aforesaid Company/Firm/Establishment (s) have already applied to..................Name of the Central Govt. (other than O/o DC (MSME)/State Govt./Financial Institution vide application dated..........for reimbursement/subsidy/grant/incentive for acquiring ISO-18000/ISO-22000/ISO27000 Certification.

OR

(b) (ii) That the aforesaid Company/Firm/Establishment (s) have not applied to any Central Govt./State Govt./Financial Institution(except O/o DC (MSME), M/0 MSME)/for reimbursement/subsidy/grant/incentive for acquiring ISO-18000/ISO-22000/ISO27000 Certification.
(c) That after availing reimbursement for ISO-18000/ISO-22000/ISO27000 Certification from office of DC (MSME), M/O MSME, in respect of the said Company/Firm/ Establishment (s), I shall disclose this fact on behalf of the said Company/Firm/Establishment(s) at the time of claiming/receiving reimbursement/subsidy/grant/incentive, if any, under any other similar scheme run by Central Govt./State Govt./Financial Institutions etc.

(d) I hereby solemnly affirm that the information given above is correct. In case above declaration is found wrong or incorrect or misleading, I do hereby bind myself & my unit and undertake to pay to the Government on demand the full amount received as reimbursement in respect of above mentioned activity, within seven days of the demand being made to me in writing.

Partner/Proprietor/ Managing Director/Director

In the presence of:

(Full Name and Addresses of the two witnesses also to be indicated along with signatures).

1.

2.

Note: The factual status as on date under the respective paras at (a); (b) & (c) above must be clearly indicated.
Name of the Industry: 
Address: 
Phone No.: 

(On the Letter Head of The Company)

PRE - RECEIPT (in Triplicate)

Received a sum of Rs. __________________ (Rupees __________________) from the Development Commissioner (MSME) towards the reimbursement of expenses incurred for obtaining International Quality Certification ISO 18000/ ISO 22000/ ISO 27000.

*Signature of the Authorized Person
(on Revenue Stamp)
Rubber Stamp of the Unit

(B) FOR OFFICE USE ONLY

Passed for the payment for Rs. __________________/- (Rupees __________________) Vide sanction No. __________________ dated __________________.

Asstt. Director (ISO/PC)
MSME-Development Institute
Agra- 282 006.
Note: Please read the instructions carefully before filling Annexure 1 F i.e. Pre-Receipt.

INSTRUCTIONS

1. Please ensure you prepare the Annexure – 1 F in A-4 size paper only.
2. Please ensure you give Annexure – 1F in triplicate.
3. Please do not fill in the amount in the pre-receipt. Leave the portion blank. The office of Director Concerned will fill it up after calculating the amount due to you.
4. Please ensure the authorized person of your unit signs at the places indicated for signatures of the authorized person on revenue stamp.
5. Office of the Director concern will fill up the amount in B and the sanction no. in the spaces provided for the same.
6. The Assistant Director concerned will sign at the place earmarked for his signature.