1	Name of the Establishment	**RALLIS INDIA LIMITED**
2	Code Number of the Establishment under EPF	**MHBAN000387900X**
3	Date of Coverage	10-03-1949
4	Number Branches & Factories with Establishment Code (if separate No allotted)	
5	**PUNE** Kapil tower, First Floor, S No. 40-1/B, Nr Sangam Bridge, Dr. Ambedkar Road, Pune - 411001.	**MHBAN000387900X** Under Trust
	KOLKATTA 16, HARE STREET, KOLKATTA - 700001	**MHBAN000387900X** Under Trust
	CORPORATE OFFICE- MUMBAI 23RD FLOOR, VIOS TOWER, NEW CUFFE PARADE, OFF EASTERN FREEWAY, WADALA, MUMBAI - 400037	**MHBAN000387900X** Under Trust
	Lote Plot No. D26 Lote Parshuram MIDC Area, Taluka Khed Ratnagiri 419722	**PUKOL000387900A**
	Akola Plot No. C5 & C6 MIDC Indl. Area Phase III, Shivani, Akola 444104	**NGAKL0061385000**
	Ankleshwar Unt I & III Plot No. 3301, GIDC Estate, Ankleshwar, Gujarat - 393002.	**SRBRH0014536000**
	Dahej Plot No. Z-110, Dahej SEZ Part -2nd, Post - Lakhigam, Taluka - Vagra, Dist - Bharuch PIN - 392130	**SRBRH0038572000**
	Dahej-C44-Chemical Zone Plot No. C-44, Old Port Road, Nr BSNL Exchange, GIDC Estate,Dahej, Taluka - Vagra, Dist - Bharuch PIN - 392130	**SRBRH2395707000**
	Bommasandra - SEEDS Division PLOT NO.3, KIADB, 4TH PHASE, BOMMASANDRA INDUSTRIAL AREA,BANGALORE Dist: BENGALURU (BANGALORE) URBAN KARNATAKA, Pin: 560099	**PYBOM0025444000**

FORM No 5A Date :31-Jul-2024

EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)

EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para

(Ist RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BY ONLINE FILLING/ UPDATION OF FORM 5A THROUGH ECR LOGIN OF EMPLOYER. APPLICATION NUMBER IS 3120552835.]

Code Number : MHBAN000387900X

1. Name of Establishment : RALLIS INDIA LIMITED

2. Code Number of the Establishment under EPF Scheme : MHBAN000387900X

3. Postal address of the Establishment and its branches [Please see Annexure : 23RD FLOOR, VIOS TOWER,, NEW CUFFE PARADE,OFF EASTERN FREEWA, WADALA, MUMBAI CITY, MAHARASHTRA - 400037

4. Industry or business in which engaged : OTHERS

5. Date of commencement of business : 10/03/1949

6. Date of closure by previous : N/A

7. Whether run by owner or lessee : Run by Owner

8. Particulars of owners :

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. DR GYANENDRA SHUKLA	15/08/1966	MD AND CEO	BASANT LAL SHUKLA	C-2203, OBEROI EXQUISITE, OBEROI GARDEN CITY, GOREGAON EAST, MUMBAI-400063	01/04/2024

9. In case on lease, particulars of lessee : N/A

S.No.	Name	Date of Birth	Father's Name	Residential Address	Position Date

10. If registered under Factories Act, particulars of Manager or : N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of business of the

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. DR GYANENDRA SHUKLA	15/08/1966	MD AND CEO	BASANT LAL SHUKLA	C-2203, OBEROI EXQUISITE, OBEROI GARDEN CITY, GOREGAON EAST, MUMBAI-400063	01/04/2024

Date:

ANNEXURE - I

Details of Branches of the Establishment

ANNEXURE - II

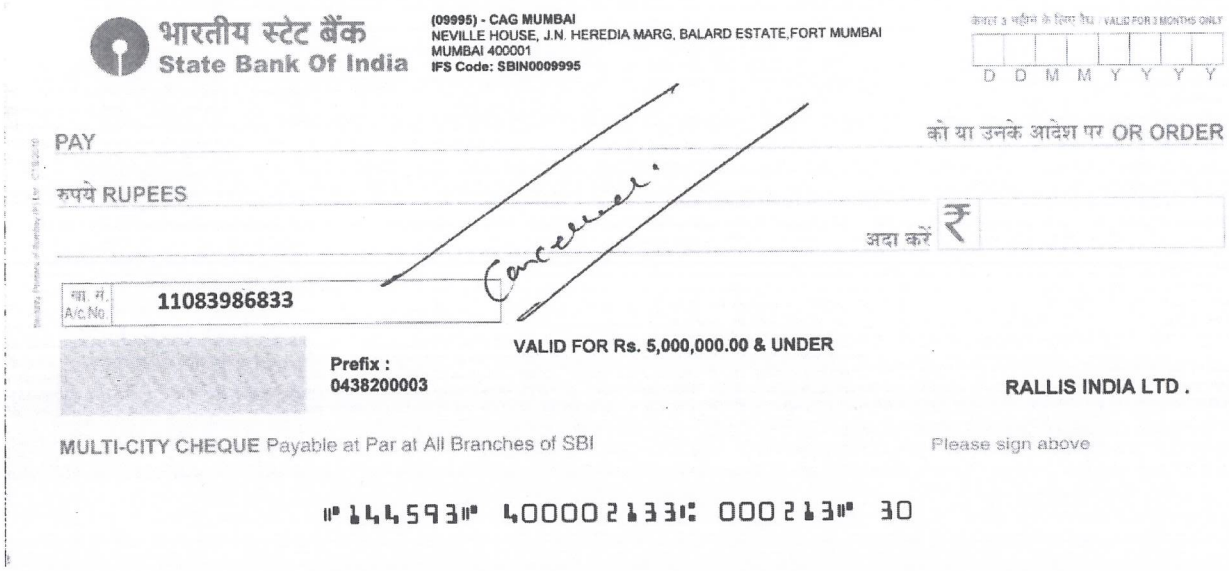
List of Branches having Separate/ Sub Code Number

ANNEXURE - III

Details of Bank Account Number

S No.	IFSC CODE	BANK NAME	BRANCH NAME	ACCOUNT NO	ACCOUNT TYPE	PRIMARY ACCOUNT
1	SBIN0009995	STATE BANK OF INDIA	CAG, MUMBAI	11083986833	CURRENT	YES

Copy of cheque of the primary account number : 11083986833


भारतीय स्टेट बैंक
State Bank Of India

(09995) - CAG MUMBAI
NEVILLE HOUSE, J.N. HEREDIA MARG, BALARD ESTATE,FORT MUMBAI
MUMBAI 400001
IFS Code: SBIN0009995

VALID FOR 3 MONTHS ONLY
D D M M Y Y Y Y

PAY
को या उनके आदेश पर OR ORDER
रुपये RUPEES
अदा करें ₹
खा. सं. A/c.No. 11083986833

VALID FOR Rs. 5,000,000.00 & UNDER

Prefix :
0438200003

RALLIS INDIA LTD .

MULTI-CITY CHEQUE Payable at Par at All Branches of SBI

Please sign above

⑈144593⑈ 40000213⑆ 000213⑈ 30

SPECIMEN SIGNATURE CARD

To be submitted with all documents after the Code number is allotted through the online application.

FULL NAME OF THE AUTHORISED SIGNATORY _____

Name of Establishment : RALLIS INDIA LIMITED

Address of the Establishment : 23RD FLOOR, VIOS TOWER,, NEW CUFFE PARADE,OFF EASTERN FREEWA, WADALA, MUMBAI CITY, MAHARASHTRA - 400037

Code Number of the : MHBAN000387900X

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

 # Strike whichever is not applicable

SPECIMEN SIGNATURE 1. _____

2. _____

3. _____

SPECIAL INSTRUCTION, IF ANY _____

SPECIMEN SIGNATURE OF Mr/Ms _____ ATTESTED

Signature of employer _____

Name of Employer _____

Designation of Employer _____

Seal of Establishment

Mobile number _____

[ ] Please tick if "Not Applicable" due to upload of digital signature

To be submitted separately for each Authorised Officer, if more than one.

Not to be submitted in this format if the employer after allotment of code number has uploaded digital signatures of the Authorised signatories.
In such case the letter generated from the portal after uploading the digital signature(s) to be sent.

In case of upload of digital signature, when page (6) specimen signature card is not applicable, strike this, but keep as enclosure to the form 5A.

Signature valid
Signed by
Date : 31/07/2024
Reason : eSign Service
Location : India