

FORM 1

[See Clause 5 (1)]

[Manufacturing, Blending, Packaging or Re-refining of
Lubricating oils or grease]

Application for the grant of a license to carry on the profession of a processor.

Note: This application form is for registration of an existing unit; renewal of a license as well as for a unit proposed to be established and is to be filled in accordingly. Please state whether application is being made for

- i) Licensing of an existing unit.
- ii) Licensing of a unit to be set up, or
- iii) Renewal of a license.

1. Name and full address of the processor
2. Name and address of the partners/directors
3. Location of the unit
4. Capital investment in the project:
 - a) Land
 - b) Building
 - c) Plant and Machinery
5. Date of commencement of production
6. Capacity of the Plant (Kilo liters)
7. No of Shifts per day.
8. Details of production.

Type of Lubricant and Grease	Specifications (the relevant ISI specification if produced to such specification, otherwise tire specification to which the product would be or is being made)	Brand name or trade name of the product, if any	Quantity (in kilo liters) and value in (Rs. approx.) of production during two previous calendar years.
Engine/Crank case oil.			
Gear Oils.			
Industrial Oils.			
Greases			
Specialty			
Others (Specify)			

9. The sources and details of procurement of base oils and additives.
10. Process details: A brief description of the process.
11. Storage Capacity available/planned :
 - (a) For raw materials
 - (b) For intermediate product
 - (c) For finished products.

12. Statement of utilities giving sources, quantities, assurance of supply :

Electricity (Kwh)

Fuel Oil (K1)

Coal (Tones)

Water

Other

13. Total manpower employed/to be employed.

14. Plant Facility : (existing or planned)

Please give details of equipment including laboratory equipment for quality control.

15. Statutory regulations on environment

1) Whether clearance from the concerned environmental authority has been obtained?

2) If yes, give particulars.

16. Any additional information.

Place.....

Date.....

Signature of Applicant
Name (in block letters)