

HINDUSTAN AERONAUTICS LIMITED  
 .....Division  
Application for Registration as Third Party Inspection Body

Ref: \_\_\_\_\_  
 (Office Use Only)

Complete all sections of this Form; sign the declaration and send the completed Form and attachments in an envelope marked 'Application for Registration as Third Party Inspection Body' to:

The Executive Director/ General Manager  
 Hindustan Aeronautics Limited,  
 ..... Division,  
 .....  
 .....

**Section-1: Applicant Particulars**

Name of the Firm/ Company					
Registration Number		Registering Authority		Date of Registration	
Registered Office Address:					
Contact Person Name and Designation					
Address for Correspondence					
Tel. No.		Fax No.			
Mobile No.		Email Address:			

**Section-2: Applicant Profile**

2.1 Type of Ownership:

- Individual                       Partnership                       Ltd. Company (Pvt/  
Public)  
 PSU/ Govt. Undertaking     Research Institute             Trust  
 Joint Venture, Please specify (.....)  
 Others, Please specify .....

Please enclose copies of Income Tax Return (in case of Individual)/ Partnership Deed/ Articles & Memorandum of Association/ JV Agreement/ Certificate of Incorporation/ Certificate of Registration etc as applicable, duly certified by Chartered Accountant.

2.2 (a) Are you a small scale Industry registered with the NSI? Yes / No  
 If yes, please enclose copy of NSIC Competency/Capacity certificate.

(b) Do you have ISO 17020 certification? Yes/ No  
 If yes, indicate category of approval and validity:

(c) In case of certification by other accredited institutions, please give details:

Institution	Type of Certification	Valid up to (date)

(d) Give details of registration, if any, with:

Company	Registration Number	Dated	Validity	Class/ Type of Registration
HAL or its Divisions (Specify)				
PSUs				
Central/ State Govt				
Major Private Institutions				
Others (Specify)				

Attach necessary certificates from the registering authorities.

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2.3 Have you undertaken any inspection work from any of the HAL Divisions, in the past 3 years or presently? Yes/ No

If yes, please give details, starting with most recent orders:

Name of HAL Division	Order number & Date	Brief description of Inspection Work	Date of completion of Order

2.4 Have you undertaken any inspection work for companies other than HAL in the past 3 years? Yes/ No

If yes, please give details, starting with most recent orders:

Name of the Company	Brief description of Inspection Work	Value in Rs.	Date of completion of Order

Please attach certificate of Work Completion as proof

2.5 List the names of Owners/ Partners/Promoters and Directors/ Company Secretary/ Holder of Power of Attorney, as applicable, in the format detailed below:

Name of the Owners/ Partners/ Promoter & Directors/ Company Secretary / Holder of Power of Attorney	Address	Whether Owner/ Partner/ Promoter/ Director/ Company Secretary/ Holder of Power of Attorney	Extent of share holding in the Firm/ Company as the case may be

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2.6 List the names & addresses of all associated, subsidiary & holding companies, including trusts.

Company Name	Address	Nature of Business	Relationship with Applicant

2.7 Qualifications and experience of Inspection personnel. Attach biographical data.

Position	Name	Qualifications	Years of experience		Assignment/ Duties
			General Engg	Aircraft Industry	

2.8 Give details of Inspection Instruments/Equipment available

Instruments/ Equipment	Model/Make	Measurement Range	Quality	Accuracy achievable	Year of Purchase
1	2	3	4	5	6

2.9 Give a short write-up on Inspection Procedure including procedure for calibration of measuring instruments in practice in your organization.

**Section-3: Financial Details**

3.1 Annual Turnover in the past 3 years:

Year			
Annual Turn-over (Rs. Lakh)			
Profit/Loss Rs Lakhs)			

3.2 Attach the following audited financial statements, as applicable, for the past three financial years and place a tick mark in the appropriate column as confirmation of having enclosed the appropriate documents with the application.

Year			
Balance sheet			
Profit/Loss Statement			

**Important Note on Financial Assessment:**

*Hindustan Aeronautics Limited may conduct financial assessments and prepare reports on all Third Party Inspection Bodies applying for registration, and for regular reviews. Your co-operation is required to assist in the assessment process. Failure to co-operate may affect registration. The assessment report is specifically for use by HAL for the purpose of assessing Third Party Inspection Bodies for registration, and will be treated as strictly confidential.*

3.3 Bank(s) details:

Will you authorise your Bank/s to supply HAL with a reference as to your financial position, if required?		Yes/ No
Name of Bank (Scheduled Commercial Bank) & Branch		
Name and Designation of Contact Person:		
Address		
Tel No		

3.4 Details of Income Tax assessed, as per Clearance Certificate, in the last 3 years:

Year			
Amount Assessed (Rs in Lakhs)			
Amount paid/ payable (Rs in Lakhs)			

Attach copies of Income Tax Clearance Certificates for the past 3 years.

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### 3.5 Tax / GST Details:

- GSTIN:.....

- Details of Tax assessed, as per Clearance Certificate, in the last 3 years:

Year			
Amount Assessed (Rs in Lakhs)			
Amount paid/ payable (Rs in Lakhs)			

Attach copies of Tax Clearance Certificates for the past 3 years.

### 3.6 Have you ever been, whether in the capacity of sole trader, partner, company director, manager or company secretary, either:

- i) Declared bankrupt or compounded with or made an assignment for the benefit of creditors? Yes/ No
- ii) Engaged in the management of any company which has taken or had instigated against it any action resulting in the winding up of the company, being placed under official management or had a receiver and manager appointed? Yes/ No

*Note: If you have answered 'yes' to either (i) or (ii) above, please attach all relevant details. Failure to disclose any of the above matters may affect your registration.*

### Section 4 - Facilities/ Capabilities

4.1 If you own more than one unit, please give separate details for each unit as per Para 2.8

4.2 Mark in the boxes below to specify the category/type of ground handling equipment and tools for which you have capability for measurement and testing and are willing to take up inspection work:

Category/ Type of Tool	Tick (✓) if yes	Category/ Type of Tool	Tick (✓) if yes	Category/ Type of Tool	Tick (✓) if yes
<b>Ground Handling Equipment</b>		<b>Inspection Tools</b>		<b>Others</b>	
				'O' Ring Mould	
Trolleys		Templates		Plastic Mould	
Jigs		Gauges		Slings	
Ladders		<b>Cutting Tools</b>		Wire Rope	
Hydraulic Jacks		Single Point Tools			
Assembly Jigs and fixtures		Drills			
		Counter bores			
Mandrels		Countersink Tools			
Wooden Tools		Reamers			
<b>Hand Tools</b>		Milling Cutters			
Rivet Snaps		Taps			
Rivet Squeezers		Dies			
Pliers		Broaches			
Scissors		Lapping Tools			
Pneumatic Guns		<b>Press Tools</b>			
Torque Wrenches		Blanking			
Markers		Piercing			
Extractors		Dies			

*Note for HAL Divisions: The above categories are indicative. The Division may modify to suit their specific requirements*

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4.3 Mark in the boxes below to specify the category/type of precision aeronautical components for which you have measurement and testing capability and are willing to take up for inspection:

Category/ Type of Parts	Tick (✓) if yes	Category/ Type of Parts	Tick (✓) if yes	Category/ Type of Parts	Tick (✓) if yes
<b>Sheet Metal Components</b>		<b>Machined Components</b>		<b>Non- Metallic Components</b>	
Pressed Components		Conventional Machined Components		Moulded Components	
Extruded / Drawn Components		CNC Machined Components		Rubber Components	
Hot Formed Components		<b>Specific Components</b>		Fibre Glass/Perspex Components	
<b>Assemblies &amp; Sub-assemblies</b>		Fasteners		Acrylic	
Aircraft Structural Assemblies - Riveted / Welded		Engine Discs		Composite Parts	
		Shafts			
		Gears- Bevel, Spur etc			
Mechanical Assemblies Pneumatic / Hydraulic Assemblies		Splines		Heat-treated Parts	
		Small Components such as brackets, Covers, adapters, Sleeves, Axles, Levers etc.		Surface-treated Parts	
Fuel Actuating Cylinders				Castings & Forgings	
Pipe Lines		Machined Casings		<b>Electronic Assemblies</b>	
Soldered Components		Rings/Springs		PCB Assemblies	
		Metallic Tanks		Looms	
		Valves, Atomizers, Nozzles etc.		Cables	
				<b>Non-Destructive Testing</b>	
				Penetrant Inspection	
				Ultrasonic Inspection	
				Eddy current Inspection	
				Radiography	
				Magnetic Particle Inspection	

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4.4 List total value of Inspection work performed in the last three years

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Year			
Value of inspection work performed (Rs in Lakhs)			

4.5 In the last 3 years, has your firm, or any firm with which any of your company's owners, officers or partners were associated, been debarred, disqualified, removed, blacklisted or otherwise prevented from bidding or taking up any inspection work? Yes/ No

If yes, state the Order and the basis for the action.

5. Please provide any additional information, which will help you secure registration with HAL

**6. DECLARATION:**

(This declaration should be completed by a proprietor, partner, director or other senior manager who has the authority to do so.)

1. I/ We declare and confirm that -

- a) The HAL Conditions of Registration are acceptable
- b) All information and attachments submitted in this application are true and correct
- c) I/ We are aware that any false information provided herein will result in the rejection of my application and cancellation of any registrations granted
- d) I/ We shall be bound by the acts of duly constituted attorney who has signed this application and of any other person who in future shall be appointed by us in his place to carry on business of the concern whether or not an intimation of such changes is given to HAL
- e) **I/ We have read and understood the requirements specified in Policy Document on Utilisation of Third Party Inspection Services No. CQAG9006 and agree to abide by the same in all respects**
- f) I/ We undertake to communicate promptly to HAL any changes in condition or working of the firm
- g) I/ We confirm that we have our own inspection facilities

2. I/ We enclose herewith a pay order/ banker's draft number .....drawn on Bank..... for Rs. 100/- as processing fee, which is non- refundable.

Signed: .....  
 Name: .....  
 Position: .....  
 Date: .....

**Details of person holding the power of Attorney (If different from above)**  
 (Attach attested copy)

Name .....  
 Position .....  
 Tel No. ( ... ) .....  
 Mobile No .....  
 Fax No. ( ... ) .....

**Official Seal**