

Annexure – 7

Application for Incubator Monetary Benefit(s)

| Sl. No. | Fields | | | |
|---|---|---|--|--|
| 1 | Incubator's Registration Number* | | | |
| 2 | Type of benefits | Assistance Required | | Whether Availed Earlier? |
| | One time capital grant | Yes | <input type="checkbox"/> | Yes <input type="checkbox"/> |
| | | No | <input type="checkbox"/> | No <input type="checkbox"/> |
| | Reimbursement grant | Yes | <input type="checkbox"/> | Yes <input type="checkbox"/> |
| | | No | <input type="checkbox"/> | No <input type="checkbox"/> |
| | Performance grant | Yes | <input type="checkbox"/> | Yes <input type="checkbox"/> |
| No | | <input type="checkbox"/> | No <input type="checkbox"/> | |
| 3 | Amount of assistance required (in Rs.) | One Time Capital Grant <input style="width: 100%;" type="text"/> | Reimbursement Grant <input style="width: 100%;" type="text"/> | Performance Grant <input style="width: 100%;" type="text"/> |
| 3 | Incubator's Bank Name | | | |
| 4 | Incubator's Account Holder Name | | | |
| 5 | Incubator's Account Number | | | |
| 6 | IFSC Code | | | |
| 7 | Due diligence (Relevant documents to be uploaded) <ul style="list-style-type: none"> - Proposed Budget Plan for one time capital grant. - Detailed Business Plan for utilization of capital grant. - Incorporation Certificate or Memorandum of Association - Recognition Certificate of the incubator by the Central or State Govt. - Audited Statement of Accounts for the last three years or period of existence. - Annual Reports for the last three years or period of existence. - Names of the Industries or Individuals that would be associated with the incubator along with their letter of intent. - CV/ Resume of Full-time Management Team (Board, CEO and other officials). - Proof of availability of 5,000 sq. feet built up space along with lease deed in favour of the incubator. - List of key mentors providing the designation, qualification etc. - List of successful startups along with supporting documents. - Utility Bills and Bills for Mentoring. - Proof of funding raised by Incubator in a University. | | | |
| Nodal Agency's Remarks / Recommendation (Name and designation of officer of Nodal Agency recommending the proposal) | | | | |
| Recommendation / comments of IED (Startup Secretariat) <div style="text-align: right;">CEO, IED</div> | | | | |

* Incubator's registration number as given by the Startup Secretariat.