



## BANGLADESH ELEVATOR ESCALATORS & LIFT IMPORTERS ASSOCIATION

License No. 28/2021  
Reg. No. TO-1032 / 2021

### Application Form : General Member

To  
The President  
Bangladesh Elevator Escalators & Lift Importers Association  
Dhaka, Bangladesh.

Date: \_\_\_\_\_

Subject: Application for Membership of (BEELIA).

Dear Sir,

We, the undersigned are desirous of becoming Member of Bangladesh Elevator Escalators & Lift Importers Association (BEELIA) and agree to abide by the rules and regulations framed there along with amendment to be made from time to time and also agree to pay the Membership Subscription and Donations (if any). The detail information are as follows:

(Please put  $\surd$  marks where applicable)

|      |  |   |  |   |
|------|--|---|--|---|
| 1.   | Name of Company  |   |  |   |
| 2.   | Contact Address:                                       |   |  |   |
|      |  | Phone Number                                    |  |   |
|      |  | E-mail Address                                  |  |   |
|      |  | Website (if any)                                |  |   |
| 3.   | Types of Company                                       | Proprietorship <input type="checkbox"/>         | Partnership <input type="checkbox"/>     | Limited Co. <input type="checkbox"/>    |
| 4.   | Nature of Company                                      | Bangladeshi <input type="checkbox"/>            | Foreign <input type="checkbox"/>         | JV <input type="checkbox"/>             |
| 5.   | Name of Proprietor / Partners / Directors              |   |  |   |
|      | Name   | Designation                                     | Cell Phone No.                           |   |
| i)   |  |   |  |   |
| ii)  |  |   |  |   |
| iii) |  |   |  |   |
| iv)  |  |   |  |   |
| 6.   | Authorized Representative for BEELIA                   |   |  |   |
|      | Name   | Designation                                     | Cell Phone No.                           |   |
|      |  |   |  |   |
| 7.   | Nature of Business                                     | Import & Supply <input type="checkbox"/>        | Installation <input type="checkbox"/>    | Maintenance <input type="checkbox"/>    |
|      |  | Others <input type="checkbox"/> Please specify: |  |   |
| 8.   | No. of Installed Elevator / Escalator                  | Below 10 units <input type="checkbox"/>         | 11 – 50 units <input type="checkbox"/>   | 51 – 100 units <input type="checkbox"/> |
|      |  | 101 – 150 units <input type="checkbox"/>        | 151 – 200 units <input type="checkbox"/> | 201 above <input type="checkbox"/>      |
| 9.   | No. of Elevator / Escalator under Maintenance Contract | Below 10 units <input type="checkbox"/>         | 11 – 50 units <input type="checkbox"/>   | 51 – 100 units <input type="checkbox"/> |
|      |  | 101 – 150 units <input type="checkbox"/>        | 151 – 200 units <input type="checkbox"/> | 201 above <input type="checkbox"/>      |
| 10.  | Brands representing with Origin                        |   |  |   |



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#### Introduced by:

|                       |  |
|-----------------------|--|
| Name of Introducer    |  |
| BEELIA Membership No. |  |
| Signature             |  |

|     |  |                          |
|-----|--|--------------------------|
| 1.  | Deposit slip of Application Form Fee                                   | <input type="checkbox"/> |
| 2.  | Copy of up-to-date Trade License                                       | <input type="checkbox"/> |
| 3.  | Copy of Incorporation Certificate (for Limited Companies only)         | <input type="checkbox"/> |
| 4.  | Copy of BIN No.  | <input type="checkbox"/> |
| 5.  | Copy of Partnership Deed / RJSC Registration Certificate               | <input type="checkbox"/> |
| 6.  | National ID of Person to be represented                                | <input type="checkbox"/> |
| 7.  | Copy of Company e-TIN Certificate                                      | <input type="checkbox"/> |
| 8.  | Office Purchase/rent agreement copy                                    | <input type="checkbox"/> |
| 9.  | Copy of Client's Satisfactory Certificate (at least two)               | <input type="checkbox"/> |
| 10. | Copy of Agency/ Distributorship/ Equivalent Certificate                | <input type="checkbox"/> |
| 11. | 3 copy PP Photograph of the representative duly attested by Introducer | <input type="checkbox"/> |

**Note:** Documents to be attached along with the Application Form must bear applicant's seal and signature:

I, ..... Designation .....

M/s..... declare that the information cited above and the documents furnished along with this Application Form are true and correct to the best of my knowledge. I also undertake to bear responsibilities on behalf of our Company for any deviation, mistakes etc. if found about our information and documents submitted herewith.

| General Member : Fees Chart |                   |
|-----------------------------|-------------------|
| Application Form Fee        | 1000/=            |
| Registration Free           | 6000/=            |
| Yearly Subscription Fee     | 20000/=           |
| Donation                    | 300,000/=         |
| <b>Total Taka</b>           | <b>3,27,000/=</b> |

|   |
|---|
| Payment deposited to:<br><b>Bangladesh Elevator Escalators &amp; Lift Importers Association</b><br>Account No: <b>402311100004169</b><br>Shahjalal Islami Bank Limited<br>Panthapath Branch, Dhaka. |
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| For Office Use                                |   |                       |                          |
|---|---|-----------------------|--------------------------|
| Application Receive Date:                     |   |                       |                          |
| Application Receive By                        |   |                       |                          |
| Application Scrutinized by:                   | Member No.                              | Member No.            | Member No.               |
| Application Accepted:                         | <input type="checkbox"/>                | Application Rejected: | <input type="checkbox"/> |
| Reason of Rejection:                          |   |                       |                          |
| Application Accepted for Membership Category: | General Member <input type="checkbox"/> |                       |                          |
| Allocated Member No.                          | General Member No.                      |                       |                          |

| Remarks (If any)                         |
|--|
| <br><br><br><br><br><br><br><br><br><br> |

| Membership Approved by: |                            |                          |                            |
|-------------------------|----------------------------|--------------------------|----------------------------|
| <u>President</u>        |                            | <u>General Secretary</u> |                            |
|                         | <hr/>                      |                          | <hr/>                      |
|                         | Seal & Signature with Date |                          | Seal & Signature with Date |