



BIOINCUBATORS NURTURING ENTREPRENEURSHIP FOR SCALING TECHNOLOGIES

-AN INITIATIVE BY BIRAC, GOI.

Application Form: Address service

BI/Address service/

Date:

1. Applicant information

1.1	Applicant full name	
1.2	Affiliation/ profession	
1.3	Full postal address for correspondence	
1.4	Phone	
1.5	Fax	
1.6	Email	
1.7	Please attach:	Tick if attached.
	Annexure 1: References from reputed	State what has been attached.
	persons or institutions(for applicant or	
	company officials)	

2. Company information

2.1	Name of company (Regd. or proposed)	
2.1.1	Tick the correct option	 Proprietor Partnership Pvt. Ltd Other
2.1.2	If other, please specify	
2.2	Alternative correspondence address (if different from above address of applicant)	
2.3	Website of company	
2.4	Nature of business	
2.5	Please attach	Tick if attached.
	Annexure 2: List of proposed products and services.	State what has been attached.
2.6	Describe the role of technology in the business. Describe innovation being practiced or proposed, if any.	
2.7	Please attach Annexure 3: List of current directors and top management officials of company along with contact information and affiliations	Tick if attached. State what has been attached.

विज्ञान एवं प्रौद्योगिकी उच्च अध्ययन संस्थान (विज्ञान एवं प्रौद्योगिकी, भारत सरकार के अंतर्गत एक स्वशासी संस्थान) Institute of Advanced study in Science and Technology (IASST)

An Autonomous Institute under Department of Science & Technology, Govt. of India AN ISO 9001:2015 CERTIFIED INSTITUTION





BIONEST-IASST

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3. Application for services

3.1	We wish to apply for the following	
	services at the BioNest-IASST:	
	Basic address service:	
	Respectable, professional address.	
	Mailbox with self pick-up. Email	
	intimation. Reception desk to handle	
	unexpected visitors and intimation.	
	Additional service – Mail forwarding	Currently not available
	Additional service – Phone call receiving/	Currently not available
	forwarding	
	Additional service – Receipt of faxes,	Currently not available
	intimation and forwarding	
	Induction into Associate Incubatee	
	Program(for companies not residing at	
	BioNest IASST)	
3.2	For a period	
	6 months	
	12 months	
	18 months	
3.3	Intimation and forwarding	
	Address for email intimation	
	Phone number for intimation/forwarding	Currently not required
	Postal address for forwarding	Currently not required

4. Application for discounts

4.1	I wish to apply for the following discounts:
	Company has licensed technology from BioNest IASST
	Significant share of company is owned by persons (students, alumni, staff) with current or past affiliation to BioNest IASST
	Company deserves merit-cum-means

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Website: <u>https://iasst.gov.in</u> Phone No: 0361-2270095 Ext. 551

Email ids: <u>bionest.iasst@gmail.com</u> taniap.bionest@iasst.res.in



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	support	
	• Company is a resident incubatee of	
	BioNest IASST	
4.2	Please attach	Tick if attached.
	Annexure 4: Supporting documents for	State the nature of document
	discount claim	attached.

It is hereby declared that the undersigned has read and understood the terms and conditions of BioNest - IASST Address service package and accepts the same.

The undersigned authorized representative of the applicant also declares that all the information given herein above is true and correct to the best of his personal knowledge and belief and also understands that in the event of any information found to be untrue or incorrect, the contract of the said services is liable to be terminated forthwith.

The application form once submitted cannot be cancelled and the applicant is liable to pay the charges towards the services applied for.

Payment Terms:

- $\circ~$ All the charges towards the services applied are advance payments to be paid against the invoice raised.
- Payment Mode: Cheque/Draft/Cash, Please note that, cheque to be drawn in favour of " BioNest-IASST, EDC"
- Payment to be made by demand draft or cheque payable at Guwahati.

For and on Behalf of

(Name of the Company)

(Name of the authorized signatory)

Designation

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