

FORM- I

(See rule 16 (1))

Application form for access to/ collection of Biological resources for commercial utilization and associate traditional knowledge.

PART -A

01.	Full particulars of the applicant:		
	(a)	Name:	
	(b)	Permanent address:	
	(c)	Address of the contact person / agent, if any, in India:	
	(d)	Profile of the organization (personal profile in case the applicant is an individual). Please attach relevant documents of authentication):	
	(e)	Nature of business:	
	(f)	Turnover of the organization in Indian Rupee:	
02.	Details and specific information about nature of access sought and biological material and associated knowledge to be accessed:		
	(a)	Identification (scientific name) of biological resources and its traditional use:	
	(b)	Geographical location of proposed collection	
	(c)	Description / nature of traditional knowledge (oral / documented):	
	(d)	Any identified individual / community holding the traditional knowledge:	
	(e)	Quantity of biological resources to be collected/ collected:	
	(f)	Time span in which the biological resources is proposed to be collected:	
	(g)	Name and number of person authorized by the company for making the selection:	
	(h)	The purpose for which the access is requested including the type and extent of research, commercial use being derived and expected to be derived from it:	
	(i)	Whether any collection of the	

	resource endangers any component of biological diversity and the risks which may arise from the access:	
03.	Details of any national institution which will participate in the Research and Development activities:	
04.	Primary destination of accessed resource and identity of the location where the R&D will be carried out:	
05.	The economic and other benefits including those arriving out of any IPR, patent obtained out of accessed biological resources and knowledge that are intended, or may accrue to the applicant or to the country that he/she belongs:	
06.	The biotechnological, scientific, social or any other benefits obtained out of accessed biological resources and knowledge that are intended, or may accrue to the applicant or to the country that he/she belongs:	
07.	Estimation of benefits, that would flow to India/ communities arising out of the use of accessed bio-resources and traditional knowledge.	
08.	Proposed mechanism and arrangements for benefit sharing:	
09.	Any other information considered relevant:	

PART – B
(Declaration)

I/ we declare that:		
(01)	Collection of proposed biological resources shall not adversely affect the sustainability of the resources:	
(02)	Collection of proposed biological resources shall not entail any environmental impact:	
(03)	Collection of proposed biological resources shall not pose any risk to ecosystems:	
(04)	Collection of proposed biological resources shall not adversely affect the local communities:	
I/we further declare the Information provided in the application form is true and correct and I /We shall be responsible for any incorrect / wrong information.		
Place: Date:		Signature: Name: Title:

FORM A

(See regulation 2)

Information to be furnished for use of biological resources by the applicant Self-disclosure

Common Name of the biological resource proposed to be used: _____				
Scientific Name : _____				
Plants or animals or parts thereof traded : _____				
Specific purpose of access: _____				
Locations / source from where procured*	Quantity in Kgs	Rate per unit	State Biodiversity Board	Prospective Buyers/Users (if known)

*List of local body/BMCs, if already identified shall be attached.

Undertaking

1. I have read and understood the terms and conditions of ABS guidelines and I undertake to abide by relevant legal provisions applicable to biological resource.
2. I undertake to obtain the approval of the NBA/ SBB before making any change in the stated purpose.
3. I undertake to furnish/ share the relevant records with the NBA/ SBB, as and when required.
4. I further declare that the Information provided in the form is true and correct and I shall be liable for any incorrect/ wrong information and wilful suppression of the facts.

Signature

Name of the trader/ company/manufacturer/ Authorized Representative

*Complete Address of the trader/ company/ manufacturer along with phone number
and email address*

Place:

Date:

CHECK LIST

(Whether the copies of the following documents are enclosed)

1.	Passport size photograph of authorized representative with designation (Letter of authorization issued by the Competent Authority to the authorized representative /Head of the Organization/Institution/Company)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2.	Proof of permanent address (Applicant is an Entity such as Organization/ Institution/ Company/ Government agencies)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
3.	Complete profile of the entity such as Organization/ Institution/ Company/ Government agencies not exceeding two pages.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
4.	In case of commercial nature of business, attach copies of proof of relevant permit to engage in and carry on production/ manufacture/ other commercial activity, if any	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.	Self –attested financial statements/tax returns for the last two financial years.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
6.	Biological resource(s) - Scientific name(s) and Common name(s) (Quantity and place from where the biological resource(s) collected/ procured)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
7.	Provide exact details of name of the Village, Mandal, District and State from where the biological resource(s) is to be collected.		
8.	Provide exact details of the biological resource(s) is to be collected or procured from the Institute/ Organization/ Company/ local trader/individual, provide exact contact details (address and contact number) of such supplier.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
9.	Provide exact details quantity of the biological resource(s) to be collected along with parts thereof.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
10.	The signature and seal (wherever applicable) in this authorization letter must be in original.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.	Form-I application fee: Cheque/Demand Draft issued in favour of Member Secretary, Telangana State Biodiversity Board payable in Hyderabad on any scheduled bank.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
12.	Certificate of Non-Indian participation and there is no share capital or management in other countries.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
13.	Inversion seal on the letter head (empty) of Organization/ Institution / Company/ Government agencies	YES <input type="checkbox"/>	NO <input type="checkbox"/>
14.	Annual Report of entity such as Organization/ Institution/ Company/ Government agencies (If available)	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Instructions

- **Form-I application incomplete in any respect and not accompanied by relevant certificates/documents will be summarily rejected.**