Form – VIII B

Application for change of other details in the licence

(To be issued on company letter head)

Application form for intimating			
A. Request for the changes as per details below (Please	tick the a	ppropriate)	
1. Change in name of unit (pl see col B below)	Yes	No	proof of change of name to be mandatorily submitted
2. Change in address (pl see col C1 and C2 below)	Yes	No	proof of change of address to be mandatorily submitted
3. Change in management composition (pl see col D below)	Yes	No	proof of change of management to be mandatorily submitted along with the affidavit and nomination, if applicable
4. Division of the firm (pl see col E below)	Yes	No	proof of change of division to be mandatorily submitted
5. Merger or extension of facilities (pl see col F below)	Yes	No	proof of change of merger to be mandatorily submitted
6. Whether submitted for all the registrations in the premises	Yes	No	Should be submitted for all the registrations together
7. Change in authorized indian representative	Yes	No	Should be submitted for all the registrations together
8. Any other service	Yes	No	Should be submitted for all the registrations together
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All Existing Registration				
Numbers:				
A. Old unit name &				
address				
B. New manufacturing unit details:				
Manufacturing unit				
name:				
(please enclose copy of proof				
of change)				
C1. New office details:				
(please enclose copy of proof of change)				
Address 1:				

Address 2:						
Address 3:						
City			State:			
Pin Code:			Country:			
e-mail Id:			Ph. No.:			
C2. New fac	tory details:		L	- L		
(please enclose	copy of proof of	change)				
Address 1:						
Address 2:						
Address 3:						
City			State:			
Pin Code:			Country:			
e-mail Id:			Ph. No.:			
	n management (CEO/MD/Partners					
Name 1:						
Name 2:						
Name 3:						
E. Division	of the firm (plea	se specify the nature of cl	nange and submit applicat	ole supporting doc	uments)	
F. Merger or extension of facilities (please specify the nature of change and submit applicable supporting documents)						
G. PAYMENT DETAILS:						
	Amount in Rs.	Payment Gateway receipt number	Date of payment receipt	Remarks		
п рестуг	PATION					
H. DECLARATION						
I hereby declar	e and agree:					

1. That all the information given in this form are true, correct, updated and no information has been

withhold/concealed in this respect.

- 2. In case of information is found to be false/incomplete/misleading Bureau of Indian Standards (BIS) shall reserve the rights to reject my request for change of status in case of deficiencies are not cleared by me.
- 3. There has been no other change than the changes indicated above.
- 4. I understand that licence numbers are not transferable and shifting of factory is only allowed
- 5. I understand it is my responsibility to inform BIS in case of subsequent change of status of the company as may be required by BIS.
- 6. I undertake that there is no change in the manufacturing process/components/manufacturing machinery, test equipments.*
- 7. I hereby certify that I am authorized to verify and sign this declaration.

Name of CEO/MD/Partners Authorised Signatory	Signature
*(in case there is change kindly provide additional information to BIS separately)	
Please note:	
Use this form to notify BIS of any updates to your information.	
This form is available at https://crsbis.in/BIS/ .	
All changes must be informed to BIS immediately.	
Please note that BIS will not be able to process changes to legal entity addressed documents and application form with an original signature.	es or that are not accompanied by supporting