

For office use

Form: 45/FO/IS/06

(To be submitted in 04 copies)

Senior Deputy Director (Investor Services)

Ref

Date

APPLICATION FOR APPROVAL TO AWARD A	SUB CONTRACT			
1. Name & Address of the Awarder	2. Name & Addı	2. Name & Address of the Sub-contractor		
Tin No.	Tin No.			
3. Nature of Sub-contract				
4. Item/s to be manufactured & the Quantity				
5. Name of the final exporter				
6, Period required for the sub contract				
7. Particulars of materials to be transferred (details as per annexed sheet)				
Description of Item/s	Consumption Ratio per Pc/Dz.	Quantity	CIF Value (in FC)	
We hereby declare that the above particulars are true and correct and we agree to abide by the under mentioned conditions as applicable thereto.				
Authorized signatory of the Enterprise (Awarder) with the Stamp		Dat	e :	
Name:	• • • • • • • • • • • • • • • • • • • •			
APPR	OVAL OF THE BOI			

The above sub-contract is approved subject to the conditions stipulated below

- 1. Sub-contract to be completed within three months from the date of this approval.
- 2. If the sub-contract is not commenced within the period of one month, this approval should be surrendered to the relevant service centre for cancellation.
- 3. Ensure that the full quantity of materials and accessories transferred to the sub contractor is returned in the form of finished products, left over materials or rejected items, to the awarder of the sub contract.
- 4. Transaction of the sub contract is subject to verification by the relevant verification unit of the BOI if awarder/ sub-contractor is located in EPZZ.
- 5. A sample of main item/fabric (size 4X4 inches) to be produced at the time of verification.
- 6. Payment of Rs.650/- (inclusive of VAT) as documentation/verification charges to the BOI for this approval and an additional charges of Rs.104/- to be paid for any request of further extension of validity period of the sub contract.

For Senior Deputy Director (Investor Services) Board of investment of Sri Lanka

c.c : Director General, Sri Lanka Customs

: M/s .....

: Deputy Director (Verification) / File copy

ANNEXURE	For office use

## BORD OF INVESTMENT OF SRI LANKA APPLICATION FOR APPROVAL TO AWARD A SUB CONTRACT

## **DESCRIPTION OF ITEMS TO BE TRANSFERRED**

Description of Items	Consumption Ratio per Pc/Dz.	Quantity	CIF Value (in FC)
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NAME AUTHORISED SIGNATORY OF THE ENTERPRISE	FOR SENIOR DEPUTY DIRECTOR (INVESTOR SERVICES

With the stamp and date