

संख्या:एसजीएसबी/2014
निदेशालय पशु पालन विभाग
हिमाचल प्रदेश शिमला-5

प्रेषक:

निदेशक पशु पालन विभाग,
हिमाचल प्रदेश शिमला-5

प्रेषित:

1.संयुक्त निदेशक,
पशुपालन विभाग
शिमला जोन व कांगड़ा जोन
हिमाचल प्रदेश ।

2.समस्त उप-निदेशक,
पशु स्वास्थ्य/प्रजनन
हिमाचल प्रदेश ।
दिनांक शिमला-5

15 NOV 2016 नवम्बर, 2016

विषय:-

हिमाचल प्रदेश गोवंश संवर्धन बोर्ड से मान्यता प्राप्त करने के लिए हिन्दी व
अंग्रेजी आवेदन पत्र बारे ।

ज्ञापन,

उपरोक्त विषय पर आपका ध्यान सचिव (पशुपालन)हिमाचल प्रदेश सरकार के पत्र
संख्या:एचवाई-ए(4)-3/ 2015 दिनांक 10-10-2016 की ओर आकर्षित करते हुये सूचित किया जाता है
कि निजि संस्थाओं द्वारा हिमाचल प्रदेश गोवंश संवर्धन बोर्ड से पंजीकरण/ मान्यता प्राप्त करने के लिए
हिन्दी व अंग्रेजी में प्रस्तावित आवेदन पत्र को इस पत्र के साथ संलग्न करके आपके कार्यालय को
आगामी कार्यवाही हेतु भेजा जा रहा है। तथा निर्देश दिये जाते हैं कि अपने-2 जिलों में खोले गये
गौसदनो को निर्धारित दिशा निर्देशों (जो कि प्रपत्रों के साथ संलग्न हैं) के अनुसार पंजीकरण करवाने
के लिए लोगों को प्रोत्साहित करें । तथा उन्हें यह भी सूचित करें की गोसंवर्धन बोर्ड द्वारा दिए जानी
वाली सहायता के लिए केवल पंजीकृत संस्थाएं ही मान्य होंगी ।

संख्या:उपरोक्त
प्रतिलिपि:-

- 1.सचिव (पशु पालन) हिमाचल प्रदेश सरकार, शिमला-2 को सूचनार्थ प्रेषित है।
- 2.नोडल अधिकारी (I.T) निदेशालय पशुपालन विभाग,हिमाचल प्रदेश शिमला-5 को सूचनार्थ एवं
आवश्यक कार्यवाही हेतु प्रेषित है। तथा उन्हें निर्देश दिये जाते हैं कि निजि संस्थाओं द्वारा हिमाचल
प्रदेश गोवंश संवर्धन बोर्ड से मान्यता प्राप्त करने के लिए हिन्दी व अंग्रेजी के आवेदन को विभाग की
वेबसाईड में डाले ।

निदेशक पशु पालन विभाग,
हिमाचल प्रदेश शिमला-5
दिनांक शिमला-5

निदेशक पशु पालन विभाग,
हिमाचल प्रदेश शिमला-5

Phone: 2830089

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Himachal Pradesh Govansh Samverdhan Board
Pashudhan Bhawan, Boileauganj, Shimla,
Himachal Pradesh – 171005
Email : dir-ah-hp@nic.in

APPLICATION FOR REGISTRATION WITH THE BOARD

1. Name and Full address of the :
Gosadan
Tel. No. / Fax No./ Email ID
2. Year of establishment of the Gosadan :
whether registered under Societies Registration Act,
Indian Trust Act, Co-operative Societies Act,
Goshala Act, Goseva Ayog Act or any other Act
(Copy of Registration Certificate duly attested by
Notary to be attached)
3. Whether the Gosadan has a Constitution/ :
Bye Law (Copy of the Constitution/Bye Law,
latest list containing the names and addresses
of the Members of the Governing Body/
Managing Committee with their telephone/
e-mail/address to be enclosed.)
4. Periodicity of Management Committee Meetings/ :
Copies of Resolutions adopted towards the
Activities of last 1 year)
5. List of activities of Animal Welfare being :
Undertaken by the Gosadan in the last
3 years (Give complete details / justification,
attach separate sheet if necessary)
6. Details of financial resources of the
Gosadan

From Government :

From Donations :

From Other sources :

7. Details of Audited Accounts

- a. Whether accounts are audited by a Chartered :
Accountant, Local Audit Department or any other Authority
- b. Copy of audited statement of accounts for the past 3 years may
be enclosed.

8. Income & Expenditure Statement (last 3 years) :

Year	Total Income	Total Expenditure
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Year 1		
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Year 2		
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Year 3		
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9. a) Whether land available :
Own/Govt. allotted/ Leased.
(Relevant Papers to be attached)

- b) Whether Animal Shelters are available :
(If yes, specify number of sheds and area
of the shelters)

- c) Optimum Capacity for housing animals :

- d) No.of animals maintained in the Shelters :
(Verification of animals to be enclosed
as per annexure III)

- e) Whether the Orgainsation owns Ambulance for :
animals. (Yes/No)

10. Details of Other project/schemes (attach :
Separate sheets if necessary)

- 11 . Whether the Gosadan has submitted a Certificate
of Existence from the concerned Authorities as per
Annexure-IV :

12. Details of DD of Rs. 500 towards application fee.

DD No:

Bank Details:

Date:

PRESIDENT

SECRETARY

(To be executed on Rs. 10/- Non-Judicial Stamp Paper by the Organization)

UNDERTAKING

With reference to our application for registration submitted to the Himachal Pradesh Govansh Samverdhan Board. We hereby give the following undertaking for consideration of grant-in- aid to our organisation.

1. I/We, (Name & address of the Gosadan) _____undertake that the Managing Committee Meeting shall be convened and pass a resolution seeking recognition from Bhartiya Govansh Samverdhan Board Himachal Pradesh.
2. The Himachal Pradesh Govansh Samverdhan Board shall have the right to nominate any of its Member or any other Officer or representative to serve as a Member on the Managing or Executive Committee and that such a nominee of the Board shall have full voting right.
3. The Accounts of the Gosadan pertaining to the financial assistance released by the Board to the organization shall be open for inspection whenever so required by any Member/ Officer / Representative nominated by the Board.
4. The Organisation shall maintain its account with any nationalised bank if and when Funds are released from the Board.
5. The Gosadan shall abide by the terms and conditions of the Board for grant of recognition and subsequently for grants sanctioned / released to the Organisation.
6. In the event of closure of the Gosadan the unused grants will be refunded back to Himachal Pradesh Govansh Samverdhan Board.
7. We hereby give our undertaking to the effect that our Gosadan has never been involved in any corrupt practice of any nature.

Signature of Secretary

Name, Telephone Nos.& address :

In capital letters with office seal)

Signature of President

Place:

Date

(To be obtained on the letterhead of Bank)

To

The Member Secretary,
Himachal Pradesh Govansh Samverdhan Board

We hereby certify the following details for transfer of funds to the Organization mentioned below who is having account with our Bank.

1. Name of the Organization :
2. Address of the Orgainzation :
3. Name of the Bank, Branch & Address :
4. Account No. of the Organization :
5. IFSC Code Number of the Bank :
6. Name, address & designation
of signatories of the Organization :

Signature

Name and Seal of the Bank

**(To be obtained from a Senior Veterinary Officer/ Veterinary Officer,
Department of Animal Husbandry, Himachal Pradesh)**

To

The Member Secretary,
Himachal Pradesh Govansh Samvardhan Board.

This is certify that following organization is maintaining animals in their shelter as per the details given below :

1. Name & address of the organization :
2. Address of Shelter House :
3. Number and details of Shelters available :
4. Number of animals sheltered in the shelter house by the Organization as on _____

1 Cows	2 Buffaloes	3 Milch animals	4 Ox/ Bullocks	5 Male Calves	6 Female Calves	7 TOTAL

5. Number of animals rescued during the year wise in the last 3 years
6. Number of animals treated by the organization: year wise in the last 3 years

(As verified from animal treatment register maintained by the organization)

b) Sick and injured animals on the spot :

c) In medical Clinics :

d) By Mobile Clinics :

Place :

Date :

Signature & Office Seal

Name of the Officer :

Designation :

Telephone No. & e-Mail:

(To be obtained on the letterhead of the Local body i.e. Panchayat/ Village/ Municipality/ Corporation or Revenue Dept)

To

The Member Secretary,
Himachal Pradesh Govansh Samvardhan Board.

This is to certify that following organization is working and the details are as under:

1. Name of the organization :
2. Address of Organization (office) :
3. Address of Gaushala :
:
4. Telephone Nos./Fax/E-mail :
5. Name of the President/Secretary/Key Person :
6. Working areas of the organization :
(Please specify the Block/Village etc.)
7. Activities of the organization :

Signature & Office Seal

Name of the Officer :
Designation :
Telephone Nos. :
e-mail :

Place :

Date of Verification :

**THE FOLLOWING DOCUMENTS/INFORMATION TO BE SUBMITTED WITH THE APPLICATION FOR RECOGNITION –
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR GRANT**

1. Registration and Application Fees of Rs. 500 (Rs. Five Hundred Only) in the form of DD in favour of Himachal Pradesh Govansh Samverdhan Board, payable at Shimla shall be sent.
2. Application should be filled completely. It should contain all annexures I to IV as enclosed. Any incomplete application or without annexures will not be processed further.
3. An Undertaking as prescribed in Annexure I should be furnished along with application.
4. Details of Bank Account in the prescribed format for easy/ quick transfer of funds through best/desired possible mode of transfer duly verified by your Bank (Annexure II).
5. Verification Certificate for number of animals sheltered in the shelter as on date to be verified by a Senior Veterinary Officer of Animal Husbandry Department/ name, address, telephone numbers. Details of sheltered animals as per (Annexure III)
6. Verification Certificate for number of animals rescued, treated in the dispensary/ mobile clinic / camps and cruelty cases booked/ legal cases filed if any, during the previous year to be verified by a competent Veterinary Officer of Animal Husbandry Department /Range Officer of the Forest Department on the Govt. letterhead duly signed and sealed with his name, address, telephone numbers (Annexure III).
7. Existence Certificate regarding address and activity of the organization by local body i.e. Panchayat / Village/ Municipality/ Corporation of Revenue Department on the Govt. letterhead duly signed and sealed with his name, address , telephone number (Annexure IV)
8. A copy of the Registration certificate issued by the Register of Societies Trust deed in respect of your organization duly attested by Notary Public. (Translated in English /Hindi if the Certificate is in Regional language & Notarised)
9. A copy of the Constitution registered trust deed by laws Memorandum of your organization (Himachal Pradesh Govash Samverdhan Board activities should be highlighted in the objective clause) duly attested by Govt. Gazetted Officer or Notary Public. (Translated in English/ Hindi if the Certificate is in Regional language & Notarised)
10. A copy of the resolution by management executive seeking recognition from the Board.
11. Audited Accounts and Balance Sheet, Activity report, Annual Report of the organization along with press clippings if any for the last three years, if not sent earlier.
