

Quarterly Performance Report of Non STP units

PERIOD OF REPORT (Q1/Q2/Q3/Q4)

I. NAME AND ADDRESS OF THE UNDERTAKING IN FULL (Block Letters)

Non STP Registration No. with date of registration _____
Name of the Applicant Firm _____
Full Address _____
(Regd.Office in case of limited companies & Head Office for others _____
Pin Code _____
Tel. No. _____
Fax No. _____
Permanent E-Mail Address _____
Web-Site, if any _____
Name of Bank with Address & A/c No. _____
Income Tax PAN _____
The name and address of each Of the Director/Partner _____
IEC Code _____

II. INVESTMENT

(a) Investment during the Quarter : \$ _____
Rs. _____
(b) Cumulative investment upto the Quarter : \$ _____
Rs. _____

III. EMPLOYMENT

(All figures in number)

	During the Quarter	Cummulative for the year
a) Technical	Men _____ Women _____	Men _____ Women _____
b) Non-Technical	Men _____ Women _____	Men _____ Women _____

IV. NET FOREIGN EXCHANGE EARNING

During the Quarter	Cumulative for the year
\$ _____	\$ _____
Rs. _____	Rs. _____

(Signature of Autorised Signatory)
with Seal of Co.
Name in Block Letters _____
Full Address : _____
Tel : _____
Email : _____

Annual Performance Report of Non STP units

PERIOD OF REPORT(April – March)

I. NAME AND ADDRESS OF THE UNDERTAKING IN FULL (Block Letters)

Non STP Registration No. with date of registration _____

Name of the Applicant Firm _____

Full Address _____

(Regd. Office in case of limited companies & Head Office for others _____

Pin Code _____

Tel. No. _____

Fax No. _____

Permanent E-Mail Address _____

Web-Site, if any _____

Name of Bank with Address & A/c No. _____

Income Tax PAN _____

The name and address of each
 Of the Director/Partner _____

IEC Code _____

II. INVESTMENT

(a) Investment during the Year : \$ _____

Rs. _____

(b) (b) Cumulative investment upto the Year : \$ _____

Rs. _____

III. EMPLOYMENT

(All figures in number)

	During the Period	Cummulative
a) Technical	Men _____ Women _____	Men _____ Women _____

b) Non-Technical	Men _____ Women _____	Men _____ Women _____
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IV. NET FOREIGN EXCHANGE EARNING

During the Period
 \$ _____
 Rs. _____

Cumulative
 \$ _____
 Rs. _____

(Countersignature of CA)
 With Seal
 CA Registration No. _____

(Signature of Authorised Signatory)
 with Seal of Co.
 Name in Block Letters _____
 Full Address : _____
 Tel : _____
 Email : _____

Software Technology Parks of India - Thiruvananthapuram**Registration of Contracts by NON-STP Units under STPI**

Sl. No	Description	:	Details
1	Name of the Unit	:	
2	Location of the Unit	:	
3	NON-STP Registration Number and Date (DD/MM/YY)	:	
4	Type of Contract (Master Service Agreement/ Statement of Work/Purchase Order/Work Order/etc.,)	:	
5	IEC Code	:	
6	Description of Software/Services to be exported as per Contract	:	
7	Contract Date (MM/DD/YY)	:	
8	Contract/Project duration 6a. Contract Start Date 6b. Contract End Date	:	
9	Value of the Contract/Project (In INR)	:	
10	If the contract/project duration is more than a year, then provide the year wise breakup of the value (in INR) of the contract/project for the entire contract duration	:	1 st year - _____ 2 nd year - _____ 3 rd year - _____ and so on
11	Name of the Client	:	
12	Address of the Client 11a. Billing Address 11b. Shipping Address	:	
13	Hard copy of the contract enclosed	:	YES/NO

Authorized Signatory Name: _____**Authorized Signatory Signature:** _____**Place:** _____**Date:** _____**Company Seal:****Verified by:**
(STPI authorized Signatory Name and Signature)

FORM A

Performa for Declaring the Export Projection Turnover & payment of Service Charges

1. Name of the NON STP unit :
2. Location Address :
3. Registration Certificate No. :
4. Export Turnover Projection : (Amount in Rs. Lac)

Table I

Q4 of FY 2013-14 (Also Furnish total value of Invoices/Softex forms for period prior to Q4 2013-14 which needs to certified.)	FY 2014-15	FY 2015-16
A	B	C

5. Amount to be paid towards A in Table I (for FY 2013-14) as per Annual Service Charges mentioned in Table II: Rs..... (e.g. if the value of A is Rs. 34.56 lac, amount to be paid is Rs. 17,978). Payment to be made in the form of DD favoring '*Software Technology Parks of India*' payable at

6. Details of DD

DD No	DD Date	DD Amount	Bank Name
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Date:.....

.....
Authorized Signature with Seal

Table II

Annual Service Charges for Non-STP Units : (Amount in Rs.)

S/ N	Export Turnover for the year	Annual Service Charges	Service tax @ 12%	Hr. Edu. Cess @ 3% of Q	Total amount To be paid
		P	Q	R	P+Q+R
1	Upto Rs.12.50 Lakhs	4,000	480	15	4,495
2	Above Rs.12.50 Lakhs – Rs.25 Lakhs	8,000	960	29	8,989
3	Above Rs.25 Lakhs – Rs.50 Lakhs	16,000	1,920	58	17,978
4	Above Rs. 50 Lakhs – Rs. 3 Crore	55,000	6,600	198	61,798
5	Above Rs. 3 Crore – Rs. 10 Crore	110,000	3,200	396	123,596
6	Above Rs.10 Crore – Rs. 25 Crore	225,000	7,000	810	252,810
7	Above Rs.25 Crore – Rs. 50 Crore	250,000	30,000	900	280,900
8	Above Rs. 50 Crore – Rs. 100 Crore	350,000	42,000	1,260	393,260
9	Above Rs. 100 Crore – Rs. 500 Crore	575,000	69,000	2,070	646,070
10	Above 500 Crore – Rs. 1000 Crore	600,000	72,000	2,160	674,160
11	Above Rs. 1000 Crore	650,000	78,000	2,340	730,340

Form – B
(On Unit/Company Letter head)

Ref No.

Date:.....

To,
The Director,
Software Technology Parks of India,
.....
.....

Ref: Certification of Softex Forms and Invoices for the period/monthof FY 20xx-yy
Non-STP Registration No:.....dt.....

Sir,

Please find attached duly filled in Softex Forms and Export Invoices for your kind consideration and certification.
Details are as below.

Sl. No.	Softex No.	Contract/Agreement /PO Reg no.	No. of Invoices	Country of Export	Amount in Foreign Currency	Amount in INR
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(add additional lines if necessary)

Total (N)

Details of Service Charge paid and Export Turnover:

Projected Export Turnover declared to STPI for FY 20XX-YY	Rs.	Lac
Slab to which the of Export Turnover falls to (O)	Rs. ___ Lac to Rs. ___ Lac	
Service Charge paid for the FY 20XX-YY	Rs.	
Amount of Exports Certified/Submitted to STPI w.r.t. FY 20XX-YY (P)	Rs.	Lac
Amount of Exports to be certified in this submission (Q=N)	Rs.	Lac
Total Export (R=P+Q) (Note: R < O)	Rs.	Lac

In Case of any further clarification you may contact the below :

Name and Designation Mr/Ms _____ ,

Email Address _____

Contact No. _____ Phone with STD code: _____ Cell: _____

We declare that the Softex Forms, Invoices and supporting documents are complete in all respect as per the checklist.

Please acknowledge and return the Softex Forms after due certification.

Thanking you,

Yours faithfully,

(Authorized Signatory)
Company Seal