



EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)

EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME 1976 (Please refer Para 10)

(1st RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BY ONLINE FILLING/ UPDATION OF FORM 5A THROUGH ECR LOGIN OF EMPLOYER. APPLICATION NUMBER IS 10000730464.]

Code Number : THTHA2442695000

1. Name of Establishment : VALIANT LABORATORIES LIMITED
2. Code Number of the Establishment under EPF : THTHA2442695000
3. Postal address of the Establishment and its branches : 104, Udyog Kshetra, Mulund Goregoan Lin, kRoad Mulund west, Mumbai, MUMBAI SUBURBAN, MAHARASHTRA - 400080
4. Industry or business in which : HEAVY - FINE CHEMICALS
5. Date of commencement of business : 16/08/2021
6. Date of closure by previous : N/A
7. Whether run by owner or lessee : Run by Owner
8. Particulars of owners :

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. SHANTILAL SHIVJI VORA	05/11/1952	DIRECTOR	SHIVJI RAVJI VORA	304-B, DADAR MANISH MARKET,, SENAPATI BAPAT MARG, TULSI PIPE ROAD, DADAR, MUMBAI, INDIA, MAHARASHTRA,, 400028,	16/08/2021
2	Mr. PARESH SHASHIKANT SHAH	07/05/1960	DIRECTOR	SHASHIKANT MANILAL SHAH	503, JAMUNA VIHAR, CD BARFIWALA LANE, ANDHERI WEST, MUMBAI, INDIA, MAHARASHTRA,, 400058,	16/08/2021
3	Mr. SANTOSH SHANTILAL VORA	25/07/1994	DIRECTOR	SHANTILAL SHIVJI VORA	304/B DADAR MANISH MARKET,, SENAPATI BAPAT MARG,, MUMBAI, INDIA, MAHARASHTRA,, 400028,	16/08/2021

9. In case on lease, particulars of : N/A

S.No.	Name	Date of Birth	Father's Name	Residential Address	Position Date
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10. If registered under Factories Act, particulars of : N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. SANTOSH SHANTILAL VORA	25/07/1994	DIRECTOR	SHANTILAL SHIVJI VORA	304/B DADAR MANISH MARKET,, SENAPATI BAPAT MARG ,, MUMBAI, INDIA, MAHARASHTRA,, 400028,	16/08/2021

Date:

ANNEXURE - I

Details of Branches of the Establishment

ANNEXURE - II

List of Branches having Separate/ Sub Code Number

ANNEXURE - III

Details of Bank Account Number

S No.	IFSC CODE	BANK NAME	BRANCH NAME	ACCOUNT NO	ACCOUNT TYPE	PRIMARY ACCOUNT
1	KKBK0000642	KOTAK MAHINDRA BANK LIMITED	MUMBAI MULUND	1945490567	CURRENT	YES

Copy of cheque of the primary account number : 1945490567



Marathon Max, Lbs Road Mulund Goregaon Link
 Road Junction Mumbai - 400080
 Maharashtra India
 IFSC : KKBK0000642

Valid for three months from date of issue
 दिनांक Date

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 D D M M Y Y Y

Pay

रुपये Rupees

खाता सं. A/c No. 1945490567

अदा करें।

₹

CURRENT ACCOUNT WHOLESALE BANKING
 CBS

For Valiant Laboratories Limited

शैलेश वैरी

Authorized signatory

Please sign above

16-08-2023

Payable At-par at all branch locations of Kotak Mahindra Bank Ltd.

⑈000 20 7⑈ 400485006⑈ 00 2 25 1⑈ 29

This Copy Is Not For Use

SPECIMEN SIGNATURE CARD

To be submitted with all documents after the Code number is allotted through the online

FULL NAME OF THE AUTHORISED SIGNATORY _____

Name of Establishment : VALIANT LABORATORIES LIMITED

Address of the Establishment : 104,Udyog Kshetra,MulundGoregoanLin, kRoad Mulund west, Mumbai, MUMBAI SUBURBAN, MAHARASHTRA - 400080

Code Number of the : THTHA2442695000

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

Strike whichever is not applicable

SPECIMEN SIGNATURE 1. _____
2. _____
3. _____

SPECIAL INSTRUCTION, IF ANY _____

SPECIMEN SIGNATURE OF Mr/Ms _____

Signature of employer _____

Name of Employer _____

Designation of Employer _____

Seal of Establishment _____

Mobile number _____

[] Please tick if "Not Applicable" due to upload of digital signature

To be submitted separately for each Authorised Officer, if more than one.

Not to be submitted in this format if the employer after allotment of code number has uploaded digital signatures of the Authorised signatories.

In such case the letter generated from the portal after uploading the digital signature(s) to be sent.

In case of upload of digital signature, when page (6) specimen signature card is not applicable, strike this, but keep as enclosure to the form 5A.