

FEES

FOR OFFICE USE ONLY

NOC _____/- OCMMS PCB ID - _____
 AIR _____/-WATER _____/-
 OTHER _____/- PASSWORD - _____
 TOTAL _____/- **DOCUMENTS MISSING** - _____
 CHECKED BY: _____ ONLINE INWARDED BY _____ SIGN _____

OCMMS INFORMATION FOR REGISTRATION (ALL FIELDS ARE MANDATORY)

1.	Unit/Project/Hotel/Hospital Name:-	
2.	Survey / Plot / T.C. No.:-	
3.	Address of unit:-	
4.	Town / Village:-	Pin:- 403_____
5.	District:-	Taluka:
6.	Industry Sector (production):-	
7.	Project Cost/GFA Value/Investment:-	Plant and Machinery-
8.	Mobile for SMS from GSPCB:-	

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Contact Address	Chairman: Shri Ganesh Shetgaonkar Email: chairman-gspcb.goa@nic.in
GOA STATE POLLUTION CONTROL BOARD Near Pilerne Fire Station, Opposite Saligao Seminary Saligao – Bardez - Goa Pin:403 511 Tel. Nos 0832- 2407700 ,01,02,03 OCMMS URL : - goaocmms.nic.in Office Email: goapcb@gspcb.in	Member Secretary: Dr. Shamila Monteiro Email: ms-gspcb.goa@nic.in
	Environmental Engineer: Shri Sanjeev Joglekar Email: ee-gspcb.goa@nic.in Website :- www.goaspcb.gov.in

Fees **Shall be paid Online via Net Banking, Credit or Debit card**

ALL DOCUMENTS TO BE SUBMITTED IN HARD CARDBOARD FILE

Contact person name: Director/Applicant name: Mob no: Addr (r)	
ALL UNITS ARE IN KILO LITERS PER DAY Water Consumption Ind:- _____ Kltr/day Waste Water Generation - Ind: _____ KL/day Wash water _____ Kltr/day (if applicable) Boiler feed _____ Kltr/day (if applicable) Cooling water _____ Kltr/day (if applicable) Spray in Mines _____ Kltr/day (if applicable) Domestic water (Drinking & Toilet): _____ Kltr/day Domestic Waste Water Generation - _____ Kltr/day	No. of Employees: _____ Dist from Highway: _____ mtrs. Total Plot Area: _____ sq mtr. Open Area: _____ sq mtr. Email ID - _____ Source of water Supply – _____ Plant Commission/Production date/ Tentative date in-case of NOC ___/___/___
Mention the Waste water discharge point (Septic tank/Soak pit/ Sewerage/STP/ETP) – IF STP/ETP _____ Capacity (Meter Cubic)) Diesel Generator Set/Oven/Boiler (Yes/No) _____ (If Yes) Capacity: _____ KVA/KG/Liter. Stack Height: _____ mtrs. Diameter of the stack : _____ cm Fuel Consumption: (liter/kg per hour) : _____ Oil for maintenance of DG set (ltr/yr): _____	Product Names & Quantity/ month 1) 2) Raw materials: Names & Qty/ month 1) 2) In case of Hotel/Guest House/Rest. 1) No. of Rooms - _____ 2) Restaurant (Seating Capacity) – _____

Any other Hazardous Waste eg. Oil/Paint/Sludge Qty generated per yr. _____ Metric tons/Yr

Solid Waste Generated - Qty/month(KG/TONNES)

- 1) DRY WASTE
- 2) WET WASTE-

THE ABOVE FILLED DATA AND DOCUMENTS SUBMITTED ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND WAS FILLED ON OCMMMS PORTAL IN MY PRESENCE; AND I SHALL BE RESPONSIBLE FOR THE SAME.

NAME : _____

SIGNATURE OF THE APPLICANT: _____

CONSENT TO ESTABLISHMENT/CONSENT TO OPERATE/RENEWAL

1) Land allotment / earmarking letter or lease / Sale deed/Form 1 & 14 (Mandatory)
2) Provisional/Permanent registration copy of SSI(SMALL SCALE INDUSTRIES) / Explosive licence for Quarry/M&G Licence for Mine
3) Tourism licence (FOR HOTEL/GUEST HOUSE) & Health Licence (FOR RESTAURANTS/SPA/AYURVEDIC & HOMEOPATHIC CLINIC)
4) Approval of Village Panchayat / Municipality (N/A for units in Industrial Estates) & TCP Clearance for Residential Projects
5) Forest department licence for Saw Mills & Captain of Ports licence for Cruises/Vessels/Docks/Jetties etc.
6) Flow chart and detailed production process/Project Report if applying for CTE in IDC
7) Site plan in A4 size (not required for units applying for Consent to Establish setting up in industrial estate)
8) Soakpit & Septic Tank Diagram with Dimensions or STP Diagram in A4 size or ETP Diagram in A4 Size, Holding Tank for Shacks
9) CRZ Licence for units (including hotel, shacks, temporary huts, restaurants) falling in CRZ notified areas.
10) Layout plan showing the location of manufacturing equipments, water supply / drainage lines, position of chimneys, effluent treatment plant and final discharge point, sludge solid waste disposal points and septic tanks / soak pits
11) different process and point sources of emissions and position of stacks and chimneys and any other relevant details
12) Affidavit on stamp paper of value Rs. 50/- or Certificate from Chartered Accountant certifying the Total Estimated Investment for the Project. (Performa enclosed) NOT REQUIRED FOR SPA/AYURVEDIC, HOMEOPATHIC CLINIC & PUC
13) Latest Analysis report for Stack, Water Analysis if Applicable (ONLY FOR RENEWAL OF THE CONSENT)
14) Photocopy of NOC or previous consent issued by this Board in case of renewal of consent/expand (If Applicable)
15) Details of Air Pollution control devices provided or proposed to be provided

AUTO RENEWAL FORMAT IS AVAILABLE ON THE BOARD WEBSITE, APPLICABLE ONLY FOR GREEN/ORANGE CATEGORY INDUSTRIES WITH VALID CONSENT.

Affidavit Format

(Specimen of the matter to be typed on **Rs. 50/- stamp paper and Notarized**; to be submitted by the applicant along with the file

(NOTE: We **DO NOT** accept lease/rent value, please provide actual land and building cost). **DO NOT CHANGE THE FORMAT**

I, Shri. _____

Son/daughter of _____, aged _____ years, Indian National, resident of _____, hereby solemnly declare an oath as follows.

1. I say that I am the Proprietor / Director / Authorized Signatory of M/s. _____ an industrial unit located at _____, Goa.
2. I say that the Gross Fixed Asset Value / Gross Estimated Value (in case of NOC) of our unit is as follows;
 - a. Land _____ (cost as per date of purchase and utilized area)
 - b. Building _____ (cost of utilized construction)
 - c. Plant & Machinery _____ (DG SET, STP/ETP Value)
 - d. Other fixed assets _____Total _____

(Rupees _____)

3. I say that I am filing this Affidavit for the limited purpose of producing it before the Goa State Pollution Control Board for obtaining Consent to _____ (establish/operate/renewal/expand, fill the required detail)

Solemnly affirmed at _____

Dated _____

Deponent
Name & Signature