

FORM – M
{(see section 9(1) and rule 13)}
Application for License to act as Licensed Agency.

Please affix here
Court Fee Stamp of
Rs.20/-

To,
The Director, MFS
Directorate of Maharashtra Fire Service,
Hans Bhugra Marg, Kalina, Santacruz (E),
Mumbai 400098

Sub : Grant or renewal of License to act as Licensed
Agency for the purposes of the Maharashtra Fire
Prevention and Life Safety Measures Act, 2006
(Mah.III of 2007).

Sir,

The undersigned hereby applies for grant of or renewal of License to act as a Licensed Agency for undertaking and executing the work of providing installation of equipments and maintenance of fire prevention and life safety measures in any place, building or part thereof. The particulars regarding the Agency are given below :-

(1)	Full Name of the Applicant with Company name. (in capital letters)	
(2)	Whether Licensed Agency will be a Proprietary Concern or an Association of persons such as a Firm or Company, etc.	
(3)	Registration No. of Firm or Company (Copies of Registration Certificate, Article of Association or other relevant document appended).	
(4)	Address	
(5)	If the Licensed Agency will be - (a) a proprietary concern, the name, qualifications and address of the person operating the same. (b) a firm or company, names, qualifications and addresses of each of the partners, or as the case may be, Directors.	
(6)	Office address from where the Agency will act as a Licensed Agency-	
(7)	Class & category for which Licence is applied for-	
(8)	Personnel with the Agency - (a) Supervisory staff- names, qualifications and addresses of each- (b) Other employees - names, qualifications and addresses of each-	
(9)	Details of work with regard to Fire Prevention and life safety measures, if any, undertaken and executed previously- (a) name or nature of work	Ref Proforma B

	(b) approximate cost of work	
	(c) Whether the work is executed or still in progress and remains to be executed. (Note:- original or attested copies of Certificate of verification of above details by the officers under whom works are carried out are attached).	Ref Proforma A
(10)	Technical qualifications and experience of the proprietor or partners or directors and dealing technical officers or employees of or with the applicant.	Ref Proforma C
(11)	Workshop machinery, tools and plant owned by the applicant, (location and site of workshop and full details to be given).	List Attached at Pg No.....
(12)	Whether enlisted with any other department or Organization in any other State. If so, in which category.	
	(a) Has the applicant or his partners or Directors been blacklisted in the past by any Government Department / Organization / other State?	
	(b) Has the applicant applied for registration elsewhere in his name or in the names of partner, Director or firm or company? If so, whether the application is rejected? Give particulars.	
(13)	Whether the applicant has produced up to date Income tax certificate.	
(14)	Amount of solvency certificate, which the applicant has held or produced.	Class 'A' – Rs. 15.00 Lac Class 'B' - Rs.10.00 Lac Class 'C' - Rs. 5.00 Lac Class 'D' - Rs.2.50 Lac
(15)	A fee of Rs. _____ will be paid by NEFT.	A' Class Rs.25,000/-, 'B' Class Rs.15,000/-, 'C' Class Rs.5,000/-, 'D' Class Rs.2,500/-
(16)	If the application is for renewal of the existing licence, the details in respect of the licence and the period of its validity (copy of the licence appended)-	
(17)	Whether, the licence to act as a Licensed Agency granted any time previously has been suspended or cancelled; and if so, reasons there for.	

I / We certify that I / We have not been and will not get myself or ourselves registered as licensing Agency with the Director, Maharashtra Fire Services or with any Municipal Corporation /Council/Nagar Panchayat or any Special Planning Authority under more than one name.

Thanking you,

Yours faithfully,

Applicant
(Name, Sign & Seal)

DIRECTORATE OF MAHARASHTRA FIRE SERVICES

SELF-CHECK LIST FOR FILLING UP FORM-M FOR LICENCE

Name of the Applicant/ Agency	Please Type
Address	Please Type
Telephone & Fax No.	Please Type
Mobile No.	Please Type
E-Mail ID	Please Type
PAN NO & GST NO.	Please Type

Please check whether given below documents are attached or not.

Sr. No.	Details requires as per the Fields in Form M and the requirements prescribed under Rule 12, 13 & 16 of the Maharashtra Fire Prevention & Life Safety Measures Rule, 2009.	If Enclosed		Indexed at Pg. / Flap No.
		Yes	No	
1	Please affix Court Fee stamp of Rs.20/- on Application 'Form-M'			
2	Full name of the applicant (in capital letters) here you are required to give the full name of the agency only.			
3	Address (in case of agency is company, write here the address given in the registration certificate.			
4	Registration number – In case of – a) If the agency is company (Public Ltd / Private Ltd), then the number appear in registration certificate. (Attested copies of memorandum of association and articles of association are enclosed). b) If the agency is partnership firm, and if it is registered, then attested copy of deed of Partnership and power of attorney to be enclosed. c) If the agency is Proprietary Concern then, either MSME, Udyogam or Shop Act License (doing business of fire fighting / detection / passive protection installation work) d) For all the above entity, GST Certificate to be enclosed			
5	Qualifications and address of the – a. Directors (in case of company public / private) b. Partners (in case of partnership) c. Proprietor (in case of proprietorship concern) Attested passport photographs of Partners / Directors / Individual Proprietors.			
6	Office address from where the agency will act as a Licensed Agency. (The address may either given in the registration certificate or if it will be functioning from the other place / branch office opened in Maharashtra, then mention here such address from which is to be mentioned on the licence.			
7	Class for which licence is applied for – Fire Fighting System : A / B / C / D Detection System : A / B / C / D Passive Protection System: A / B / C / D			
8	Class for which licence is applied for – Mention specifically the type of work agency desire to execute / to have licence (Separate application for each type of class of work i.e			

	Fire Fighting or Detection Work or Passive Protection Work.) Tick mark the class for which you are eligible on the basis of annual turnover.																										
	<table><tr><td rowspan="2">Class of licence</td><td colspan="3">Cost of annual works executed in a single year out of last three years out of which atleast in one financial year you must have executed and achieved minimum turnover (rupees in lakh) prescribed as mentioned below) :</td></tr><tr><td>Fire Fighting System Installation such as hydrants, Sprinklers, Pumping.</td><td>Detection–Smoke detection, Heat detection, UV, Beam detector, manual call point and fire suppression system</td><td>Passive Protection such as cable protection fire doors, still member protection glass protection, smoke management system, etc.</td></tr><tr><td>A</td><td>500.00</td><td>200.00</td><td>200.00</td></tr><tr><td>B</td><td>300.00</td><td>100.00</td><td>100.00</td></tr><tr><td>C</td><td>200.00</td><td>50.00</td><td>50.00</td></tr><tr><td>D</td><td>100.00</td><td>25.00</td><td>25.00</td></tr></table>	Class of licence	Cost of annual works executed in a single year out of last three years out of which atleast in one financial year you must have executed and achieved minimum turnover (rupees in lakh) prescribed as mentioned below) :			Fire Fighting System Installation such as hydrants, Sprinklers, Pumping.	Detection–Smoke detection, Heat detection, UV, Beam detector, manual call point and fire suppression system	Passive Protection such as cable protection fire doors, still member protection glass protection, smoke management system, etc.	A	500.00	200.00	200.00	B	300.00	100.00	100.00	C	200.00	50.00	50.00	D	100.00	25.00	25.00			
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D	100.00	25.00	25.00																								
9	Personnel with the agency.- names, qualifications and addresses of each. a) Supervisory staff (heads/officers of technical deptt/accounts etc. Dept.) b) Other employees working in technical / non technical deptt.																										
10	Details of works of fire fighting/detection/passive protection work executed in the previous financial years(i.e excluding the financial year in which application is now made for licence/renewal of license. Such information should contain the orders received, with date of work orders, details of works (items of fire fighting/detection/passive protection items and its cost with installation, commissioning, with or without gst etc, if the work is completed in that financial year or a part of it carried forward to the next financial year etc.. This information for each financial year is to be given in the prescribed proforma 'A' enclosed with this check list, should be signed by the Chartered Accountant and the certificate to that effect in the prescribed proforma 'B' enclosed with this check list, duly signed by the Chartered Accountant to be enclosed with application having UDIN Certificate No.. Hence you have to enclosed. i. Annual Turn over Certificate duly signed by C.A. (Proforma- 'B') ii. Statement of Annual cost of work executed duly signed by C.A. (Proforma- 'A') for last three consecutive years. iii. Copies of work orders with BOQ/Estimate/Quotation/Bills. (works executed and work under execution, new or old), iv. Work completion certificate/letters/testing & commissioning. reports, as the case may be, from the respective clients.																										
11	Technical qualifications and experience of the Directors or the Partners or Proprietor and dealing Technical Officers or employees of an agency(repeat the information given in Item No.4 and 8 above. This information is require to ascertain that the applicant agency has Director / Partner / Proprietor has and in case they don't have such necessary qualification and experience as prescribed in Rule 12 of Maharashtra Fire Prevention and Life Safety Measures Rules,2009, then they have appointed in their agency such officers having above mentioned qualification and experience. To this effect the declaration should be given in the Proforma 'C' enclosed with this check list.																										
12	Full Details of plant, machinery and tools owned by the applicant agency, with description and numbers. And such plant, machinery and or tools are kept on the site of work shop, then full details of location shall be provided with the application.																										

22	Copies of letters (mentioning the breakup of value of work order date of beginning of work and date on which work completed)/testing reports from the clients whose works of installation/commissioning of fire fighting/detection/passive protection items completed / executed in each financial year.			
23	Bank Statement for reconciliation of transactions. Attach 26AS / TDS deduction Form			
24	Copy of previous license issued. (Not applicable for New applicant)			
25	Authorisation letter from Applicant/Agency for deputed person representing Applicant/Agency for processing of application.			
26	INDEX OF DOCUMENTS MENTIONED FROM SR.NO.1-25 ABOVE WITH EACH AND EVERY DOCUMENTS. ALL PAGES SHOULD BE NUMBERED.			

Date :

Place :

*(Signature, Name & Designation
Of Authorised Director/Partner
or Proprietor)
(Cell No. & email ID of
such signing authority)*

Proforma-A

**Annual cost of works executed
(including maintenance work and replacement)
in the last 3 years (rupees in Lakh) is as follows
During the Financial Year : (For eg. 2022-23, 2023-24, 2024-25 and so on)**

Name of Company :

Sr. No.	Name of The Company	Date of Work Order / Work Order No.	Scope of Work (Rupees in Lakhs)				Cost of work executed during Financial yrs. (Rupees in Lakhs)				Balance work carry forward at the end of Financial Work i.e. work in progress (Rupees in Lakhs)			
			Hydrants, Sprinklers, Pumping, etc.	Detection Smoke /UV/ Suppression, etc.	Passive Cable, Fire doors, etc.	Total	Hydrants, Sprinklers, Pumping, etc.	Detection Smoke /UV/ Suppression, etc.	Passive Cable, Fire doors, etc.	Total	Hydrants, Sprinklers, Pumping etc.	Detection Smoke /UV/ Suppression, etc.	Passive Cable, Fire doors, etc.	Total
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	TOTAL													

Please Note:

1	Give information of each financial year on a separate sheet for each year) along with the copies of work orders / indent / BOQs.
2	In case of renewal of licence, submit the information about previous financial year and the work in hand / work in progress in the current financial year only and along with the copies of work orders / BOQs / Indents accounted in such statement.
3	If a work is totally executed in a financial year but payment/part payment is not received/received, in that case applicant agency may include part payment received in that financial year / the cost of total project executed may be included under the column work executed in that particular financial year. Subject to the condition that a letter of work completed with the break-up of cost of Hydrant/Sprinklers/Passive Protection Work as the case may be signed by the Chartered Accountant/Registered Income Tax Practitioner) and or along with certificate issued in form A, prescribed under Section 3 (3) and Rule 4(1) in the Maharashtra Fire Prevention and Life Safety Measures Rules 2009 by licensed agency.
4	Information given in any other proforma / format / statement will be rejected.

Place :

Date :

Signature & stamp of
Chartered Accountant

UDIN No.

Memb No.

Proforma-B
Certificate from Chartered Accountant/
Registered Income Tax Practitioner on his letter head.

This is to certify that **M/s**..... has executed the works of Fire Prevention and Fire Protection viz. installation of Hydrant-Sprinklers-Wet Riser/Extinguishers, detection and fire suppression/Passive Fire Protection, during the financial years of **20..... -20....., 20..... -20..... and 20.....-20.....** I have verified and certified the work orders/purchase orders/quotations/indents and work completion certificates of all clients whose work executed and are billed, are enclosed herewith.

I have also verified that the annual turn over shown below:-

1. Is of installation and A.M.C. of Hydrant-Sprinklers-Wet Riser/Extinguishers, detection and fire suppression/Passive Fire Protection and that any turnover generated by trading or any other activities which are not related with above works are not reflected in the annual turnover.
2. The works executed and billed by **M/s**..... included in the annual turnover of respective financial year and even though the payment for the same received in the next financial year, such amount are not reflected in the subsequent/next financial year. The details of such transactions are verified by me and are enclosed herewith.
3. The payments from the clients whose purchase order are not made available, such client's indents/quotations/works completion certificate and the payments received for, are also verified by me and that the copies of such indents/quotations/works completion certificate and the statement of payment of such works are enclosed.
4. The work orders/purchase orders of work in progress and its value is as per the enclosed statement.

Based on the above information, the annual turnover and the cost of work in progress plus work in hand is as follows:

Financial Year	Cost of annual works executed by firm / company / proprietary firm is as follows : (Rupees in lakhs).		
	Fire Fighting System Installation such as hydrants, Sprinklers, Pumping	Detection – smoke detection, Hit detection, UV, Beam detector, manual call point and fire suppression system	Passive Protection such as cable protection fire doors, still member protection glass protection, smoke management system, etc.
2023-24			
2024-25			
2025-26			
Work in Progress (Balance work of 2024-25)			
Work in hand 2025-26			
Total of Work in Progress & Hand			

Place :

Date :

Signature & stamp of
Chartered Accountant
UDIN No.
Memb No.

Proforma-C
Declaration on Company Letter Head

Since myself being The **Proprietor / Partner / Director (strike out not applicable words)** has no requisite qualification and experience, I / **we have employed** the person(s) whose details is given below, has experience in executing fire prevention and fire protection system, as laid down in the **National Building Code, 2016** or the code published by the **National Fire Protection Association (NFPA USA) 2021 or amended from time to time**, and that the photograph bearing their own signature and copies of my/their qualification certificates attested by appropriate authority are enclosed herewith :-

Sr. No.	Name	Position held in Company/ Firm	Qualification	Actual experience of executing Fire Prevention and Fire Protection System as per NBC,2005 and NFPA,2008.
1				
2				
3				

I / we also hereby certify that as I / we do not have requisite qualification, the person whose name is mentioned above having requisite qualification is hereby authorised to sign all the Form A or Form B to be issued under The Maharashtra Fire Prevention & Life Safety Measures, Rules, 2009

Place :

Date :

Name and Signature of
Director

Proforma-D

DECLARATION ABOUT NON-BLACKLISTING

(ON COMPANY'S LETTER HEAD)

THIS IS TO CERTIFY THAT MY "SOLE PROPRIETOR FIRM / PARTNERSHIP FIRM / COMPANY / CORPORATION OR ITS PROPRIETOR / ANY PARTNER / ANY OF ITS DIRECTOR HAS NOT BEEN BLACKLISTED BY ANY GOVERNMENT DEPARTMENT OR ORGANISATION OR ANY OTHER STATE."

Place :

Date:

Name and Signature of Director/
Partner/Proprietor.