

ANIMAL WELFARE BOARD OF INDIA

E-mail : awbi@md3.vsnl.net.in Website : www.awbi.org

Name of the Scheme : Provision of Ambulance Services for Animals **in Distress**

Application form for new proposal for the year _____

1. Organisation Name :

Address :

Tel. No. :

Fax. No. :

Telax No./E-Mail No./Grams :

(i) Name of the Act under which registered :

(ii) Registration No. and date of Registration :

(Please attach a photocopy)

2. Any other Organisation/Instt./Body if applicable, :

give details

3. Registration under Foreign Contribution Act :
4. Memorandum of Association and Bye-Laws :
(Please attach a photocopy)
5. Name and Address of the Members of the :
Board of Management/Governing Body
6. (i) Type of Ambulance, such as Heavy/Middle/ :
Light carrier, opted for:-
(ii) Cost of Ambulance (attach proforma :
voucher from the supplier) (maximum
permissible amount is Rs.3.50 lakhs)
(iii) Cost of equipments/modifications (attach :
challan form/estimate from a dealer in
support of the cost) (maximum
permissible amount is Rs.1.00 lakhs)
7. The organisation is required to contribute :
minimum 10% of total cost of the project
8. A copy of the Annual cum Progress Report :
and Audited Annual Accounts for the

previous year (s) which should contain the
Balance Sheet, Income & Expenditure A/c.
and Receipt and Payment A/c.

9. Details of Beneficiaries/facilities available with :
the Organisation as per Annexure-I

10. Details of Staff Employed as per :
Annexure II

11. List of Documents to be attached as per :
Annexure - III

12. List of additional papers, if any given :

I/We have read the Scheme and fulfill the requirements and conditions of the Scheme. I/We undertake to abide by all the conditions of the Scheme.

Signature :

Name :

Address/Seal :

Dated :

Note : Wherever not applicable, specially in case of new organisation, please write N.A.

ANNEXURE I

Details of Beneficiaries/Facilities available with the Organisation

(i) Name of the Organisation :

(ii) Name and address of the Project :

(iii) Year/Previous Year :

Details of Beneficiaries

Type of animal	No. of animals	Male	Female
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Details of Facilities available

1. Whether the Organisation has in-house dispensary? Yes/No

2. Whether the Services of the Veterinary Surgeon available? Yes/No

If yes, full time/part time/weekly etc.

3. Whether First-aid facility to animals available? Yes/No

4. Whether the Organisation have any Bio-gas plant? Yes/No

5. Whether facility for adequate water supply exists? Yes/No

If yes, indicate the source thereof

6. Whether necessary drainage system exists? Yes/No

7. Whether the organisation has got necessary resources to
maintain the animal shelter. If yes, give details Yes/No

Annexure II

Name of the Scheme :

Details of the Staff Employed

Part I (Previous Year)

(i) Name of the organisation :

(ii) Name and address of the Project :

(iii) Year

Sl. Remarks	Name and Address	Educational Qualification	Date of Appointment	Period for which employed during the year	Salary per month	Total salary paid during the Year
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Part II (Current Year)

- (i) Only notify change from the previous year
- (ii) In case there is no change in the part I in the previous year please clarify as follows:

“No change in staff particulars from the previous years.

The list of documents required to be submitted for the Scheme for Ambulance Services for Animals in Distress

- 1) Application in prescribed proforma;
- 2) Details of Beneficiaries – Facilities available with the AWO – Annexure I.
- 3) Details of Staff Employed- Annexure II.
- 4) Detailed proposal and its justifications alongwith gist of activities undertaken and assets required.
- 5) Photocopy of Registration.
- 6) Memorandum of Association showing ‘animal welfare’ one of its objectives duly certified by the Gazetted Officer (or) Notary Public, if the organization is not recognized by the Board.
- 7) Type and estimate of proposed ambulance.
- 8) Proforma voucher from the supplier of the ambulance vehicle mentioning the cost of the vehicle.
- 9) Challan form / estimate from a dealer in support of the cost of the equipments/modifications in the vehicle.
- 10) List of Governing Body.
- 11) Audited Accounts of last three years duly certified by a Chartered Account i.e., 1. Audit Report, (b) Balance Sheet, (c) Receipt & Payment Account and (d) Income & Expenditure Account.
- 12) Details of financial assistance, if any, received from any other agency for this purpose.
- 13) Details of Veterinary Doctor/Para Vety. name, full address, Veterinary Council Registration number and full time or part time & assistance staff with AWO
- 14) Details record for last three years i.e. how many treated and rescued animals and certified by the Veterinarians. (As per enclosed proforma)
- 15) How many emergency calls were attended last three years.
- 16) Details record of the rescued of illegal slaughter house animals in last 3 years.
- 17) If the organizations does not own the vehicle/ambulance, how does it pick up/rescue the animals.
- 18) If the AWO already have Ambulance, the details of the vehicle whether purchased from MEF/AWBI grants, when purchased, Number of Kms. the ambulance has completed.
- 19) Furnish the details if any dispensary exist, what are the veterinary facilities and first aid box or medicines and medical equipment available, give details.
- 20) To submit the Animal Verification Certificate certified by the Animal Husbandry Department
- 21) To submit the undertaking for the Ambulance grant