



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 10001358173.]

Code Number : GNGGN3114114000

1. Name of Establishment : VLCC ONLINE SERVICES PRIVATE LIMITED
2. Code Number of the Establishment under EPF : GNGGN3114114000
3. Postal address of the Establishment and its branches : 2ND FLOOR MAGNUM CITY CENTRE, GOLF COURSE EXTENSION, SECTOR -63A, Maruti Industrial Area, GURGAON, HARYANA - 122102 [Please see Annexure I]
4. Industry or business in which : EXPERT SERVICES
5. Date of commencement of business : 11/03/2016
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. LAJINDER SINGH BAWA	19/02/1961	DIRECTOR	JAGDISH SINGH BAWA	N-86, GROUND FLOOR PANCHSHEEL PARK NEW DELHI SOUTH DELHI 110017	11/03/2016
2	Mr. VIKAS GUPTA	17/08/1975	DIRECTOR	SUBHASH CHAND GUPTA	H.NO 1224 URBAN ESTATE SECTOR 13 KARNAL HARYANA 132001	27/04/2023
3	Mr. AMIT JAIN	04/05/1981	DIRECTOR	MANMAL JAIN	A-902, LODHA BELLISSIMO, N. M. JOSHI MARG, APOLLO MILLS COMPOUND, JACOB CIRCLE, MUMBAI - 400011, INDIA	13/12/2022

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. VIKAS GUPTA	17/08/1975	DIRECTOR	SUBHASH CHAND GUPTA	H.NO 1224 URBAN ESTATE SECTOR 13 KARNAL HARYANA 132001	27/04/2023

Date: _____ Signature of employer _____
Name of Employer _____
Designation of Employer _____
Seal of Establishment _____ Mobile number _____

Signature of employer at serial number of Owners details, if more than one employer.
Signature of remaining employers:

Signature _____	Signature _____
Name _____	Name _____
Signature _____	Signature _____
Name _____	Name _____
Signature _____	Signature _____
Name _____	Name _____
Signature _____	Signature _____
Name _____	Name _____

ANNEXURE - I**Details of Branches of the Establishment**

S. No.	Branch Name	Address	State - Pincode	Branch Type	Employees	Status	Status Updated On
1	VLCC ONLINE SERVICES PRIVATE LIMITED	2/1B, FIRST FLOOR DR. RAJENDRA ROAD, BHAWANIPUR NEAR NETAJI BHABAN METRO STATION NEAR NETAJI BHABAN METRO STATION, KOLKATA	WEST BENGAL - 700020	BRANCH	3	WORKING	--
2	VLCC ONLINE SERVICES PRIVATE LIMITED	KHASRA NO.87/19/3,NH RISHIKESH TO HARIDWAR HIGHWAY NEAR NDS PUBLIC SCHOOL SHYAMPUR, RISHIKESH, DEHRADUN	UTTARAKHAND - 249204	BRANCH	1	WORKING	--
3	VLCC ONLINE SERVICES PRIVATE LIMITED	C/O M/S TRIMURTI TRADERS, RANJU USHA MARKET, GUWAHATI, KAMRUP	ASSAM - 781021	BRANCH	1	WORKING	--

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	ICIC0000007	ICICI BANK LIMITED	NEW DELHI - CONNAUGHT PLACE	000705042459	CURRENT	YES

Copy of cheque of the primary account number : null

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 : VLCC ONLINE SERVICES PRIVATE LIMITED

Address of the Establishment : 2ND FLOOR MAGNUM CITY CENTRE, GOLF COURSE EXTENSION, SECTOR -63A, Maruti Industrial Area, GURGAON, HARYANA - 122102

Code Number of the : GNCCN3114114000

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.