**ANIMAL WELFARE BOARD OF INDIA**

Ministry of Fisheries, Animal Husbandry and Dairying, Govt. of India

(Department of Animal Husbandry and Dairying)

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**Application for Seeking Board's Recognition**

**STEP 1: Organization Details**

|  |  |  |
| --- | --- | --- |
| (i) | Type of Organization (AWO/Gaushala) |  |
| (ii) | Year of Establishment |  |
| (iii) | PAN Number |  |
| (iv) | PAN Card |  |
| (v) | Address of the Organization |  |

**STEP 2: Other Registration Details**

|  |  |  |
| --- | --- | --- |
| **2.1 Details of Registration under Society Registration Act/Indian Trust Act/Company Act/Gauseva Aayog Act/Co-operative Society Act etc.** | | |
| (i) | Name of the Act |  |
| (ii) | Registration Number |  |
| (iii) | Registration Date |  |
| (iv) | Registration Certificate |  |
| **2.2 Registration With NITI Aayog NGO Darpan Portal** | | |
| (i) | Registration Number |  |
| (ii) | Registration Date |  |
| (iii) | Registration Certificate |  |
| **2.3 Details of Registration under Foreign Contribution Regulation Act** | | |
| (i) | Foreign Contribution Regulation Act Registration No. |  |
| (ii) | Foreign Contribution Regulation Act Registration Date |  |
| (iii) | Registration Certificate |  |
| **2.4 Details of 80 G exemption under Income Tax Act, if any** | | |
| (i) | Income Tax Act Registration Number |  |
| (ii) | Income Tax Act Registration Date |  |
| (iii) | Registration Certificate |  |

**STEP 3: Memorandum of Association & Activity Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| (i) | Main Objective of the organization | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| (ii) | Memorandum of Association/ By Laws / Constitution of Organization | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| (iii) | Jurisdiction of activities | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| **3.1 Activities of the Organization with % of expenditure incurred during the last three years** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Financial Year | | | | Type of Activity | | | | | | | | | | | | % of Expenditure | | | | | | Activity Report | | | | | |
|  | | | | Sheltering of Stray Cattle / large animals | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Sheltering of stray Dogs and other small animals | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Animal Birth Control Program | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Dispensary / Treatment | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Ambulance services / Mobile Animal Clinic | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Rescue / Rehabilitation of Animals | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Awareness / Training for animal welfare | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Legal Cases booked against cruelty to animal | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | By products-Panchgavya and Organic Manure etc. | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Biogas project | | | | | | | | | | | |  | | | | | |  | | | | | |
|  | | | | Other (specify) | | | | | | | | | | | |  | | | | | |  | | | | | |
| **3.2 Details of Land in the name of the organization** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Survey Number | | | Nature of ownership | | | | | Copy of Land Document | | | | | | Copy of the Revenue record | | | | Area of Land (Square Feet) | | | | | | Type of Land (Agriculture/non-Agriculture) | | | |
|  | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | |
|  | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | |
| **3.3 Details of existing shelter(s)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shelter Name | Address | | | Email ID | | Telephone No. | | | Mobile No. | | | | No. of sheds | | Total Shed Area (In square feet) | | No. of small Animals | | | No. of large Animals | | | Details of Medical Equipment's | | | | No. of operation theatres |
|  |  | | |  | |  | | |  | | | |  | |  | |  | | |  | | |  | | | |  |
|  |  | | |  | |  | | |  | | | |  | |  | |  | | |  | | |  | | | |  |
| **3.4 Details of Ambulance / Tractor Trolley** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ambulance/ Tractor | | Model of Vehicle | | | | | Date of Purchase | | | KMS | | Cost of Purchase | | | | Purpose of use | | | | | Log Book Available (Yes/No) | | | | | Copy of Log book, if Yes | |
|  | |  | | | | |  | | |  | |  | | | |  | | | | |  | | | | |  | |
| **3.5 Details of Animals** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Shelter Name** | | | | | **Animal Category** *(large/small)* | | | | | | **Animal Type** *(Cow/dog/cat etc.)* | | | | | | | | **Gender/ Category** | | | | | | **No. of animals** | | |
|  | | | | | Large | | | | | | Cow | | | | | | | | Milking Cows | | | | | |  | | |
| Dry Cows | | | | | |  | | |
| Male Calves | | | | | |  | | |
| Female Calves | | | | | |  | | |
| Total | | | | | |  | | |
|  | | | | | Large | | | | | | Buffalo | | | | | | | | Milking Buffaloes | | | | | |  | | |
| Dry Buffaloes | | | | | |  | | |
| Male Calves | | | | | |  | | |
| Female Calves | | | | | |  | | |
| Total | | | | | |  | | |
|  | | | | | Large | | | | | | Ox/Bullock | | | | | | | |  | | | | | |  | | |
|  | | | | | Large | | | | | | Horse | | | | | | | |  | | | | | |  | | |
|  | | | | | Large | | | | | | Donkey | | | | | | | |  | | | | | |  | | |
|  | | | | | Small | | | | | | Sheep/Goat | | | | | | | |  | | | | | |  | | |
|  | | | | | Small | | | | | | Cat/Kitten | | | | | | | |  | | | | | |  | | |
|  | | | | | Small | | | | | | Dog/Puppy | | | | | | | |  | | | | | |  | | |
|  | | | | | Large/Small | | | | | | Other Animal (specify) | | | | | | | |  | | | | | |  | | |
| **No. of Large Animals** | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| **No. of Small Animals** | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| **Total No. of Animals** | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| Number of animals rescued from illegal transportation during the year | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| Number of Animals treated by the organization | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| Animal Verification Certificate | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| **3.6 Copy of the Activity Report / Annual Report of the last three years** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Financial Year | | | | | | | | | | | | | Activity Report / Annual Report | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| **3.7 Copy of Annual Audited Accounts including Balance sheet and Income & Expenditure statement of the last 3 years (Duly certified by Charted Accountant)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Financial Year | | | | | | | | | | | | | Audited Accounts | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |

**STEP 4: Details of the Officer Bearers & Staff**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **4.1 Details of the Office Bearers/ Governing Body/ Management Committee** | | | | | | | | | | | | | | | | |
| Name | Designation | | Address | | Mobile No. | | | Email address | | | ID Proof | | Document No. | | Enclose Document | |
|  |  | |  | |  | | |  | | |  | |  | |  | |
|  |  | |  | |  | | |  | | |  | |  | |  | |
| **4.2 Details of Staff in the Organization / Shelter** | | | | | | | | | | | | | | | | |
| Shelter Name | Name of staff | Designation | | Type*(Part Time/Full Time)* | | Age | Education | | Education Document | | | Salary | Document Type (Aadhaar/DL/Voter ID/Passport) | Document No. | | Copy of ID Proof |
|  |  |  | |  | |  |  | |  | | |  |  |  | |  |
|  |  |  | |  | |  |  | |  | | |  |  |  | |  |
| Periodicity of Management Committee Meetings. Copy of Resolution adopted towards Animal Welfare Activities of the last year to be enclosed. | | | | | | | | | |  | | | | | | |

**STEP 5: Financial Detail**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **5.1 Details of Source of Income last Three years** | | | | | | | | | |
| Financial Year | State Govt. | Central Govt. (other than AWBI) | | Donations | | Foreign Agencies | | Other sources | Total |
|  |  |  | |  | |  | |  |  |
|  |  |  | |  | |  | |  |  |
|  |  |  | |  | |  | |  |  |
| **5.2 Details of bank account in the name of the Organization** | | | | | | | | | |
| Name of Bank | Branch Address | | IFSC | | Account Number | | Account Holder Name | | |
|  |  | |  | |  | |  | | |

**STEP 6: Legal Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **6.1 Court cases filed under PCA act** | | | | | |
| Financial Year | Court Case No. | Court Case Date | | Subject | Court Case Status *<Pending/Resolved>* |
|  |  |  | |  |  |
|  |  |  | |  |  |
| **6.2 FIR filed under PCA Act** | | | | | |
| Financial  Year | FIR Number | FIR Date | | Subject | FIR Case Status *<Pending/Resolved>* |
|  |  |  | |  |  |
|  |  |  | |  |  |
| Whether the organization is involved in any litigation? If yes, details thereof including latest position and how it has affected the working of the Organization | | |  | | |

**STEP 7: Other Details**

|  |  |  |
| --- | --- | --- |
| **7.1 Whether the cow dung and urine is collected and utilized for any purpose, if yes** | | |
| (i) | Whether organic manure, pesticide gas, electricity, medicines, or any one of them is prepared by using/processing cow dung and urine? | Yes/No |
| (ii) | Whether any trained person for the above preparation is available and if so specify the no. of the persons | Yes/No |
| (iii) | Whether training camps are being held for organic manure etc. as mentioned above and if so how many camps and trainees have been trained in the last year and present year?   |  |  |  | | --- | --- | --- | | **No. of camps held last year** | **No. of camps held current year** | **Total** | |  |  |  | | Yes/No |
| (iv) | Whether any plan has been received to start converting cow dung and urine into organic manure, pesticide, gas, electricity, medicines or any one of them? | Yes/No |
| (v) | Details of education, training and research program conducted (like research about cow dung, cow urine etc.) Also specify the results of such training/research Program   |  |  |  |  | | --- | --- | --- | --- | | **S. No.** | **Program Details** | **Result** | **Year** | |  |  |  |  | |  |  |  |  | | Yes/No |

|  |  |  |
| --- | --- | --- |
|  | **7.2 Additional Information, if any** |  |
| (i) | Additional Document, if any |  |