|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **IGBC Net Zero Waste Rating Project Registration Form** | | | | | | |
| Parent Organization Name | | |  | | | | |
| Parent Organization GST Number  and  Address with Pin Code  *(These details will be used for invoicing)* | | |  | | | | |
| Is your Parent Organisation an IGBC Member? | | | Yes | If yes, please fill the Membership No: | No | | |
| Project Name | | |  | | | | |
| Project Site Address | | |  | | | | |
| **Project Details:** | | | | | | | |
| Project type (Residential / Commercial / Industrial / Educational, etc. | | |  | | | | |
| Site area (sq ft) | | |  | | | | |
| Built-up area (sq ft) without parking | | |  | | | | |
| **Developer / Owner – Contact Details** (must belong to the Parent Organisation) | | | | | | | | |
| Name |  | | | | | | | |
| Designation |  | | | | | | | |
| Organization |  | | | | | | | |
| Email |  | | | | | | | |
| Mobile |  | | | | | | | |
| **Project Coordinator** | | | | | |
| Name | |  | | | |
| Designation | |  | | | |
| Mobile Number | |  | | | |
| Email | |  | | | |
| **Net Zero Building Consultant** (if appointed) | | | | | |
| Name | |  | | | |
| Organization | |  | | | |
| Mobile Number | |  | | | |
| Email | |  | | | |
| **Architect** (if appointed) | | | | | |
| Name | |  | | | |
| Organisation | |  | | | |
| Mobile Number | |  | | | |
| Email | |  | | | |

The aforesaid particulars furnished are correct and true to the best of my knowledge and belief.

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

*Signature with official stamp*

Name of signatory:

Designation:

Organisation:

Date:

Please refer the following link to access the IGBC Net Zero Waste Rating Fee Structure:

[Indian Green building council (igbc.in)](https://igbc.in/igbc/redirectHtml.htm?redVal=showGreenNetZeroWastenosignin)

**FEE PAYMENT MODALITIES**

Please carry out an online fund transfer (RTGS / NEFT) to our account mentioned below.

Please mail the payment transaction details (UTR number) along with the filled registration form to Mr Murthy ([p.v.murthy@cii.in](mailto:p.v.murthy@cii.in)) with cc: [anand.sundararajan@cii.in](mailto:anand.sundararajan@cii.in)

1.       Account Holder Name: Confederation of Indian Industry  
  
2.       Bank Name & Address:  ICICI Bank Ltd; Stone Ridge Centre,   
 Kondapur, Hyderabad 500033, India

3.       Beneficiary Bank Account Number:   004005011896

4.       Branch Code: 0040

5.       MICR Code: 500229003

6.       IFS/NEFT Code: ICIC0000040