



FORM No 5A

Date : 10-Feb-2020

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

(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 10000335426.]

Code Number : MHBAN0026645000

1. Name of Establishment : DADAR PARSEE YOUTHS ASSEMBLY
2. Code Number of the Establishment under EPF Scheme : MHBAN0026645000
3. Postal address of the Establishment and its branches : 656, FIRDOSHI ROAD, PARSI COLONY,, DADAR, MUMBAI, MUMBAI CITY, MAHARASHTRA - 400014 [Please see Annexure I]
4. Industry or business in which engaged : SCHOOL
5. Date of commencement of business : 04/09/1952
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. JIMI FRAMJI JESIA	23/08/1932	PRESIDENT	FRAMJI JESIA	797, JESIA BUILDING, 2ND FLOOR, JAME JAMSHED ROAD, PARSI COLONY, DADAR, MUMBAI 400 014.	01/04/1999
2	Mr. MAHIYAR GUSTAD DASTOOR	06/10/1961	HONORARY TREASURER	GUSTAD SHAPURJI DASTOOR	616, WEST VIEW, JAME JAMSHED ROAD, PARSI COLONY, DADAR, MUMBAI 400 014.	01/01/2017

9. In case on lease, particulars of lessee : 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 Manager or : N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of business of the

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
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S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. MAHIYAR GUSTAD DASTOOR	06/10/1961	HONORARY TREASURER	GUSTAD SHAPURJI DASTOOR	616, WEST VIEW, JAME JAMSHED ROAD, PARSİ COLONY, DADAR, MUMBAI 400 014.	01/01/2017

Date:



Seal of Establishment

Signature of employer

[Handwritten Signature]

Name of Employer

MR. MAHIYAR DASTOOR

Designation of Employer

HONORARY TREASURER

Mobile number

9821163676

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

ANNEXURE - II

List of Branches having Separate/ Sub Code Number

SPECIMEN SIGNATURE CARD

To be submitted with all documents after the Code number is allotted through the online application.

FULL NAME OF THE AUTHORISED SIGNATORY Ms. ROXANA ADI PARELWALLA

Name of Establishment : DADAR PARSEE YOUTHS ASSEMBLY

Address of the Establishment : 656, FIRDOSHI ROAD, PARSİ COLONY,, DADAR, MUMBAI, MUMBAI CITY, MAHARASHTRA - 400014

Code Number of the : MHBAN0026645000

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

Strike whichever is not applicable

SPECIMEN SIGNATURE 1. R Parelwala
2. R Parelwala
3. R Parelwala

SPECIAL INSTRUCTION, IF ANY _____

SPECIMEN SIGNATURE OF Mr/Ms ROXANA ADI PARELWALLA ATTESTED



Signature of employer ^(x) Dastoor

Name of Employer MR. MAHIYAR DASTOOR

Designation of Employer HONORARY TREASURER.

Mobile number 9821163676.

Seal of Establishment

[] 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.