**Enhancement of Annual Capacity**

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| **Enhancement of Annual Capacity** |
| 1 | Name of the Unit |  |
| 2 | Name of the SEZ |  |
| 3 | **List of items already approved/ Authorised Operations** |
| **Sl. No** | **Items** | **HSN Code** | **Annual Capacity** |
| i. |  |  |  |
| ii. |  |  |  |
| 4 | **Proposed Annual Capacity in the item** |
| **Sl. No** | **Items** | **HSN Code** | **Annual Capacity already approved** | **Proposed Annual Capacity** |
| i |  |  |  |  |
| ii |  |  |  |  |
|  | **Any Change in Export Projections** |
|  |  | **Existing Projection** | **Revised Projection** | **Difference** | **%****Increase/Decrease** |
| 5 | Investment (In cr.)  |  |  |  |  |
| 6 | Exports (In cr.)  |  |  |  |  |
| 7 | FE Outgo (In cr.)  |  |  |  |  |
| 8 | NFEE (In cr.)  |  |  |  |  |
| 9 | Employment (In Nos.) | Men | Women | Transgender | Total | Men | Women | Transgender | Total | Men | Women | Transgender | Total |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| 10 | Remarks | The proposal of Enhancement of Annual Capacity in the LoA is placed before UAC in terms of Rule 19(2) of SEZ Rules, 2006, for consideration. |

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| **S.No** | **Checklist** | **Compliance (Yes/No)** |
|  | Request Letter |  |
|  | Reason for Capacity Enhancement |  |
|  | Whether unit has submitted copy of DEI policy |  |