

# **Annexures**

**Application Form for NABET Initial Accreditation**  
(Kindly attach separate sheets if necessary, for more information)

1. Name and Address of the Consultant organization/ Exploration Agency

a. Head Office

\_\_\_\_\_

b. Branch Office

\_\_\_\_\_

Affix Passport  
Size photograph  
of the contact  
person

2. Name of the Head of the Organization

\_\_\_\_\_

3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

4. Legal Status of the organization (please mark (v) the appropriate status)

a) Public/Private

b) Company/Partnership/Proprietorship/Registered Society

c) Research/Academic Institute

d) Industry Association

e) Others (please specify and attach necessary evidence)

5. Date of Registration / Incorporation (attach copy of certificate of incorporation/registration)

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6. Established in Year \_\_\_\_\_

7. Services provided by the Organization \_\_\_\_\_

8. Number of Employees

➤ Total

➤ For Exploration activities

9. Annual Income of the organization in Indian Rupees (attach balance sheet and IT returns for the last 3 years)

10. Organization Structure (with details of locations/associates etc.). For multi-functional organizations, the organization structure of the stream related to Exploration work may be detailed out (**attach organization chart and other details**).

**Category A: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |
| 2       | Geophysics                | GP           |
| 3       | Remote Sensing & GIS      | RS           |
| 4       | Hydrogeology              | HG           |

**Category B: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |

11. Technical Expertise (full time employees and/ or empanelled) available with the organization (attach CVs) for experts' qualification, experience, exposure etc. In case of empanelled experts, please also attach declarations of Project Coordinators/ Technical Area Experts of their association with your organization and with others, in the format given in)

**Project Coordinator**

| S. No | Name | In-house (GEO) | CV Attached |
|-------|------|----------------|-------------|
|       |      |                | Y / N       |
|       |      |                | Y / N       |

**Technical Area Expert/(s)** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house (GEO) | Area of Expertise | CV Attached |
|-------|------|----------------|-------------------|-------------|
|       |      |                |                   | Y / N       |
|       |      |                |                   | Y / N       |

**Technical Area Expert/(s)** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house / Empanelled | Area of Expertise | CV Attached |
|-------|------|-----------------------|-------------------|-------------|
|       |      |                       |                   | Y / N       |
|       |      |                       |                   | Y / N       |

*Documentary evidence for the stated experience, exposure and training of the proposed PC Coordinators and Technical Area Experts to be provided to NABET Assessors during assessment.*

12. How do you get field monitoring done to collect physical data?

In-house laboratory  External laboratory

12.1 If laboratory is accredited by NABL, please submit copies of the

Accreditation scope certificate and the parameters accredited for. For other recognized laboratories, please submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition.

13. How do you get your Survey Data collected?

In-house team  MoU with External Agency

13.1 If external survey agency, please submit copies of MoU and scope coverage. Please submit a copy of the relevant document for the scope recognition.

14. Furnish details of Instruments/ software available:

| S. No | Name of Instruments/software | Upload Relevant Document/ License |
|-------|------------------------------|-----------------------------------|
|       |                              |                                   |
|       |                              |                                   |

15. Organization's experience in Geological Report preparation:

| S. No | Name of Report | Client Name | Report Type | Period | Completion Certificate from Client | Upload Report |
|-------|----------------|-------------|-------------|--------|------------------------------------|---------------|
|       |                |             |             |        |                                    |               |
|       |                |             |             |        |                                    |               |

16. Geological Reports/ studies carried out in last three years -

a. Numbers of Geological Reports (GR) prepared

17. Enclose a copy of one Geological Report (soft copy) and list of reports prepared by the organization in the preceding two years from the date of application.

18. Enclose a copy of Quality Management System Manual (Refer **Appendix C** of Scheme)

19. **Declaration:**

We have carefully read all NABET guidelines of Accreditation Scheme for Exploration Agency for Minerals Sector. The conformity of eligibility of the experts proposed, employment status of proposed experts to the requirements of the Scheme, has been verified by us at our end.

We agree to code of conduct terms in clause no. 11.0. We confirm that the information provided in the application in support of the application is correct to the best of our knowledge and belief.

We authorize NABET to make any enquiry as deemed fit as part of the reviewing process. We understand that in case any information is found to be incorrect, it may result in rejection of this application and/or disqualification. We authorize NABET to utilize the information provided in this application for legal, research, training, sharing with concerned ministry and/or for any other purpose as may be deemed fit by NABET.

If accredited, we commit to notify NABET immediately of any changes in the status where information regarding such changes, if declared may affect the consideration for accreditation of the organization.

\_\_\_\_\_  
 Signatures  
 Name (Authorized Signatory) \_\_\_\_\_  
 \_\_\_\_\_  
 Designation  
 \_\_\_\_\_  
 Organization  
 \_\_\_\_\_  
 Date  
 \_\_\_\_\_

**Ensure that the following are enclosed with the application: -**

| Documents to be enclosed  | Yes/ No |
|---|---------|
| 1. Filled in Application form with the photograph of the contact person ( <b>Annexure 1</b> )   |         |
| 2. Application fees   |         |
| 3. Copy of the legal Status of the organization including the date of registration/ incorporation   |         |
| 4. Organization's Balance Sheet and Income Tax Returns, for the last three years (depending on date of registration of organization)  |         |
| 5. Organizational structure with respect to the people involved.  |         |
| 6. <b>Annexure 5</b> - signed resume of Project Coordinator/s (PC) with photographs   |         |
| 7. <b>Annexure 5</b> - signed resume of Technical Area Experts with photographs   |         |
| 8. <b>Annexure 12</b> - Declaration of empanelled Technical Area Experts of their association with applicant organization AO or other organizations, if applicable. Also, a NOC, as applicable. |         |
| 9. Copy of the certificate, scope of accreditation for NABL accredited laboratories and MoU/ Agreement  |         |
| 10. Copy of the MoU for Survey Engagements , scope of work covered under the MoU/ Agreement   |         |
| 11. For Government recognised/ CSIR lab/ Institution lab/ University lab, submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition.             |         |
| 12. QMS Manual meeting the requirements of <b>Appendix C</b> of the Scheme  |         |
| 13. Names of models/ software being used for generation/interpretation of data  |         |
| 14. Copies of promotional material, if any.   |         |

Application to be submitted in soft only. Hard copies of documents to be submitted only if specifically asked for by NABET.

**Application Form for NABET Surveillance Assessment**  
(Kindly attach separate sheets if necessary, for more information)

1. Name and Address of the Consultant organization/ Exploration Agency

a. Head Office

\_\_\_\_\_

b. Branch Office

\_\_\_\_\_

Affix Passport  
Size photograph  
of the contact  
person

2. Name of the Head of the Organization

\_\_\_\_\_

3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

4. Legal Status of the organization (please mark (v) the appropriate status)

- a) Public/Private
- b) Company/Partnership/Proprietorship/Registered Society
- c) Research/Academic Institute
- d) Industry Association
- e) Others (please specify and attach necessary evidence)

5. Date of Registration / Incorporation (attach copy of certificate of incorporation/registration)

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6. Established in Year \_\_\_\_\_

7. Services provided by the Organization

- a) Before initial accreditation \_\_\_\_\_
- b) After initial accreditation (new fields ventured in) \_\_\_\_\_

8. Initial Accreditation/Re-accreditation:

- a) Effective from (DD/MM/YYYY):
- b) Previous Assessment -AC MoM - (DD/MM/YYYY):
- c) Additional (Supplementary /Expansion of Scope) Assessment -AC MoM- (DD/MM/YYYY):

9. Annual Income of the organization in Indian Rupees (attach balance sheet and IT returns for the last 3 years)

| Income  | FY | FY | FY |
|---|----|----|----|
| Total Income (INR)                                  |    |    |    |
| Geological Reports preparation related Income (INR) |    |    |    |

10. Organization Structure (with details of locations/associates etc.). For multi-functional organizations, the organization structure of the stream related to Exploration work may be detailed out (**attach organization chart and other details**).

**Category A: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |
| 2       | Geophysics                | GP           |
| 3       | Remote Sensing & GIS      | RS           |
| 4       | Hydrogeology              | HG           |

**Category B: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |

11. **Compliance to following conditions of Accreditation**

| Sl. No. | Description  | Yes/No | Attach doc evidence, if applicable |
|---------|--|--------|------------------------------------|
| 1.      | Timely information and replacement of changes in approved experts  |        |                                    |
| 2.      | All applicable TAs are covered by approved experts/eligible candidates   |        |                                    |
| 3.      | Using only Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab recognized Laboratories |        |                                    |
| 4.      | Not utilizing any unapproved expert in Report preparation  |        |                                    |
| 5.      | Inclusion of names of Project Coordinator & TAEs Geological reports in the prescribed format                         |        |                                    |
| 6.      | Timely payments to NABET   |        |                                    |

12. Number of Employees/ Experts:
- Total Employees/ Experts:
  - For Geological Reports preparation activities:

| Experts                  | In-house | Empanelled | Total |
|--------------------------|----------|------------|-------|
| Project coordinator (PC) |          |            |       |

|                              |  |  |  |
|------------------------------|--|--|--|
| Technical area experts (TAE) |  |  |  |
| Team Members (TM)            |  |  |  |
| Total                        |  |  |  |

a) **Project Coordinator available with the Organization (Approved/ Applied)**

| S. No | Name | In-house (GEO) | Approved/<br>Applied | CV Attached |
|-------|------|----------------|----------------------|-------------|
|       |      |                |                      | Y / N       |
|       |      |                |                      | Y / N       |

b) **Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house (GEO) | Area of Expertise | Approved/<br>Applied | CV Attached |
|-------|------|----------------|-------------------|----------------------|-------------|
|       |      |                |                   |                      | Y / N       |
|       |      |                |                   |                      | Y / N       |

c) **Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house /<br>Empanelled | Area of Expertise | Approved/<br>Applied | CV Attached |
|-------|------|--------------------------|-------------------|----------------------|-------------|
|       |      |                          |                   |                      | Y / N       |
|       |      |                          |                   |                      | Y / N       |

d) **Team members available with organization:**  
(to make sure that the TM proposed meets the qualification requirements)

| S. No                                | Name | In-house /<br>Empanelled | Qualification/<br>Experience | Approved/<br>Applied | CV Attached |
|--------------------------------------|------|--------------------------|------------------------------|----------------------|-------------|
| <b>Project Coordinator</b>           |      |                          |                              |                      |             |
|                                      |      |                          |                              |                      | Y / N       |
| <b>With Technical Area Expert(s)</b> |      |                          |                              |                      |             |
|                                      |      |                          |                              |                      | Y / N       |

e) **New Candidates proposed:**

| Sl. No.                         | Name | In-house/ Emp. | Area of Expertise/<br>Qualification | CV Attached |
|---------------------------------|------|----------------|-------------------------------------|-------------|
| <b>Project Coordinator (PC)</b> |      |                |                                     |             |
|                                 |      |                |                                     | Y/N         |
|                                 |      |                |                                     | Y/N         |
| <b>Technical Area Expert(s)</b> |      |                |                                     |             |
|                                 |      |                |                                     | Y/N         |
|                                 |      |                |                                     | Y/N         |
| <b>Team Member</b>              |      |                |                                     |             |
|                                 |      |                |                                     | Y/N         |



| Sl. No. | Name | In-house/ Emp. | Area of Expertise/ Qualification | CV Attached |
|---------|------|----------------|----------------------------------|-------------|
|         |      |                |                                  | Y/N         |

Documentary evidence for the stated experience, exposure and training of the proposed Project Coordinator and Technical Area Experts to be provided to NABET Assessors during assessment

13. How do you get physical field data?

In-house laboratory  External laboratory

a) Laboratories being use:

| No. | Name of the laboratory* | Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab | Copy of MoU/ Agreement with laboratory/ defining scope of work |
|-----|-------------------------|---|--|
|     |                         |   |  |
|     |                         |   |  |

\*the following details are to be provided for each laboratory being used.

b) If laboratory is accredited by NABL, please submit copies of the Accreditation scope certificate and the parameters accredited for. For other recognized laboratories, please submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition.

c) For all laboratories, please submit the copy of the agreement with the scope of coverage and validity period.

20. How do you get your Survey Data collected?

In-house team  MoU with External Agency

14.1 If external survey agency, please submit copies of MoU and scope coverage. Please submit a copy of the relevant document for the scope recognition.

14. Furnish details of Instruments/ software available:

| S. No | Name of Instruments/prediction model/software | Upload Relevant Document/ License |
|-------|---|-----------------------------------|
|       |   |                                   |
|       |   |                                   |

15. Organization's experience in Geological Report preparation:

| S. No | Name of Report | Client Name | Report Type | Period | Completion Certificate from Client | Upload Report |
|-------|----------------|-------------|-------------|--------|------------------------------------|---------------|
|       |                |             |             |        |                                    |               |
|       |                |             |             |        |                                    |               |

15.1 Geological Reports/ studies carried out in last 18months–

a. Numbers of reports prepared

15.2 Enclose a copy of one Geological Report (soft copy) and list of reports prepared by the organization in the preceding year from the date of Initial Accreditation.

16. Enclose a copy of Quality Management System Manual (***Refer Appendix C of Scheme***)

**17. Declaration:**

We have carefully read all NABET guidelines of Accreditation Scheme for Exploration Agency for Minerals. The conformity of eligibility of the experts proposed, employment status of proposed experts to the requirements of the Scheme, has been verified by us at our end. We agree to code of conduct terms in clause no. 11.0.

We confirm that the information provided in the application in support of the application is correct to the best of our knowledge and belief.

We authorize NABET to make any enquiry as deemed fit as part of the reviewing process. We understand that in case any information is found to be incorrect, it may result in rejection of this application and/or disqualification. We authorize NABET to utilize the information provided in this application for legal, research, training, sharing with concerned ministry and/or for any other purpose as may be deemed fit by NABET.

If accredited, we commit to notify NABET immediately of any changes in the status where information regarding such changes, if declared may affect the consideration for accreditation of the organization.

\_\_\_\_\_  
Signatures  
Name (Authorized Signatory) \_\_\_\_\_  
Designation \_\_\_\_\_  
Organization \_\_\_\_\_  
Date \_\_\_\_\_

**Checklist of Enclosures – Surveillance Assessment**

Ensure that the following are enclosed with the application: -

| Sl. No. | Documents to be enclosed  | Yes/ No /<br>Give Ref. |
|---------|---|------------------------|
| 1.      | For Government recognised/ CSIR lab/ Institution lab/ University lab, submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition. |                        |
| 2.      | Copy of the Accreditation certificate, scope of accreditation and MoU/ Agreement for NABL accredited laboratories utilized  |                        |
| 3.      | Copy of the MoU for Survey Engagements , scope of work covered under the MoU/ Agreement   |                        |
| 4.      | QMS Manual meeting the requirements of <b>Appendix C</b> of the Scheme  |                        |
| 5.      | <b>Annexure 5</b> and <b>Annexure 12</b> : Resume, Experience Details and Declaration   |                        |
| 6.      | <b>Annexure 5, Annexure 9</b> – Resume and work details for approved Project Coordinator (PC), if s/he has carried out work after IA  |                        |
| 7.      | <b>Annexure 5, Annexure 10</b> – Resume and work details for approved TAE, if s/he has carried out work after IA  |                        |
| 8.      | <b>Annexure 6</b> - List of Geological Reports prepared/completed during the period between IA to SA giving requisite details   |                        |
| 9.      | Soft copy of 2 Geological Reports (as identified by NABET) with declaration by names and signatures of experts involved in the preparation of Geological Reports                |                        |

**Application Form for NABET Re-Accreditation**  
(Kindly attach separate sheets if necessary, for more information)

## 1. Name and Address of the Consultant organization/ Exploration Agency

a. Head Office

\_\_\_\_\_

b. Branch Office

\_\_\_\_\_

Affix Passport  
Size photograph  
of the contact  
person

## 2. Name of the Head of the Organization

\_\_\_\_\_

## 3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

## 4. Legal Status of the organization (please mark (v) the appropriate status)

- a) Public/Private
- b) Company/Partnership/Proprietorship/Registered Society
- c) Research/Academic Institute
- d) Industry Association
- e) Others (please specify and attach necessary evidence)

## 5. Date of Registration / Incorporation (attach copy of certificate of incorporation/registration)

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## 6. Established in Year \_\_\_\_\_

## 7. Services provided by the Organization

- a) Before initial accreditation \_\_\_\_\_
- b) After initial accreditation (new fields ventured in) \_\_\_\_\_

## 8. Initial Accreditation/Re-accreditation:

- a) Effective from (DD/MM/YYYY):
- b) Previous Assessment -AC MoM - (DD/MM/YYYY):
- c) Additional (Supplementary) Assessment -AC MoM-(DD/MM/YYYY):

9. Annual Income of the organization in Indian Rupees (attach balance sheet and IT returns for the last 3 years)

| Income   | FY | FY | FY |
|--|----|----|----|
| Total Income (INR)                                       |    |    |    |
| Geological Reports (GR) preparation related Income (INR) |    |    |    |

10. Organization Structure (with details of locations/associates etc.). For multi-functional organizations, the organization structure of the stream related to GW work may be detailed out (**attach organization chart and other details**).

**Category A: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |
| 2       | Geophysics                | GP           |
| 3       | Remote Sensing & GIS      | RS           |
| 4       | Hydrogeology              | HG           |

**Category B: Abbreviation for Technical/ Functional Areas**

| Sl. No. | Functional area/ Services | Abbreviation |
|---------|---------------------------|--------------|
| 1       | Geology                   | GEO          |

11. **Compliance to following conditions of Accreditation**

| Sl. No. | Description  | Yes/No | Attach doc evidence, if applicable |
|---------|--|--------|------------------------------------|
| 1.      | Timely information and replacement of changes in approved experts                                    |        |                                    |
| 2.      | All applicable TAs are covered by approved experts/eligible candidates                               |        |                                    |
| 3.      | Using only Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab         |        |                                    |
| 4.      | Not utilizing any unapproved expert in Report preparation  |        |                                    |
| 5.      | Inclusion of names of Project Coordinator & TAEs in Geological Reports (GR) in the prescribed format |        |                                    |
| 6.      | Timely payments to NABET   |        |                                    |

12. Number of Employees/ Experts:

- Total Employees/ Experts:
- For Geological Reports (GR) preparation activities:

| Experts                   | In-house | Empanelled | Total |
|---------------------------|----------|------------|-------|
| Project coordinator (GEO) |          |            |       |

|                                    |  |  |  |
|------------------------------------|--|--|--|
| Technical area experts (TAE) (GEO) |  |  |  |
| Team Members (TM)                  |  |  |  |
| Total                              |  |  |  |

a) **Project Coordinator available with the Organization (Approved/ Applied)**

| S. No | Name | In-house (GEO) | Approved/<br>Applied | CV<br>Attached |
|-------|------|----------------|----------------------|----------------|
|       |      |                |                      | Y / N          |
|       |      |                |                      | Y / N          |

b) **Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house (GEO) | Area of<br>Expertise | Approved/<br>Applied | CV<br>Attached |
|-------|------|----------------|----------------------|----------------------|----------------|
|       |      |                |                      |                      | Y / N          |
|       |      |                |                      |                      | Y / N          |

a) **Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned above (Abbreviation for Technical/ Functional Areas) or Refer section 5.1.2 Technical Area Experts (TAEs) of Scheme:

| S. No | Name | In-house /<br>Empanelled | Area of<br>Expertise | Approved/<br>Applied | CV<br>Attached |
|-------|------|--------------------------|----------------------|----------------------|----------------|
|       |      |                          |                      |                      | Y / N          |
|       |      |                          |                      |                      | Y / N          |

b) **Team members available with organization:**

(to make sure that the TM proposed meets the qualification requirements)

| S. No                                | Name | In-house /<br>Empanelled | Qualification/<br>Experience | Approved/<br>Applied | CV<br>Attached |
|--------------------------------------|------|--------------------------|------------------------------|----------------------|----------------|
| <b>Project Coordinator</b>           |      |                          |                              |                      |                |
|                                      |      |                          |                              |                      | Y / N          |
| <b>With Technical Area Expert(s)</b> |      |                          |                              |                      |                |
|                                      |      |                          |                              |                      | Y / N          |

c) **New Candidates proposed:**

| Sl. No                                   | Name | In-house/ Emp. | Area of<br>Expertise/<br>Qualification | CV Attached |
|--|------|----------------|--|-------------|
| <b>Project Coordinator (Exploration)</b> |      |                |  |             |
|  |      |                |  | Y/N         |
|  |      |                |  | Y/N         |
| <b>Technical Area Expert(s)</b>          |      |                |  |             |
|  |      |                |  | Y/N         |
|  |      |                |  | Y/N         |
| <b>Team Member</b>                       |      |                |  |             |
|  |      |                |  | Y/N         |
|  |      |                |  | Y/N         |

*Documentary evidence for the stated experience, exposure and training of the proposed Exploration/ Geological report preparing Coordinators and Technical Area Experts to be provided to NABET Assessors during assessment*

13. How do you get physical field data?

In-house laboratory  External laboratory

a) Laboratories being used since IA/SA/RA:

| S. No | Name of the laboratory* | Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab | Copy of MoU/ Agreement with laboratory/ defining scope of work |
|-------|-------------------------|---|--|
|       |                         |   |  |
|       |                         |   |  |

\*the following details are to be provided for each laboratory being used.

b) If in-house arrangement, then please provide details.

c) If laboratory is accredited by NABL, please submit copies of the Accreditation scope certificate and the parameters accredited for. For other recognized laboratories, please submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition.

d) For all external laboratories, please submit the copy of the agreement with the scope of coverage and validity period.

14. How do you get your Survey Data collected?

In-house team  MoU with External Agency

14.1 If external survey agency, please submit copies of MoU and scope coverage. Please submit a copy of the relevant document for the scope recognition.

15. Furnish details of Instruments/prediction model/software available:

| S. No | Name of Instruments/prediction model/software | Upload Relevant Document/ License |
|-------|---|-----------------------------------|
|       |   |                                   |
|       |   |                                   |

16. Organization's experience in Geological Report (GR) preparation:

| S. No | Name of Report | Client Name | Report Type | Period | Completion Certificate from Client | Upload Report |
|-------|----------------|-------------|-------------|--------|------------------------------------|---------------|
|       |                |             |             |        |                                    |               |
|       |                |             |             |        |                                    |               |

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15.1 Out of the number of Geological Reports/ Studies carried out in last 3 years–

a. Numbers of reports prepared

15.2 Enclose a copy of one Geological Report (soft copy) and list of reports/ plans prepared by the organization in the preceding year from the date of Initial Accreditation.

17. Enclose a copy of Quality Management System manual meeting the requirements of **Appendix C** of the Scheme. Also confirm if NCs / Obs. issued during SA on QMS have been addressed including closure action on each of these. (*Refer Appendix C of Scheme*)

**18. Declaration:**

We have carefully read all NABET guidelines of Accreditation Scheme for Exploration Preparation Agency in Mineral Sector. The conformity of eligibility of the experts proposed, employment status of proposed experts to the requirements of the Scheme, has been verified by us at our end. We agree to code of conduct terms in clause no. 11.0. We confirm that the information provided in the application in support of the application is correct to the best of our knowledge and belief.

We authorize NABET to make any enquiry as deemed fit as part of the reviewing process. We understand that in case any information is found to be incorrect, it may result in rejection of this application and/or disqualification. We authorize NABET to utilize the information provided in this application for legal, research, training, sharing with concerned ministry and/or for any other purpose as may be deemed fit by NABET.

If accredited, we commit to notify NABET immediately of any changes in the status where information regarding such changes, if declared may affect the consideration for accreditation of the organization.

Signatures \_\_\_\_\_

Name (Authorized Signatory) \_\_\_\_\_

Designation \_\_\_\_\_

Organization \_\_\_\_\_

Date \_\_\_\_\_



### Checklist of Enclosures – Re-accreditation

Ensure that the following documents are enclosed/uploaded with the application: -

| Sl. No. | Documents to be enclosed  | Yes/ No/ Give Ref |
|---------|---|-------------------|
| 1       | For Government recognised/ CSIR lab/ Institution lab/ University lab, submit a copy of the relevant Notification/ Document and also a copy for assessing the scope recognition. |                   |
| 2       | Copy of the Accreditation certificate, scope of accreditation and MoU/ Agreement for NABL accredited laboratories utilized  |                   |
| 3       | Copy of the MoU for Survey Engagements , scope of work covered under the MoU/ Agreement   |                   |
| 4       | QMS Manual meeting the requirements of <b>Appendix C</b> of the Scheme  |                   |
| 5       | <b>Annexure 5</b> and <b>Annexure 12</b> : Resume, Experience Details and Declaration   |                   |
| 6       | <b>Annexure 5, Annexure 9</b> – Resume and work details for approved Project Coordinator (PC), if s/he has carried out work after SA  |                   |
| 7       | <b>Annexure 5, Annexure 10</b> – Resume and work details for approved TAE, if s/he has carried out work after SA  |                   |
| 8       | <b>Annexure 6</b> - List of Geological Reports prepared/completed during the period between SA to RA giving requisite details   |                   |
| 9       | Soft copy of 2 Geological Reports (as identified by NABET) with declaration by names and signatures of experts  |                   |

**Application Form for NABET Supplementary Assessment**  
(Kindly attach separate sheets if necessary, for more information)

1. Name and Address of the Consultant organization/ Exploration Agency

a. Head Office

\_\_\_\_\_

b. Branch Office

\_\_\_\_\_

Affix Passport  
Size photograph  
of the contact  
person

2. Name of the Head of the Organization

\_\_\_\_\_

3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

4. Reason for applying:

| Sl. No. | Reason for applying   | Abbreviation | Assessment norms                |
|---------|---|--------------|---------------------------------|
| 1       | Addition / Modification in scope of approved experts                                    | EXP          | IA                              |
| 2       | New candidates: Replacement of approved experts (PC/TAE)                                | RPL          | IA                              |
| 3       | Re-proposing the candidates three months after the last assessment (Refer NABET letter) | RPR          | As per the last assessment norm |
| 4       | Absent during last Office assessment (Refer email sent to NABET by AO /ACO)             | ABS          | As per the last assessment norm |
| 5       | To be assessed (Refer AC MoM)   | TBA          | NABET to inform                 |

\*Application must be submitted along with the applicable fee (see **Appendix D** of the Scheme).

- Amount paid
- Mode of payment and number (NEFT/ RTGS / IMPS)
- Date of payment

NEFT/ RTGS / IMPS to be done in favour of 'Quality Council of India New Delhi.

5. Candidates proposed as:

**A. Project coordinator (Exploration) –**

(Enclose *Annexure 2*)

| Sl. No. | Name of the candidate | IH/ Emp | Reason for applying (Ref point 4 above) | Areas applied | Areas already approved |
|---------|-----------------------|---------|---|---------------|------------------------|
|         |                       |         |   |               |                        |
|         |                       |         |   |               |                        |

**B. Technical Area Expert –**

(Enclose *Annexure 2*)

| Sl. No. | Name of the candidate | IH/ Emp | Reason for applying (Ref point 4 above) | TAs applied | TAs already approved |
|---------|-----------------------|---------|---|-------------|----------------------|
|         |                       |         |   |             |                      |
|         |                       |         |   |             |                      |

**Note:**

1. Candidates who were not approved in last assessment and now re-proposed, must give a separate note on additional experience/ training/ knowledge acquired since last assessment supported by relevant documents.
2. **The candidates who have been re-proposed need to submit**
  - **PC - Annexure 9**
  - **TAE - Annexure 10.**

**6) Declaration**

I have carefully read all NABET guidelines of Accreditation Scheme for Exploration Agency in Mineral Sector. The eligibility criterion including academic as well as professional qualifications and experience claimed by all the candidates whose resume are enclosed with the application form are verified and endorsed by me. I hereby confirm that the true copy of Marks Sheets/Certificates for essential educational qualification candidates proposed, if asked for by NABET, would be duly verified by me before submission. I confirm that the information provided in the application form is correct to the best of my knowledge and belief.

I authorize NABET to make any enquiry as deemed fit as part of the reviewing process. I understand that in case any information is found to be incorrect; it may result in rejection of this application and/or disqualification.

NABET will treat the documents submitted by AO in confidence. However, the same may be used by NABET for research purpose, legal requirement and for submission to concerned ministry. Such information will not be shared with any other organizations without written permission of the AO.

If accredited, the organization commits to abide by the conditions of accreditation and notify NABET immediately for any changes in the status which have bearings on accreditation of the organization.

Signature: \_\_\_\_\_

Name (authorized signatory): \_\_\_\_\_

Designation: \_\_\_\_\_

Date \_\_\_\_\_

## (Resume Format)

**(For Project Coordinator/ Technical Area Experts)**

1) Mr./Ms./Dr.

\_\_\_\_\_  
(First name) (Middle name) (Last name)Affix latest  
passport size  
photograph of  
the applicant

2) Date of birth \_\_\_\_\_

3) PAN \_\_\_\_\_

4) Role in the organization (please tick):

In-house expert (IH)

Empanelled expert (Emp.)

Project Coordinator

Technical Area Expert (TAE)

Area(s) Applied \_\_\_\_\_

5) Contact details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_

6) Tel. No. \_\_\_\_\_

7) Fax No. \_\_\_\_\_

8) Email address \_\_\_\_\_

9) Office address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_

10) Academic Qualification (Graduation and above):

| Period<br>(Year) | Name of the University | Degree | Subjects | Grade /<br>% Marks |
|------------------|------------------------|--------|----------|--------------------|
|                  |                        |        |          |                    |

11) Registered/recognized training courses attended:

| Sl. No. | Title of the course | Conducted/organized by (name and address) | Dates |    | Result |
|---------|---------------------|---|-------|----|--------|
|         |                     |   | From  | To |        |
|         |                     |   |       |    |        |

12) Membership of Professional Bodies: -

| Sl. No. | Professional body (name and address) | Membership | Period of validity |
|---------|--------------------------------------|------------|--------------------|
|         |                                      |            |                    |

13) Experience (write in chronological order with most recent experience listed first):

A. General (in brief):

| Period (From – to) | Organization with address | Designation | Type of Experience (A/B/C/D)   | Specific details of experience for type A/B/C/D (not more than 25 words for each) as applicable |
|--------------------|---------------------------|-------------|--|---|
|                    |                           |             | Industrial Exp.<br>A<br>GR Assignments<br>Teaching / Ph.D.<br>C<br>Other<br>D<br>B |   |
|                    |                           |             |  |   |
|                    |                           |             |  |   |
|                    |                           |             |  |   |
|                    |                           |             |  |   |

**14) Declaration by the applicant**

I hereby declare that the above information relating to my education and experience is correct. I do understand that any incorrect information will result in disqualification of my candidature and accreditation of the organization with NABET.

Signature \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

**15) Declaration by the employer**

The above information in relation to Dr./Mr./Ms..... has been verified and found to be correct. I understand that in case the information is found to be incorrect it may result in disqualification of the organisation under the Scheme.

Signature: \_\_\_\_\_

Name (authorized signatory): \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_

**List of Geological Reports On-going/Completed  
(Since Last Assessment)**

**Name of Exploration Agency/ Consultant Organization:**

| Sl.No. | Name of project with location | Name of the client | Name of Project coordinator (PC) | Status of Geological Report:<br>a. On going<br>b. Draft Report ready<br>c. Final Report submitted to Client<br>d. Approval by Ministry | Cost:<br>a. Project Cost:<br>b. Cost of Report: |
|--------|-------------------------------|--------------------|----------------------------------|--|---|
| i      | ii                            | iii                | iv                               | v  | vi  |
| 1      |                               |                    |                                  |  |   |
| 2      |                               |                    |                                  |  |   |
| 3      |                               |                    |                                  |  |   |
| 4      |                               |                    |                                  |  |   |
| 5      |                               |                    |                                  |  |   |

Details of Laboratories Utilized

| Sl. No | Name of the laboratory with complete address | Accreditation/Recognition status with Scope                                       |               |                  |                      | Valid till |
|--------|--|---|---------------|------------------|----------------------|------------|
|        |  | Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab | Data Analysis | Basic Parameters | Additional Parameter |            |
| i      | ii   | iii   | iv            | v                | vi                   | vii        |
| 1      |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
| 2      |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
| 3      |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |
|        |  |   |               |                  |                      |            |

**Note:**

- Also mention the details of assessment conducted recently for which results are awaited. For SA application details to be furnished between IA and SA and for RA application between SA and RA.



### Declaration by Experts contributing to the Geological Report

I, hereby, certify that I was a part of the team in the following capacity that developed the above Geological Report

Project coordinator (Exploration):.....

Name:.....  
.....

Signature and Date:.....

Period of involvement: .....

Contact information: .....

Functional area experts:

| S. No. | Area | Name of the expert/s | Involvement (period and task**) | Signature and date |
|--------|------|----------------------|---------------------------------|--------------------|
| 1      |      |                      |                                 |                    |
| 2      |      |                      |                                 |                    |
| 3      |      |                      |                                 |                    |
| 4      |      |                      |                                 |                    |

\*One TM against each TAE may be shown

\*\*Please attach additional sheet if required

**Declaration by the Head of the accredited consultant organization/ authorized person**

I, ....., hereby, confirm that the above-mentioned experts prepared the Geological Report ..... I also confirm that Project coordinator (Exploration) has gone through the report, and the consultant organization shall be fully accountable for any misleading information.

It is certified that no unethical practices, plagiarism involved in carrying out the work and external data / text has not been used without proper acknowledgement while preparing this Geological Report.

Signature: .....

Name:

Designation:.....

Name of the consultant organization:.....

NABET Certificate No. & Issue

Date:.....

### Project Coordinator – Experience since last approval

1) Name: .....

2) Area approved (mention exact description as in NABET certificate/ letter):

| Sl. No. | Name of Area | Vide NABET MoM dated |
|---------|--------------|----------------------|
| 1       |              |                      |
| 2       |              |                      |
| 3       |              |                      |
| 4       |              |                      |
| 5       |              |                      |

3) Work carried out since last assessment

| Geological Reports involved in       |      |                                   |   |
|--------------------------------------|------|-----------------------------------|---|
| Sl. No.                              | Area | Name of project, client, capacity | Site visits<br>No. and duration (days)<br><br>(Field log book to be maintained and presented during assessment) |
| i                                    | ii   | iii                               | iv  |
| Work carried out for the present ACO |      |                                   |   |
| 1                                    |      |                                   |   |

**NOTE:** (\*) Details to be provided for each area in separate rows

### Technical Area Expert – Experience since last approval

1) Name: .....

2) Area/s approved (mention exact description as in NABET certificate/ letter):

| Sl. No. | Name of Area | Vide NABET MoM dated |
|---------|--------------|----------------------|
| 1       |              |                      |
| 2       |              |                      |
| 3       |              |                      |
| 4       |              |                      |
| 5       |              |                      |

3) Work carried out since last assessment

| Geological Reports Preparation involved in |      |                                   |   |
|--|------|-----------------------------------|---|
| Sl. No.                                    | Area | Name of project, client, capacity | Site visits<br>No. and duration (days)<br><br>(Field log book to be maintained and presented during assessment) |
| i  | ii   | iii                               | iv  |
| Work carried out for the present ACO       |      |                                   |   |
| 1  |      |                                   |   |

**NOTE: (\*)** Details to be provided for each area in separate rows

## Self-Assessment Checklists

To judge the readiness of an organization for applying and subsequent assessment by NABET assessors including interactions with candidates proposed, a Self- assessment checklist has been developed for IA, SA and RA for use by the applicant organisation -

### 1) Initial Accreditation –

#### a. Application process –

- i. Have information pertaining to the organization’s profile been included in Application Form?
- ii. Is the **Annexure 5** for all candidates proposed been properly filled?
- iii. Has the application form and all CVs submitted are duly signed?
- iv. Does the organization have minimum 2 eligible in-house/empanelled experts (1 PC and 1 TAE) as per the requirements of the Scheme?
- v. Do all proposed candidates for PC fulfil the criteria of NABET Scheme?
- vi. Do all proposed candidates for TAE fulfil the criteria of NABET Scheme?
- vii. Do the candidates proposed as PC have the requisite experience?
- viii. Do the candidates proposed as TAE have the experience in the Technical area/s?
- ix. Has any candidate been proposed for more than one technical area?
- x. Has any full-time employee with other organizations (except from university, institution and NGO) been proposed as a PC or TAE?
- xi. Does the organization have MoU with Government recognised/NABL accredited/ CSIR lab/Institution lab/ University lab in-house/external laboratory for data analysis?
- xii. Does the organization have the valid certificate of accreditation/Notification for the lab?
- xiii. Does the organization have valid MoU signed with the external lab?
- xiv. Does the QMS address the procedures given in **Appendix C** of the Scheme?

#### b. Assessment process

- i. Is the Organization ready for office assessment by NABET – have all candidates read the NABET scheme specially the assessment criteria including the aspects on which the PC and TAEs will be assessed, field investigation requirements (sampling, preservation, laboratory processes) and expected functions of PCs and TAEs?
- ii. Are the candidates aware of the QMS developed by the organization? Is the implementation of QMS documented?
- iii. Does the organisation have arrangements for improving the knowledge/skills of its personnel through trainings/exposures?

- iv. Does the organization have all necessary documentary evidence to be shown to NABET assessors during assessment?

#### Self-Assessment Result

|  |   |                                       |
|--|---|---------------------------------------|
| If all questions answered/followed               | Apply right now                               | Ready for applying and assessment     |
| If 50% of questions answered/followed            | Apply after addressing the unanswered ones.   | Partially ready.                      |
| If less than 50% questions are answered/followed | Need To focus on the accreditation guidelines | Not ready for applying and assessment |

## 2) Surveillance Assessment –

The Questions of the IA process as mentioned above are valid, as appropriate. In addition, the following Questions may be answered –

### a. Application process –

- i. Have all NC's and observations raised during IA been properly closed? Are sufficient documentary evidences available for the same?
- ii. Does the Organization have complete details for PCs and TAEs as per **Annexure 9 and 10** for inclusion in the SA application?
- iii. Has the Organization used Government recognised/ NABL accredited/ CSIR lab/ Institution lab/ University lab for the Studies carried out after IA?
- iv. Have all conditions of accreditation as mentioned in NABET's letter, been complied with?
- v. Has NABET been informed on time of any approved expert leaving the organization and arranged replacement?
- vi. Has a clear list been prepared of experts approved in IA and subsequently and those proposed with the SA application?
- vii. Has the organization used any unapproved person or approved experts after initial accreditation?
- viii. Has the signed declaration of experts involved and countersigned by the CEO in the prescribed format been included in the reports?
- ix. Does the organization have the quality assurance procedures for collection, preservation and transfer of samples and have implemented the same?
- x. Does the organization have procedure and followed the same for ensuring that the Government recognised/NABL accredited/CSIR lab/Institution lab/

University lab follows its quality control process to ensure correctness of the tests carried out?

**b. Accreditation process -**

- i. Have experts visited site and does the organisation have proper log books for the site visits?
- ii. Has the organisation filled complete details of all laboratories utilized after IA?
- iii. Does the organization have quality assurance procedure for primary and secondary data collection and implemented the same?
- iv. Has the organization-maintained copy of an internal QMS audit report and the last Management Review of the QMS?
- v. Does the organization have programs for capacity building for PCs/TAEs in terms of (a) training programmes attended, (ii) upgrading the educational qualification, (iii) others
- vi. Does the organization have record of NABET AC MoM of all approved candidates?

**Self-Assessment Result**

|  |   |                                       |
|--|---|---------------------------------------|
| If all questions answered/followed               | Apply right now                               | Ready for applying and assessment     |
| If 50% of questions answered/followed            | Apply after addressing the unanswered ones.   | Partially ready.                      |
| If less than 50% questions are answered/followed | Need To focus on the accreditation guidelines | Not ready for applying and assessment |

**3) Reaccreditation -**

The Questions of the IA process as mentioned above will be valid, as appropriate. In addition, the following questions may be answered –

- i. Have all NCs and observations of SA have been closed?
- ii. Does the organization have all information asked for about laboratories used after SA?
- iii. Does the organization have required information on how the experts are keeping their knowledge updated?
- iv. Does the organization have requisite details of the earlier assessments of experts?
- v. Has the organization made all payments due to NABET?

- vi. Has the organization taken steps towards capacity building for PCs/TAEs/ lab technicians through trainings, improved facilities etc
- vii. Has the organization implemented QMS and made improvements in the same?
- viii. Did the organization use only approved experts of right category for Geological Report preparation?
- ix. Did the organization check its overall performance from IA to till now?

|  |   |                                       |
|--|---|---------------------------------------|
| If all questions answered/followed               | Apply right now                               | Ready for applying and assessment     |
| If 50% of questions answered/followed            | Apply after addressing the unanswered ones.   | Partially ready.                      |
| If less than 50% questions are answered/followed | Need To focus on the accreditation guidelines | Not ready for applying and assessment |



**Declaration for Empanelled Experts of  
their association with the applicant organization and others**

(To be signed within 60 days preceding the date of application for accreditation)

This is to confirm that I \_\_\_\_\_ am currently involved with the following Exploration projects:

- 1) With the Applicant Organization -
  - a. As a Project Coordinator (Exploration)

| Sl. No. | Name of the project | Period | Technical areas as per Scheme |
|---------|---------------------|--------|-------------------------------|
|         |                     |        |                               |

- b. As a Technical area expert

| Sl. No. | Name of the project | Period | Technical areas as per Scheme |
|---------|---------------------|--------|-------------------------------|
|         |                     |        |                               |

- 2) With another organization/s –
  - a. As a Project Coordinator (PC)

| Sl. No. | Name of the organization | Name of the project | Period | Technical areas as per Scheme |
|---------|--------------------------|---------------------|--------|-------------------------------|
|         |                          |                     |        |                               |

b. As a Technical area expert

| Sl. No. | Name of the organization | Name of the project | Period | Technical areas as per Scheme |
|---------|--------------------------|---------------------|--------|-------------------------------|
|         |                          |                     |        |                               |

3) Involvement as an expert in NABET Scheme for Accreditation of Exploration Agency in Mineral Sector (for projects in hand)

| Sl. No. | Name of the organization | Technical areas as per Scheme | If interviewed by NABET (Date ) | Duration of association with the organization( period) |
|---------|--------------------------|-------------------------------|---------------------------------|--|
|         |                          |                               |                                 |  |
|         |                          |                               |                                 |  |

I hereby confirm that I am involved only with..... (mention the number) consultants.

Name \_\_\_\_\_

Signature\_\_\_\_\_

Date \_\_\_\_\_

**Present Status** (Please tick the appropriate one)

a. Freelancer: Yes/No

b. Working: In-house employee

(If yes, name of organization.....)

Address for Correspondence:

.....  
 .....  
 .....

**Declaration by the applicant organization**

I hereby confirm that I have applied complete due diligence on my part in ascertaining the appropriateness of the information furnished above by the expert .....  
S/he has been empanelled with /employed in our organization from  
.....(month) ..... (year).

Name \_\_\_\_\_

Designation \_\_\_\_\_

Organization \_\_\_\_\_

Signatures and Date \_\_\_\_\_

**Declaration of Accepting NABET's Code of Conduct****C.E.O. / Head of Consultant Organisation**

This is to confirm that I ....., working as CEO/ Head of.....agree with the Code of Conduct (Section 11.0 of Scheme), conditions of accreditation of NABET and give an undertaking that I would abide by the stated conditions for all activities pertaining to Consultancy Services/ Activities.

I also understand that awarding/ continuation of accreditation of my organization is subject to continual compliance to conditions of accreditation.

Name .....  
Designation .....  
Date .....  
Signature .....

**Application Form for information on Team Member**  
(Kindly attach separate sheets if necessary, for more information)

1. Name and Address of the Consultant organization/ Exploration Agency

a. Head Office

\_\_\_\_\_

b. Branch Office

\_\_\_\_\_

Affix Passport  
Size photograph  
of the contact  
person

2. Name of the Head of the Organization

\_\_\_\_\_

3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

4. Team Members proposed

| Sl                                | Name | Qualification # | Technical Area | Name of the project associated with | Approved Sr. Expert | Specific nature of work to be assigned |
|-----------------------------------|------|-----------------|----------------|-------------------------------------|---------------------|--|
| <b>With Project Coordinator</b>   |      |                 |                |                                     |                     |  |
|                                   |      |                 |                |                                     |                     |  |
|                                   |      |                 |                |                                     |                     |  |
| <b>With Technical Area Expert</b> |      |                 |                |                                     |                     |  |
|                                   |      |                 |                |                                     |                     |  |

#Qualification – Bachelor degree in technical subjects and Master's degree in Science, Humanities and other subjects, year of passing and name of university

**Declaration by the employer**

We have carefully read the provisions in respect of 'Team Members' in the NABET's Accreditation Scheme for Exploration Agency in Mineral Sector and commit to abide by the same. The conformity of eligibility of the candidates proposed as Team Member in respect of qualification and other aspects has been verified by us at our end. We confirm that the information provided in the application is correct to the best of our knowledge and belief.

We understand that in case the information provided is found wrong/mis-leading, it may result in cancellation of accreditation granted to the organization.

Signature

\_\_\_\_\_

Name (authorized signatory)

\_\_\_\_\_

Designation

\_\_\_\_\_

Organization

\_\_\_\_\_

Date

\_\_\_\_\_

**For Further Details Contact:**  
**National Accreditation Board for Education and Training (NABET)**  
**Quality Council of India, Institution of Engineering Building,**  
**2<sup>nd</sup> Floor, Bahadur Shah Zafar Marg, New Delhi – 110002, India**  
**Tel: +91-11-2337 9321, 2337 9821, 2337 0567 Fax. No: 2337 9621**  
**Email: [akjha.nabet@qcin.org](mailto:akjha.nabet@qcin.org); [jagminder.nabet@qcin.org](mailto:jagminder.nabet@qcin.org)**

**Application Form for Notification under the second proviso to section 4(1) of the MMDR Act, 1957**

(Kindly attach separate sheets if necessary, for more information)

To,  
The Joint Secretary (Exploration),  
Ministry of Mines,  
Government of India,  
Shastri Bhawan, New Delhi – 110001.

Sub: Application for notification under the second proviso to section 4(1) of the MMDR Act, 1957

Sir,

Kindly consider the following application for notification under the second proviso to section 4(1) of the MMDR Act, 1957:

1. Name and Address of the Exploration Agency
  - a. Head Office

---

- b. Branch Office

---



2. Name of the Head of the Organization

\_\_\_\_\_

3. Contact person details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

4. Legal Status of the organization (please mark (√) the appropriate status)

- a) Public/Private
- b) Company/Partnership/Proprietorship/Registered Society
- c) Research/Academic Institute
- d) Industry Association
- e) Others (please specify and attach necessary evidence)

5. Date of Registration / Incorporation (attach copy of certificate of incorporation/registration) DD MM YY

6. Established in Year \_\_\_\_\_

7. Main areas of activity of the organisation/ services provided:

a. Before initial accreditation \_\_\_\_\_

b. After initial accreditation (new fields ventured in) \_\_\_\_\_

7. (i) Initial Accreditation:

- a. Effective from (DD/MM/YYYY):
- b. Valid upto (DD/MM/YYYY):

(provide proof of accreditation)

(ii) Present Accreditation(s):

- a. Effective from (DD/MM/YYYY):
- b. Valid upto (DD/MM/YYYY):
- c. No. of times previously accredited:

(provide proof of accreditation)

9. Annual Income of the organization in Indian Rupees (attach balance sheet and IT returns for the last 3 years)

| <b>Income</b>  | <b>FY</b> | <b>FY</b> | <b>FY</b> |
|--|-----------|-----------|-----------|
| Total Income (INR)                                       |           |           |           |
| Geological Reports (GR) preparation related Income (INR) |           |           |           |

10. PAN No. / GST No.:

11.1 Organization Structure (with details of locations/associates etc.). For multi-functional organizations, the organization structure of the stream related to geological reporting work may be detailed out (attach organization chart and other details).

11.2 Number of Employees/ Experts:

- Total Employees/ Experts:
- For Geological Reports (GR) preparation activities:

| <b>Experts</b>                    | <b>In-house</b> | <b>Empanelled</b> | <b>Total</b> |
|-----------------------------------|-----------------|-------------------|--------------|
| Project coordinator (Geology GEO) |                 |                   |              |
| Technical area experts (TAEs)     |                 |                   |              |
| Team Members (TMs)                |                 |                   |              |

|       |  |  |  |
|-------|--|--|--|
| Total |  |  |  |
|-------|--|--|--|

**a. Project Coordinator available with the Organization (Approved/ Applied)**

| S. No | Name | In-house (GEO) | Approved/<br>Applied |
|-------|------|----------------|----------------------|
|       |      |                |                      |
|       |      |                |                      |

**b. Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned below (Abbreviation for Technical/ Functional Areas):

| S. No | Name | In-house (GEO) | Area of<br>Expertise | Approved/<br>Applied |
|-------|------|----------------|----------------------|----------------------|
|       |      |                |                      |                      |
|       |      |                |                      |                      |

**c. Technical Area Expert/(s)available with organization:** Please use abbreviations mentioned below (Abbreviation for Technical/ Functional Areas):

| S. No | Name | In-house /<br>Empanelled | Area of<br>Expertise | Approved/<br>Applied |
|-------|------|--------------------------|----------------------|----------------------|
|       |      |                          |                      |                      |
|       |      |                          |                      |                      |

**d. Team members available with organization:**

| S. No                                | Name | In-house /<br>Empanelled | Qualification/<br>Experience | Approved/<br>Applied |
|--------------------------------------|------|--------------------------|------------------------------|----------------------|
| <b>Project Coordinator</b>           |      |                          |                              |                      |
|                                      |      |                          |                              |                      |
| <b>With Technical Area Expert(s)</b> |      |                          |                              |                      |
|                                      |      |                          |                              |                      |

**e. Abbreviation for Technical/ Functional Areas**

| Sl. No. | Technical/ Functional Areas | Abbreviation |
|---------|-----------------------------|--------------|
|         |                             |              |

|   |                                 |            |
|---|---------------------------------|------------|
| 1 | <i>Geology</i>                  | <i>GEO</i> |
| 2 | <i>Geophysics</i>               | <i>GP</i>  |
| 3 | <i>Remote Sensing &amp; GIS</i> | <i>RS</i>  |
| 4 | <i>Hydrogeology</i>             | <i>HG</i>  |

12. Organization's experience in Geological Report (GR) preparation:

| <b>S. No</b> | <b>Name of Report</b> | <b>Client Name</b> | <b>Report Type</b> | <b>Period</b> | <b>Completion Certificate from Client</b> | <b>Upload Report</b> |
|--------------|-----------------------|--------------------|--------------------|---------------|---|----------------------|
|              |                       |                    |                    |               |   |                      |
|              |                       |                    |                    |               |   |                      |

Out of the number of Geological Reports/ Studies carried out in last 3 years- Numbers of reports prepared: \_\_\_\_\_

**13. Declaration:**

We have carefully read all the provisions, requirements, terms and conditions of the Guidelines for notification of accredited private exploration agencies under the second proviso to sub-section (1) of section 4 of the MMDR Act, 1957 issued by Ministry of Mines on [provide date of Guidelines] and the Accreditation Scheme for Exploration Agency in Mineral Sector and are in conformity of provisions, requirements, terms and conditions. We agree to the provisions, requirements, terms and conditions of the said Guidelines and Accreditation Scheme.

We confirm that the information provided in the application and documents provided in support of the application are correct to the best of our knowledge and belief.

We authorize Ministry of Mines and QCI-NABET to make any enquiry as deemed fit as part of the process for notification. We understand that in case any information is found

to be incorrect, it may result in rejection of this application and/or disqualification. We authorize Ministry of Mines and QCI-NABET to utilize the information provided in this application for legal, research, training, sharing with concerned Ministries/ Departments and/or for any other purpose as may be deemed fit by Ministry of Mines and QCI-NABET.

If the organisation is notified, we commit to intimate in writing to the Ministry of Mines and QCI-NABET immediately of any changes in the status of the organisation or information provided herein, where information regarding such changes, if intimated, may affect the consideration for notification of the organization.

We understand that accreditation can be cancelled

Signatures

Name (Authorized Signatory)

Designation

Organization

Date