

KRIBS - BIONEST

KSUM-RGCB INNOVATION AND BIOINCUBATION SOCIETY (KRIBS)
Kerala Technology Innovation Zone, KINFRA Hi-Tech Park, Medical College - NAD Road,
Kalamassery, Kochi, Kerala 683503

APPLICATION FOR BIOINCUBATION FACILITY

A. DETAILS OF THE APPLICANT

01. Name of the Principal Investigator/Chief Promoter:
Address
Contact Phone No.
Mail ID
Nationality :
Educational Qualifications
Area of expertise :
02. Names & Details of other Investigators/Promoters (use the same format as above)

B. DETAILS OF EXISTING ORGANISATION (if any)

01. Name of Organisation
02. Whether Proprietary/Partnership/Pvt.Ltd./Public Ltd.Co.
03. Contact person(s)
04. Address of Regd. Office
Telephone No.
Telex
Fax
E-Mail
05. Date of Incorporation :
06. Company's Bank(s) & Address :
07. Name(s) & Addresses of Partners/Directors :
08. Last 3 years Turnover (in lakhs) :

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- 09. Gross Profit (in lakhs) :
- 10. Net Profit(in lakhs) :
- 11. Details of Business:

C. BRIEF DETAILS OF THE PROPOSED PROJECT (*Be brief, but be clear*)

- 01. Name/Type of the Product to be developed
- 02. Description of the technology
- 03. Initial investment: In terms of Plant & Machinery(In lakhs):
- 04. Novelty of the process/product
- 05. Marketability/ Need of the product/ Role in Societal advancement
- 06. What do you propose to do in the Incubation Facility
- 07. Summary of the Business Plan and Strength & Weakness Analysis
- 08. Licenses & Tie-ups/ Technical know-how/ Collaborator /Buy back or sales agreement etc if any

D. DETAILS OF INCUBATION SPACE REQUIRED

- 01. Laboratory space (in sq feet) with justification
- 02. Specialised/ other Equipment that you will bring
- 03. Utilities required
- 04. Equipments of the facility that you would use
- 04. Manpower proposed to be employed
- 05. Proposed period of incubation

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E. COMMENTS OR SPECIAL REQUESTS FROM THE APPLICANT

Name, Designation and Signature with Date