

HOTEL AND RESTAURANT ASSOCIATION OF NORTHERN INDIA

CIN No.: U55101DL1952NPL002161

REG. OFF.: 406/75-76, MANISHA BUILDING, NEHRU PLACE, NEW DELHI - 110019
TELEPHONE: 011- 41306628, 42804416

E-mail: hrani.1950@gmail.com, Website: www.hrani.net.in

APPLICATION FORM

(Hotel Category)

If e	desire to be elected as melected, we agree to abide ng in force and to implem	by the Memorar	ndum & Art	ticle of Associa	ition, to pa	y the subscripti		
	5 Star Deluxe	5 Star	He	ritage Classic/(Grand	4 Star		Unclassified
	Heritage (Basic)	3 Star	2 9	Star		1 Star		
1.	Name of the Establishr	nent (Block Lette	ers)					
2.	Ownership Company							
3.	Location of Unit :							
4.	City		PIN Code _			State		
5.	Tel.: (STD Code]		F	ax : [STD (Code]		
6.	E-mail : Website :							
7.	Name of General Manage	r / Manager In-ch	narge:			Mobile: _		
	Address of Corresponde	ence:						
	Phone:	Fax:		E	:-mail:			
8.	Year of Establishment							
9.	Ownership :							
10.	Strength of Staff							
11.	Please attach the following	ng licence: (Any	Two)					
	L. Trade / MCD/ Nagar Pali	ika / Sarai Δct/ (Gram Panch	navat				
	2. FSSAI	Ray Sarai Acty C	Jiani Tanci	layat				
	3. Excise license (Bar)							
	4. NOC from Fire (based on current rules)							
	5. NOC from Police / Eating house from District Magistrate							
(6. Classification Certificate / Approval from Department of Tourism (State / Central)							
12.	Copy of Menu Card/ Tariff	f Card						
•	CHECK NOTE: - FOR OFF	ICE USE ONLY						
	Licenses A	authorized Signat	ory Form		Recomme	endation		
	FHRAI Form Ta	ariff card.			Data Fact	t Sheet Form		
	Date of Approval : Membership No. :							

(Signature issuing authority)

		AC		Non-AC		
a) Single						
b) Double						
c) Suite						
Total Rooms						
	DETAIL	I C OF THE DECTAUDANT (C				
	NAME	LS OF THE RESTAURANT (S Seating Capacity	Cuisines	AC (Y/N)		
1.						
2.						
Company / Vendor	r Name:					
State:		State Code:				
Provisional GST ID:		HSN Code / SAC:				
Provisional GST ID):	HSN Code /	SAC:			
		PAN No.:				
ARN No.:	a D.D. of Rs	PAN No.: in favour of	'HRANI" payable at	New Delhi.		
ARN No.:	a D.D. of Rs Dated	PAN No.:in favour of 'Bank & Branch	'HRANI" payable at	New Delhi.		
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ARN No.:	a D.D. of Rs Dated	PAN No.:in favour of 'Bank & Branch	'HRANI" payable at	New Delhi. ge.		
ARN No.: Ve are enclosing a	a D.D. of Rs Dated	PAN No.:in favour of 'Bank & Branch	'HRANI" payable at ne best of my knowled	New Delhi. ge. prised Signator		

The membership fee is as follows (The fee to words membership only be accepted/submitted after the approval of MC)

Hotel Category	5 Star dlx, 5 Star, Heritage Classic,/Grand	4 Star, Heritage	3 Star	2 Star & Below
Entrance Fee	13200	11000	8800	6600
Annual Subscription	18150	9680	7260	5445
Legal Fund	1100	1100	1100	1100
Listing Fee	220	220	220	220
Total	32670	22000	17380	13365
GST (18%)	5881	3960	3128	2406
Net Amount	38551	25960	20508	15771

CRITERIA FOR HOTEL MEMBERSHIP

- The Hotel must have minimum 10 rooms and hold a license granted by the Competent Government Authority to run as hotel.
- 2. The Hotel must be functioning hotel having a minimum of 10 let table bedrooms out of which at least 25% of the bedrooms should have attached bathrooms and for the remaining rooms there should be one bathroom for every four rooms.

Note: If your hotel has not yet started operating, you will be eligible for Associate Membership till such time your hotel/restaurant starts operating. When eligible, you may write for change of category, viz. Hotel or Restaurant supported by Licenses from Municipal Corporation/Police etc.

- 3. A Restaurant within the hotel (who is HRANI member) can also apply for separate membership. This is allowed for one restaurant for a hotel with 25-100 rooms & two restaurants for hotels with above 101 rooms. Such restaurant members are also entitled to 2 HRANI discount cards.
- 4. At least 25% of the bathrooms should have western style Wcs.
- 5. The ambiance, exterior and interior décor must be good.
- 6. There should be separate clean & hygienic ladies and gentlemen's toilets attached to the public area.
- 7. All rooms should be provided with fans.
- 8. There should be a Reception Counter with phone and a separate phone for the use of residents and visitors.
- 9. The hotel must have its own kitchen and also a restaurant or dining area and have eating house license where outsiders can come and dine. In case of no restaurant and kitchen, the hotel should have a valid eating-house license granted by the competent authority.
- 10. There should be good quality crockery, cutlery, glassware and furniture.
- 11. The hotel should provide laundry and dry cleaning services.
- 12. There should be clean and good quality linen/blankets/towels etc.
- 13. Staff should be in smart and clean uniforms.
- 14. There should be provisions for adequate staff facilities like eating, toilets and clock rooms.
- 15. There should be arrangements for hygienic washing of utensils, crockery, cutlery and glassware. In case of manually operated washing system, there should be the three-tier system.
- 16. Water for cooking, drinking and ice making should be of acceptable quality.
- 17. There should be adequate parking space.



Date : ____

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LISTING DETAILS - HOTEL CATEGORY

			Date :	
L. Name of Hotel:				
2. Ownership (Name and address	ss of the Company):			
Category (Tick Appropriate Cate	gory and enclose the copy of	of latest certificate of cla	assification from MO	Т)
5 Star Deluxe	5 Star	Heritage	4 Sta	r ssified
3. Location of Unit :				
State			Code]	
E-mail :		Website :		
1.Name and designation of the				
a) Name:	Designa	ation	(M):	
5. Name of the General Manag				
E-mail:				
Correspondence Address: _E-mail				
7. Sales & Reservations Infor	mation:			
3. Access: i) kms. from A	Airport ii) kms. fro	m Railway Station iii)) kms. fror	n Main Bustand
O. Location Advantage:				
LO.Air-Conditioning:		11. Chec	ck Out Time:	
12.Total Number of Rooms :	(Single	Double	Suites)
Room Details		13. F&BFa	cilities : No. of Re	estaurant
No. of Bars Dining A	Area Capacity	_Cuisine :		
L4. Taxes applicable :- GST :	% on rooms	% on Foo	d	% on Soft Beverage
	% on Indiar	LIGUOI		tu Liquoi
VAT:_	% on Indiar	•	•	•
VAT:_ L5. Banquet Facility: Total No. of	f Halls Max. capa	acity in theatre style:	LargestS	Smallest
VAT:_	f Halls Max. capa	acity in theatre style:	LargestS	Smallest



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AUTHORISED SIGNATORY FORM

HOTEL ()			RESTAURANT ()
HRANI Membership No.	:		Date :
Name of Unit :			
Location of Unit:			
latest email id and corre the person, whose parti	espondence addr culars are given	ress for all future correspond	rn India (HRANI) request you to record the ence with HRANI. I hereby also declare that erson to cast vote at all General Meetings of oned below.
	A	UTH. SIGNATORY-CUM-VO	TER
	Please Name of Author Designation : Mobile :	Affix Stamp-Size Photograph here fill all the details in capital lett rised Person: Landline:	ers only
	E-mail :	e Address :	
	Specimen Signa	ature :	
			Name:
			Designation:
			Mobile No.:
(with Rubber Stamp)			E-mail :

Note:

The Members are requested to notify to the Secretariat change in the particulars of the Authorised signatory, if

Signature: ___

- 2. Discount Cards of HRANI & FHRAI will only be issued after the receipt of this form duly properly filled in and signed on letter head by authorised signatory registered with HRANI.
- 3. All fields are mandatory to be filled for registration.



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NOMINATION FORM FOR DISCOUNT CARD

HOTEL ()		RESTAURANT ()
HRANI Membership No. :	Date :	
Name of Hotel / Restaurant :		
Address :		
CityP	IN Code	State
O		Demonstrated
One point contact for Financ		-
Mobile:	E-mail :	
Note: Please paste photographs inside the bo	ox for the discount carc	ds.
NOMINEE: 1		NOMINEE : 2
Please paste photograph of Nominee: 1 in his space Please write in capital letters only		Please paste photograph of Nominee: 2 in his space Please write in capital letters only
Name :		Name:
Designation :		Designation:
Mobile :		Mobile :
E-mail :		E-mail :
Signature :		Signature :
I verify that the above two people are enti	itled to discount cards	s of HRANI
Stamp of Company		Signatures (Authorised Signatory as per HRANI records)
		Name:
		Designation:
		Mobile:
		F-mail:

^{*}Please ensure to get this form signed and verified only by the authorized Signatory as submitted to HRANI else the cards will not be processed.