FORM No 5A Date :21-Aug-2025

EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)

EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para 10)

(Ist 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 1587374061.]

Code Number : MRNOI1400049000

1. Name of Establishment : MACAWBER BEEKAY PRIVATE LIMITED

2. Code Number of the Establishment under EPF : MRNOI1400049000

3. Postal address of the Establishment and its branches : BEEKAY HOUSE C 450 SECTOR 10, NOIDA, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH - 201301

4. Industry or business in which : ENGINEERS - ENGG. CONTRACTORS

5. Date of commencement of business : 13/02/2012

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. AJAY KUMAR GUPTA	10/05/1948	MANAGING DIRECTOR	SHRI LATE SETH BALKRISHAN	K 30 B HAUZ KHASH ENCLAVE NEW DELHI 110016	13/02/2012
2	Mr. KARAN GUPTA	20/11/1978	DIRECTOR	SH AJAY KUMAR GUPTA	K 30 B HAUZ KHASH ENCLAVE NEW DELHI 110016	13/02/2012
3	Mr. GAUTAM GUPTA	29/04/1977	DIRECTOR	SH AJAY KUMAR GUPTA	K 30 B HAUZ KHASH ENCLAVE NEW DELHI 110016	13/02/2012

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

S.No.	Name	Date of Birth	Father's Name	Residential Address	Position Date

10. If registered under Factories Act, particulars of : N/A

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

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. AJAY KUMAR GUPTA	10/05/1948	MANAGING DIRECTOR	SHRI LATE SETH BALKRISHAN	K 30 B HAUZ KHASH ENCLAVE NEW DELHI 110016	13/02/2012

Date:

ANNEXURE - I

Details of Branches of the Establishment

ANNEXURE - II

List of Branches having Separate/ Sub Code Number

ANNEXURE - III

Details of Bank Account Number

S No.	IFSC CODE	BANK NAME	BRANCH NAME	ACCOUNT NO	ACCOUNT TYPE	PRIMARY ACCOUNT
1	CNRB0002624	CANARA BANK	CORPORATE BRANCH, DELHI NEHRU PLACE	90491250001682	CURRENT	YES

Copy of cheque of the primary account number : 90491250001682


केनरा बैंक Canara Bank

DELHI NEHRU PLACE LCB
NEW DELHI, DELHI - 110019
IFSC : CNRB0002624

MULTI- CITY OD

Valid for three months only from the date of instrument

D D M M Y Y Y Y

Pay

या धारक को or Bearer

Rupees रुपये

अदा करें ₹

A/c. No. 90491250001682

For MACAWBER BEEKAY PRIVATE LIMITED

Authorized Signatory

Please sign above

Payable at par at all our branches in India

1

Cancelled

Cancelled

⑈008001⑈ ⑆100151251⑆ 001257⑈ 30

SPECIMEN SIGNATURE CARD

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

FULL NAME OF THE AUTHORISED SIGNATORY _____

Name of Establishment : MACAWBER BEEKAY PRIVATE LIMITED

Address of the Establishment : BEEKAY HOUSE C 450 SECTOR 10, NOIDA, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH - 201301

Code Number of the : MRNOI1400049000

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

 # Strike whichever is not applicable

SPECIMEN SIGNATURE 1. _____

2. _____

3. _____

SPECIAL INSTRUCTION, IF ANY _____

SPECIMEN SIGNATURE OF Mr/Ms _____

Signature of employer _____

Name of Employer _____

Designation of Employer

Seal of Establishment

Mobile number _____

[ ] 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.