

SRI LANKA EXPORT DEVELOPMET BOARD

**Organizing “Sri Lanka Business Support PROGRAMME to Mumbai, India on Construction Services”**

**24th to 26th November 2025, In Mumbai, India**

**APPLICATION FORM**

|  |  |
| --- | --- |
| **01.** | 1.1 Name of the Company ► |
| 1.2 Address ► |
| 1.3 Name and Designation of the Chief Executive► |
| 1.4 Name and Designation of the Participants in this Programme ► |
| **1.5 Tel:** ► | **Fax:** ► |
| **1.6 Email:** ► | Web address ► |
| 1.7Year of establishment ►  | Year of commencement of exports ► |
| 1.8 EDB Registration Number (if any) ►   |
| **02.** | **Contact Person:** **Name & Designation:****Mob:****Email:** |
| **03.** | Equity ► Local : Foreign : Partner country : |
| **04.** | Is your company a part of a group of companies? Yes × No □ If yes, state ▼Name of the parent company :  |
| Total number of Employees ►  |
| Construction related products/services (brands)/services to be offered/promoted in Indian market ▼ |
| Current major export markets ▼ |
| **05.** | Past promotional programmes undertaken in international markets (if any) ▼ |
| **06.** | Annual Turnover ▼ *(As per the Audited Accounts)* |
| **07.** | 2019 (in US$ Mn) | 2020 (in US$ Mn) | 2021(in US$ Mn) |
| **08.** | Has your company been assisted by the EDB previously? If yes, state ▼ [a] Assistance under market development progrsmmes organized by the EDB: [a] Assistance under Market Development Assistance Scheme/ Product Development Assistance Scheme: [b] Any other assistance for promotional programmes (2020-2025 up to date) :  |
| **09.** | Company profile (maximum 5 sentences) ▼ |
| **10.** | Other relevant information ▼ |
| **11.** | ***Important**** Completed applications to be sent in MS word format for the EDB
* Please email the completed application forms to :

**kumudu@edb.gov.lk** on or before **15th September 2025**. |
| I do hereby certify that the above information furnished by me in this application is true and accurate. I know that that withdrawal of the participation after finalization of the programme will be subjected to black listing of my company by EDB |
| **Date** | **Name & Designation of the person submitting the above information** | Signature(company seal) |