

IIT Delhi Research and Innovation Park

| Expression of Interest for Tenancy | | |
|---|---|---|
| Name of the Organisation | | |
| Address of the Head Office | | |
| Website | | |
| Contact details of CEO/ MD/ President | Name: | |
| | Telephone: | |
| | Email Id: | |
| Nature of the Organisation (Please Tick) | <input type="checkbox"/> Company | <input type="checkbox"/> Other (Please Specify) |
| Annual Turnover as per latest Audited Accounts | | (Please enclose Copy of Annual Report) |
| Major Business Activities | | |
| Organisation's R&D profile | | (Please use additional sheet, if necessary) |
| Technology domains of interest | | (Please use additional sheet, if necessary) |
| Tentative space requirement _____sq ft) | Proposed duration of stay ____ (years) | |
| Any experience of previous tenancy in Science Park? (If yes, please elaborate) | | |
| Nature of activity proposed at R&I Park | | |
| Core Research & Development <input type="checkbox"/> Technology intensive work <input type="checkbox"/> Knowledge-based innovation <input type="checkbox"/> Product Development <input type="checkbox"/> Other (pls specify) | Incubation <input type="checkbox"/> Pilot scale work <input type="checkbox"/> Product development <input type="checkbox"/> Engineering design <input type="checkbox"/> Prototyping <input type="checkbox"/> Other (pls specify) | Services <input type="checkbox"/> Product Design <input type="checkbox"/> Testing & Certification <input type="checkbox"/> Consultancy <input type="checkbox"/> Recreation & Hospitality <input type="checkbox"/> Other (pls specify) |
| Expected R&D Budget at R&I Park | | (per annum) |
| Expected Outlay for Consultancy Projects with IIT Delhi | | |
| Tentative value of sponsored projects at IIT Delhi during the stay at IITD-R&I Park | | |

**IIT Delhi Research and Innovation Park
(IITD R&I Park)**

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|--|---|--|
| Other expected engagements with IIT Delhi (in numbers): | | |
| Recruitment of IITD students | Recruitment of interns from IITD Community | Guest Faculty and Induction of IITD Faculty into organisation on short assignment/ deputation (with duration) |
| | | |
| Any specific expectations/ requirements (eg facilities, services etc) from R&I Park (Please use additional sheet, if necessary) | | |
| | | |
| Place: | | Signature: |
| Date: | | Name: |
| Designation: | | |
| Contact details of the regular contact person | | |
| Name: | | |
| Designation: | | |
| Telephone: | | |
| Email Id: | | |