Application Form for "Registration of Packer, Manufacturer and Importer" Note: All fields with * mark are mandatory.

To The Inspector, Legal Metrology,								
Subject: -Prayer for Registration of Packer, Manufacturer and Importer.								
Sir / Madam, I would like to avail the aforesaid service from your office. Required details are furnished hereunder.								
1. Applicant's Details Applicant's Salutation * (tick the appropriate) Mr. Mrs. Ms. Er. Dr. Prof.								
b Full Name of the Applicant*								
2. Applicant's Address								
a District * Dhalai Khowai Sepahijala Unakoti South Tripura South Tripura West Tripura								
b Sub-Division * c Area Name *								
d Police Station * Pin Code * Post Office *								
f Mobile No. * g Aadhar No.								
h E-Mail Id								
3. Service Specific Information								
a Select Manufacturer, Packer or Importer * Manufacturer & Packer Packer Packer Packer Packer Packer Packer								
b Registration on the name of *Company FirmGovt. Organization Co-operative SocietySHG PSUOther Person								
c Name of the Person / Establishment *								
4. Address of the Person / Establishment								
d District * Dhalai Khowai Sepahijala Unakoti Gomati North Tripura South Tripura West Tripura								
e Sub-Division * f Area Name *								
g Police Station * Pin Code * Pin Code *								
5. Details of Manufacturer and/or Packer or Importer as selected in point no. 3.a								
a Factory Name and Address								
Sl. No. Factory Name Factory Address								

b. Importer's Details											
Address i Dist	of warehouse	e where im	ported goods a Dhalai Gomati	K	ept: - Thowai Torth Tripura		Sepahijala South Trip	ura	Unakoti West Tripura		
ii Sub-	-Division				iii Area Na	ıme					
iv Poli	ce Station			v Po	ost Office			Pin Code			
	untry(s) from port is to be m							<u> </u>			
	Packaged Co										
Sl. No.	Commodity Name				Details						
7.	7. Name and address of Director(s) of the firm										
Sl. No.	. Name of the Director						Addres	SS			

8.	. Details of Challan								
a	Challan No.		b Challan Date	е					
9.	. <u>Eligibility</u>								
1 D	o you have Proof of Nationality?	? *		Yes	No				
2 D	o you have Tax Clearance Certif	Yes	No						
3 D	o you have Trade License? *	Yes	No						
4 D	o you have Society Registration	Yes	No						
5 D	o you have Land Deed/ Khatian/	Yes	No						
6 D	o you have Power of attorney? *	Yes	No						
7 D	o you have Site Plan? *	Yes	No						
8 D	o you have proof of financial sta	Yes	No						
9 D	o you want to upload any other s	Yes	No						
Note:	Please upload filled and signed	(scan) copy of this appli	cation form in Attach	Annexure page.					
Please	e provide details for the items yo	u have selected "Yes" i	n above –						
	Document Name *	Issued By	Issued Date	Reference N	0.				
1									
2									
3									
4									
5									
6									
7									
8									
9									
10. Declaration									
10. <u>Declaration</u> I do hereby declare that all the details furnished above are true to the best of my knowledge and belief.									
Date:									
Place:	:								
	Signature / Thumb Impression								