EMBLEM

FORM ६Aङ (See Clause 4)

FORM OF APPLICATION TO OBTAIN DEALERS LICENCE.

TO,									
,	The F Agric	Registering Autl cultural Develop Parishad, Solap	oment Office	er,					
1. F	ull Nam	ne And Address	of the appli	cant					
	a) Na	ame and Postal	Address	:-					
	(P	ace of business lace give exact or Sale							
	ii) Fo	or Storage							
(Svie the	prietor / Partners Name (s) and a capacity this app	address (es) o	of prop	=			_	
		Proprietor Partner manager Karta applicant ever c							•
		ation. If so, giv			-8) p1	00000000000	, 1220 0,000
		details of Seed		led.					
S	Sr No.		Name	e of See	ed.				
	1.								
	2.								
	3.								
	4.								
	5.								
6. I	/ We de	eposited the lice	ence fee or r	upees F	ifty vide	e Challai	1 No	D	ated
	in Tre	asury / Bank							
7. C	kr b) I / Fr	on: We declare that nowledge and be We have caref rom ঘBভ append em.	elief and no ully read the	part the terms	ere of is	false. ditions o	f the Li	cence g	iven in
Date Plac	e :- e :-	/	/ 20						

Date :-Place :-