FORM-LM-IC

[See rule 9 (1)]

[Application form for Licence as Dealer in Weights or Measures under the Legal Metrology Act, 2009]

To,

		To be filled by	Comments of the	
		the applicant	inspecting officer	
	(1)	(2)	(3)	
(1)	Name of the establishment/shop/j	person seeking the		
	licence.			
(2)	Complete address of the establish	ment, etc.		
(3)	Date of establishment.			
(4)	Name (s) and address (es) of proprietors and / or partners			
	and Managing Director (s) in the case of Limited company.			
(5)	Number and date of Registration	Number of current		
	shop/establishment/Municipal Trade licence.			
(6)	Categories of weights and measur	res sold/proposed		
	to be sold at present.			
(7)	Registration Number of VAT/CST/Sales Tax/Professional			
	Tax/Income Tax.			
(8)	Do you intend to import weights,	etc. from places		
	outside the State/Country? If so	indicate sources of		
	supply. (Give details of manufacturer's trade mark/			
	monogram and his licence number) and provide			
(a)	Registration of importer of Weights or Measures, if any			
(b)	Approval of model imported into India by Central Government.			
(9)	Have you applied previously for	a dealer's licence,		
	either in this State or elsewhere ?	If so give details?		

To be certified by the applicant(s)

Certified that I / We have read the Legal Metrology Act, 2009 and the Goa Legal Metrology Rules, 2011 and agree to abide by the same and also the administrative orders and instructions issued or to be issued there under.

I / We agree to deposit the Scheduled licence fees with Government as soon as required to do so by the Licensing Authority.

All the information furnished above is true to the best of my / our knowledge.

Place:				
Date:	Signature and Designation			
To be filled in by Departmen	ntal Officer of the State Government			
Date of Receipt of Application:				
Serial Number of application:				
Date of inspection:				
Recommendation of Inspecting Officer:				
Place:				
Date:	Signature and Designation of Inspecting Officer			
Final orders o	f Licensing Authority			
licence granted / refused:				
licence Number:				
Valid till:				
Place:				
Date:	Signature and Designation			