

LICENCE NO. _____
Date of renewal _____

FORM VII
[See Rule 29(2)]
APPLICATION FOR RENEWAL OF LICENCES

1. Name of the Contractor _____
2. Address of the Contractor _____
3. License Number _____ date _____
4. Date of expiry of the previous license _____
5. Whether the licence of the contractor was suspended or revoked: _____
6. Name of the Bank & Branch _____
7. Amount ` _____ Challan No. _____ Date _____
8. Total no. of workers Men _____ Women _____ Children _____

Place :

Date :

Signature of the Applicant

To be filled up by the Licensing Officer

Date of receipt of application _____

Amount ` _____ Treasury Receipt No. _____ Date _____

Signature of Licensing Officer
