

F O R M - A
*Application for certificate of Registration of Establishment
(And also periodic renewal thereof)
[See Rule 3, 5 & 7]*

To,

The Inspector of Shops and Establishments,

.....
(Here specify the area and the address of the Inspector).

Sir,

I beg to apply for registration /renewal of registration of my establishment for the period of twelve months from to as required, under Sec 3 of the Meghalaya Shops and Establishment Act, 2004 and the rules framed there under.

The required particulars in regard to the establishment are furnished below in the form prescribed for the purpose in Triplicate.

1. *NAME OF ESTABLISHMENT, if any.
(in block letters)*
2. *Postal Address and exact location of the Establishment.*
3. *Situation of Office, Store, Room, Godown, Warehouse, or Workplace, if any attached to the establishment but situated in premises different from those of the establishment.*
4. *No. and date of previous Certificate of Registration (Certificate to be surrender with the application for renewal).*
5. *Name of Employer/Proprietor.*

Community
6. *Residential address of employer/proprietor.*
7. *Name of the Manager /Agent/other person acting in the general management, in any, and his address.*
8. *Name of partners and their residential address (if it a partnership concern).*
9. *Name and residential address of Directors (if it is a case of limited company).*
10. *Category of Establishment i.e. whether a Shop, Commercial Establishment, Hotel, Restaurant, Eating house or other place of Amusement or Entertainment.*
11. *Nature of business.*
12. *Date of commencement of business establishment.*

13. Name of members of the employer's family employed in the establishment and residing with and wholly dependent upon him.

Sl. No	Name in Block Letters	Male/ Female	Age	Relationship	Community	Full Address
1	2	3	4	5	6	7

14. Total Number of Employees (.....No.)

Sl. No	Name in Block Letters	Male/ Female	Age	Community	Present Address in Full	Permanent Address in Full
1	2	3	4	5	6	7

(Attach copy of EPIC/ Ration card/Birth Certificate from the State of origin)

(Entry not applicable in case of any item of information sought for is not applicable to an establishment).

"I testify that the information furnished above are true to the best of my knowledge and belief".

*A copy of the Challan No..... dated depositing a sum of ₹.....
(Rupees) only at the Treasury at
..... (name of the place) prescribed in Schedule 1 of the Rules is attached for
reference and needful.*

*Enclosed : Attested 3 copies recent passport size Photo
 Attested copies of EPIC/ Ration card/Birth Certificate from the State of origin.
 Attested copy of Trade License
 Original & Xerox copy of Challan duly paid.*

*Place:
Date:.....*

Yours faithfully,

Signature of Employer/Proprietor