## {Application for Issue of Licences to S K Oil Dealer under Paragraph 6 of West Bengal Kerosene Control Order, 1968}

Name of the applicant (In Block Letters)*																		
Father's/Husband's Name (In case of Individual)*																ograp		
Residential Address*																		
Permanent Address																		
Telephone No/ Mobile No*																		
E-mail Account*																		
Whether the applicant is a Self-Help Group/ Semi-Govt. Body/ Registered Co-operative Society*																		
Applicant's Date of Birth*	D	D	M	M	Y	Y	Y	Y	M	ale		Fen	nale	Others				
A. Address Details																		
District*																		
Sub-division*																		
Municipality/ M. Crop/ GP*																		
Ward No*																		
Street / Lane*																		
Post Office*																		
Pin Code*																		
Police Station*																		
Area to be served*																		
B. Particulars of the proposed S K Oil Shop																		
Plot No								K	Chatia	an No	).							
Name of Mouza																		
Holding No																		
Road/ Lane																		
Boundary																		

## C. Size of the shop

Length (In sq)	gth (In sq) Breadth (In sq)																				
Area (In sq)																					
Length of the frontage on the street/lane mentioned at Particulars of the proposed S K Oil Shop																					
Nature of Possession*												(Rental / Ownership)									
Whether the godown is at separate place																					
If so, whether it has space for storage																					
Whether the godown is pucca																					
Cheracter of the land on which the godown and / or Retail Dealer's shop is situated					wn																
Address of godown																					
Whether the applicants was at any time convicted by any criminal court against the Department. If so, self-declaration to be given vide Annexure-1								nst													
Prior experience to business (If any)																					
Does the applicant/ any member has any other S K Oil Delership/Agency in his/her																					
own name/ names of family members (If so, details)				f							_										
-								+													
Whether employed. If so, details thereof																					
Whether the applicant/applicants/partner (in case of Firm) holds any licence fo any other business. If so, details thereof.											-										
							+														
VATIonal bounding on the complete and a series of the seri				Valid																	
Whether the applicant is under litigation against the Govt. If yes, give copy thereof List of documents submitted with the application:					IT,ST,PT Clearance Certificate for									urre	nt ye	ar					
					Valid Trade Licence																
							Valid Storage License														

Dated, the	
Place	Signature of applicant/s

I/we certify that the statements above are true to the best of my/our knowledge and that for any suppression of fact(s) detected later on, the licence granted to me/us is liable to be cancelled.