FORM-45

APPLICATION FOR GRANT OF AUTHORISATION FOR TOURIST PERMIT OR NATIONAL PERMIT

<u>Rule 82 (I)</u>

То

The Regional/State Transport Authority

I /We the undersigned hereby apply for the grant of permit for tourist vehicle valid throughout the territory of India/ in the State of ------

		Specify the names of the State)
1.	Name of the applicant (s) in full -	
2.	Status of the applicant, whether individual, company or -	
	Partnership firm co-operative society etc	
3.	Name of father of husband (in case of individual and in case	
	Of firm of company the particulars of managing partner or	
	Managing director, as the case may be) -	
4.	Full address (to be supported by attested copy of ration card	
	electricity bill, etc. in case of individual or any other valid an	d
	in case of company or form firm. Certified copy of the memo	prandum
	of association or copy of partnership deed)	
5.	(a) Whether the applicant himself intends to drive the vehic	le
	(b) If so, whether the applicant	
	(i) Holds heavy passenger motor vehicle driving license	
	(ii) The number, date and validity period of driving license	
	(iii) Name and address of the licensing authority	
6.	Registration certificate along with the date of fires registrati	on
	Insurance certificate number	
7.	Details of other permits, is any, held in respect of a particula	
8.	Details of total number of tourist permits held by the application	ant
9.	Type of vehicle	
	Make of motor vehicle	
11	Particulars of conviction/suspensions/cancellation, if any,	
	During the past three years in respect of the vehicle/permit	
	Held by the applicant (s)	
12	I/We forwarded herewith the certificate of registration of th	
	Vehicle of I/we will produce the certificate of registration of	the
	Vehicle before the permit are issued.	
13	I/we hereby declare that the above statements are true and	
	I/we am/are resident (s) of this State heaving principal place	of business
	In this State at	
14	I/we have paid the fee of Rs-	

Date -----

Signature of thumb impression the applicant