

To
The Sub – Divisional Magistrate

Sub: Prayer for **Food Stuff License**

Sir,
I would like to avail the aforesaid service from your office. Required details are furnished hereunder

1. Applicant's Personal Details

a Applicant's Salutation * (tick the appropriate) Mr. Mrs. Ms. Er. CA Dr. Prof.

b Applicant's First Name * Middle Name Last Name *

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c Guardian's Salutation * (tick the appropriate) Mr. Mrs. Ms. Er. CA Dr. Prof. Late

d Guardian's First Name * Guardian's Middle Name Guardian's Last Name *

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e Relation with Guardian * (tick the appropriate)

<input type="checkbox"/> Wife	<input type="checkbox"/> Spouse	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Son
<input type="checkbox"/> Daughter	<input type="checkbox"/> Brother	<input type="checkbox"/> Sister	<input type="checkbox"/> Father-in-Law	<input type="checkbox"/> Mother-in-Law
<input type="checkbox"/> Brother-in-Law	<input type="checkbox"/> Sister-in-Law	<input type="checkbox"/> Nephew	<input type="checkbox"/> Niece	<input type="checkbox"/> Grandson
<input type="checkbox"/> Granddaughter	<input type="checkbox"/> Grandfather	<input type="checkbox"/> Grandmother	<input type="checkbox"/> Daughter-in-Law	

f Applicant's Date of Birth * (dd/mm/yyyy) **g** Applicant's Gender * (tick the appropriate) Male Female Transgender

h Marital Status * (tick the appropriate)

Widow / Widower
Married
Single
Divorced

i Applicant's Caste * (tick the appropriate)

<input type="checkbox"/> ST
<input type="checkbox"/> SC
<input type="checkbox"/> OBC
<input type="checkbox"/> Other

j Applicant's Religion *(tick the appropriate)

<input type="checkbox"/> Hinduism
<input type="checkbox"/> Sikhism
<input type="checkbox"/> Buddhism
<input type="checkbox"/> Jainism

<input type="checkbox"/> Christianity
<input type="checkbox"/> Islam
<input type="checkbox"/> Other

k Applicant's Qualification * (tick the appropriate)

<input type="checkbox"/> Illiterate	<input type="checkbox"/> Diploma or Equivalent
<input type="checkbox"/> Literate (without educational level).	<input type="checkbox"/> Graduation or Equivalent
<input type="checkbox"/> Primary Schooling (I - V)	<input type="checkbox"/> Post-Graduation or Equivalent
<input type="checkbox"/> Secondary Schooling (VI - VIII)	<input type="checkbox"/> Doctoral or Equivalent
<input type="checkbox"/> Senior Secondary Schooling (IX - X)	<input type="checkbox"/> Post-Doctoral or Equivalent
<input type="checkbox"/> Higher Secondary Schooling (XI - XII)	<input type="checkbox"/> Others

l Applicant's Economic Status * APL BPL **m** Applicant's Aadhaar Number

2. Applicant's Address Details

District * Sub Division *

Location Type * Block Municipal Corporation Municipality Nagar Panchayat ADC

Name of Block / Municipal Corporation / Municipality / Nagar Panchayat / ADC

Name of Gram Panchayat / Ward / Village Council

Name of Habitation / Area Name / House No

Note: All fields with * mark are mandatory.

Name of Tehsil	Police Station	Post Office and Pin code*
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Applicant's Contact Details

a Mobile Number * (10 digits only) **b** E-Mail

4. Service Specific Information

Maximum storage (in Kilograms) Limit for 'Retail Dealer - A': Sugar - 200, Rice - 1000, Pulses - 200, Salt - 200, Edible Oil - 100, Edible Oil Seeds - 300, Onion - 200 and Potato - 300. Maximum storage (in Kilograms) Limit for 'Retail Dealer - B': Sugar - 1000, Rice - 3000, Pulses - 2000, Salt - 2000, Edible Oil - 750, Edible Oil Seeds - 1500, Onion - 750 and Potato - 1000. Maximum storage (in Quintals) Limit for 'Wholesale Dealer': Sugar - 2000, Rice - 2000, Pulses - 1200, Salt - 1000, Edible Oil - 1000, Edible Oil Seeds - 5000, Onion - 500 and Potato - 1000.

a Type of License you are Applying for * Retail Dealer A Retail Dealer B Wholesale Dealer

b Previous License Type (If you have any License earlier) Retail Dealer A Retail Dealer B
 Wholesale Dealer I have no Previous License

c How long have been Trading (in Years) * **d** Service Output Type * Hard Copy / e Copy

e Item Category * Sugar Rice Pulses Salt Edible Oil Edible Oil Seeds Potato Onion

f Business Address *

5. Eligibility

a	Do you have Citizenship Certificate? *	Yes	No
b	Do you have Permanent Resident of Tripura (PRTC) Certificate? *	Yes	No
c	Do you have any previous Foodstuff License? *	Yes	No
d	Do you have a Land Khatian? *	Yes	No
e	Do you have a Trade License? *	Yes	No
f	Have you paid Income Tax in the Two Years Preceding of Application? *	Yes	No
g	Do you want to upload any other Supporting Document?	Yes	No
h	Have you paid Professional Tax in the Two Years Preceding of Application? *	Yes	No

Please provide details for the items you have selected "Yes" –

	Document Name	Reference No.	Date of Issue	Issued by
a				
b				
c				
d				
e				
f				
g				
h				

6. Declaration

I do hereby declare that all the details furnished above are true to the best of my knowledge and belief.

Date:

Place:

Signature / Thumb Impression