

FORM 48

[See Rule 86]

APPLICATION FOR THE GRANT OF NATIONAL PERMIT

To

The State Transport Authority
.....

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

(here write the names of the states desired)

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 or husband (in case of individual and in case of company or firm 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 documentary proof to the satisfaction of State Transport Authority/Regional Transport Authority and in case of company or firm, certified copy of the Memorandum of Association or copy of the deed of partnership, as the case may be)
5. (a) Whether the applicant himself intends to drive the vehicle?
- (b) (i) If so, whether the applicant holds heavy passenger motor vehicle driving licence
- (ii) The number, date and validity period of driving licence
- (iii) Name and address of the licensing authority
6. Registration certificate along with the date of first registration, insurance certificate number
7. Details of other permits, if any, held in respect of a particular vehicle
8. Details of number of national permits held by the applicant
9. Type of vehicle, whether two-axle truck or articulated vehicle or multi-axle vehicle or tractor-trailer combination

- 10. Make of motor vehicle
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- 11. Particulars of convictions/suspensions/cancellation if any during the past three years in respect of the vehicle/permit held by the applicant(s)
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- 12. I/We forward herewith the certificate of Registration of the vehicle or I/We will produce the certificate of Registration of he vehicle before the permits and issued
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- 13. I/We herby declare that the above statements are true and due I/We am/are resident(s) of this State having principal place of business in this State at
.....
- 14. I/We have paid the fee of Rs.
.....

Date

Signature of thumb impression of the Applicant