	FORMAT		
The Deputy Commissioner			
	District,		
bject:- Application for Renew			
, ,			
I have the honour to submit	herewith the details of my Arms License for further renewal please		
1. Name of License			
1. I vulle of Electise			
2. Arms License Number			
3. Brief Description of the			
Weapons			
4. Area within the License			
is valid.			
5. Name & Designation of the Licensing Authority			
6. The license valid up to.	From To		
7. If the license is not	\bigcirc Yes \bigcirc No		
renewed in time, the reason for the submission of			
the License.			
	Yours Faithfully,		

	CERTIFICATE	
Certified that the Gun N	о Туре	
against the License Nur	ber mentioned above produced before me on date	
and was inspected by m	e and found serviceable/Unserviceable.	
		ature arge (Judicial)
RECEIPT OF ARM LIC		inge (succentri)
Name of License		
Arms License No.		
Date of Receipt		
Date of Receipt		
Village		
Р.О.		
	Signature of	DA (Jud)