

Application for Agency under Kerala State Lottery

- (1) Name and address:
(Name of Post Office, District and State should be clearly shown)
- (2) Age and Date of Birth:
- (3) Business/Profession:
- (4) Amount remitted with details of Remittance (Chalan No. & date/Postal M.O. Receipt No. & date/Postal Order No./Bank Draft No. & date)
- (5) Office from which issue of tickets is desired (Directorate of state Lotteries/District Lottery Office.)

I have read and understood Kerala State Lottery Rules. I agree to abide by those rules and also to abide by all direction, instruction or orders issued by the Director of state Lotteries from time to time.

Place:

Date:

Signature of applicant.