FORM P.Co. P. A.

(See Rule 67(a) (iii) of the Andaman and Nicobar Islands Motor Vehicles Rules, 1939).

Application for a permit in respect of a particular contract carriage to be regularly so used.

То

The	e Deputy Commissioner,				
	In accordance with the provisions of Section 45, 49 and 57 of the Motor Vehicles 1, 1933, I/ We the undersigned hereby apply for a permit under Section 42 of that Act respect of a contract carriage as hereunder set out.				
1.	Full Name :				
2.	Name of father(in the case of an individual) :				
3.	Address :				
4.	Area for which required :				
5.	Type of vehicle (*) :				
6.	Approximate seating capacity :-not less than and not more thanseats including drives :				
7.	Particulars of service to be performed by the contract carriages (not necessary in case of a motor cab), and the manner in which it is claimed that the public convenience will be served :				
8.	Particulars of any stage carriage or contract carriage permit (or similar authorisation under the Indian Motor Vehicles Act, 1914) valid in the province held by the applicant in respect of :				
	(a) this vehicles :				

9.	Particulars of any permit (or similar authorisation under the Indian Motor Vehicle: Act, 1914) held by the applicant in respect of the use of any transport vehicle in "the Dominion of India " during the last four years which has been the subject of an order or suspension or cancellation :-						
		Cash/Stamp					
10.	I / We enclose	Cheque Money order receipt	_for Rs.	,being the			
Pre	escribed fee.						
enc	I am/We are closed.	in possession	of the ve	hicles the certificate of registration of which is			
(*) I	Here state whether sin	gle or double deck, f	ixed roof or	hood only, glass windows or side curtains			
11. I/We have not yet obtained possession of the vehicle. I/We understand that the permit will not be issued until I/We have done so and have produced the certificate of registration.							
12.	I/We intend to o	drive the vehicle	:				
13. I/We desire a permit valid for years.							
14. I/We hereby declare that above statements are true and agree that they shall be conditions of any permit issued to me/us.							
Dat	te	20.					
		Signature o	r thumb ii	mpression of applicant.			
Strike out inapplicable alternatives throughout.							

(b) any other vehicles :

to be filled in the office of the Deputy Commissioner.

Deputy Commissioner

1.	Date of receipt	:	
2.	Date of decision	:	
3.	<u>Granted</u>		
	Granted in modifie	ed form on the	day of 20.
	Rejected		
4.	Number of permit	:	