

**APPLICATION FOR REGISTRATION AS APPROVED CONTRACTORS OF STORES DEPARTMENT,  
HIMACHAL PRADESH**

1. Name of the firm
2. Address
3. Head office  Branch office  Telegraphic  
 Address   
 Telephone No.
4. Is the firm /factory registered under:
  - a) The companies Act,1956 or Factories Act
  - b) The Indian Partnership Act, 1932.
  - c) If not, who are the owners?

Please give full address of all partners in case of firm and extent of share held by each

Are you a manufacturer  if so please give:

- i) Details of stores manufactured ,specifying each item
- ii) Full address of factory owned by u.
- iii) Small scale industries ,registration number
5. Are you manufacturers agent ,if so.please state:
  - i) Name and address of each manufacturer
  - ii) Store manufacture by each
  - iii) Do you hold the sole agency or you only stock goods?
  - iv) Do you also stock other goods ?if so, Please give details with address

6. Please give name and address of your bankers
7. Are you on the list of approved contractors of any other authority if so, please give details
8. Have you executed any contract in the past ?if so, please give details
9. Did you apply for registration with this department before? If so ,with what result
10. Give details of any contracts executed during the last six months for any Government Department

11. Your VAT registration no. and the District in which it is Registered

12. CST registration No. and the District in which it is Registered

**DECLARATION TO BE MADE BY THE APPLICANT:**

I /We hereby declare that the above entries made by me/us on this day of  are true and correct to the best of my/our knowledge.

**Signature of applicant**

1. Witness

Address

2. Witness

Address