FORM 1 [See paragraph 4(1)]

APPLICATION FOR GRANT OR RENEWAL OF LICENCES FOR RENTING OF MOTOR CABS IN RESPECT OF MAIN OFFICE

To	of review and the Williams of the Letter (a)
The State Transport Authority,	
I the undersigned hereby apply for a	licence for renting mater calculate the Chate
of	licence for renting motor cabs in the State
 Full name	ansport business ermits ain office with detailed address anch office with detailed address oned in each branch office
 7. Nature and extent of financial resources 8. Particulars of motor cabs owned alongwe 9. Full description of the place where the best (a) Location, open area, covered area	of the applicantvith details of registration mark
Place:	Signature of applicant
Date: (*Here indicate mode of payment).	Signature of applicant
(There manded mode of payment).	