



ULHASNAGAR MUNICIPAL CORPORATION CITIZEN FACILITATION CENTRE

SUBJECT: LICENSE FOR TRADE / BUSINESS / STORAGE

Token Number (For Office Use)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date:-

/ /

Citizen Identification Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(If Citizen Identification Number is given, do not fill below Details)

Applicant's Details:

Last Name/ Surname	Name	Father/Husband's Name

Details of Society (If Application from Society):

Name Of Society:	
Designation	

Address:

Head	Information
House/Building/Soc. Name:	
Flat/Block/Barrack No.:	Wing/Floor:
Road/Street/Lane:	
Area/Locality/Town/City:	Taluka:
Pin code:	
Ward Committee No.:	1 [] 2 [] 3 [] 4 []
Electrol Panel No.:	
Telephone No. (if any):	Contact Person:
Email Address (if any):	

Information of Property:

Head	Information
Type of Property (Please Tick [✓] as applicable)	[] Land [] Building
Property Number (Computerized)	
Town/City:	Taluka:
Survey/Block/Barrack No.:	
C.T.S. No.:	
Part No./Sheet No.:	
Plot No./Unit No.:	
Area of Land (sq.ft.)	
Road/Street/Lane:	
Ward Committee No.:	1 [] 2 [] 3 [] 4 []

Necessary Particulars about above service:

Head		Particulars			
1	Number of the Ward committee where business/ storage is proposed	1 [] 2 [] 3 [] 4 []			
2	Type of Business place (Please Tick [✓] as applicable)	[] Shop [] Godown [] Workshop [] Open Land			
3	Area (sq.mt.) of business/ storage required as per norms				
4	Type of Business	[] Temporary [] Permanant			
5	Type of License (Please Tick [✓] as applicable)	<input type="checkbox"/> License for Selling in Municipal Market <input type="checkbox"/> License for Selling in Private Market <input type="checkbox"/> License for Selling Food Articles Outside Market <input type="checkbox"/> License for Slaughtering of animals & Selling of Meat <input type="checkbox"/> License for manufacturing of dairy products <input type="checkbox"/> License For Doing Painful and Unsafe Business <input type="checkbox"/> License For Hawkers / Street Vendors <input type="checkbox"/> License for Handicrafts / Handiworks at Public Place / Road Side <input type="checkbox"/> Other			
6	Number of galas in Market (if Selling in Private Market)				
7	Nature of Business				
8	Details of Storage				
Serial No.	Description of goods to be stored	Quantity of Stock			
		Kilo	Litre	Number	
1					
2					
3					
4					
5					
9	Period of Business (If Temporary)	From		To	

Necessary Enclosures related to above application are enclosed as under.

(If enclosed tick [✓] or not enclosed tick [X])

Enclosures		Yes	No	Not Applicable
1	Copy of the construction completion certificate / usage permission along with approved map	[]	[]	[]
2	Consent letter (Any one of the following) a. Proof showing that the applicant is owner of the business place OR b. No objection certificate from Owner on Rs.20/- Stamp Paper, (If the applicant is tenant)	[] OR []	[]	[]

3	Copy of a Ration Card before 01.01.95 Or Photo Pass of the applicant, if applicant is from protected Slum Dwellers Under Maharashtra Slum Development Policy 1971.	[]	[]	[]
4	Internal map of business place	[]	[]	[]
5	Location Map	[]	[]	[]
6	NOC from Fire Brigade	[]	[]	[]
7	Indemnity bond in specified format on stamp paper of Rs. 20/-	[]	[]	[]
8	Copy of Profession Tax registration certificate	[]	[]	[]
9	Copy of Registration Deed, for the partnership firm	[]	[]	[]
10	Shop & Establishment License	[]	[]	[]
11	Copy of the agreement and allotment letter of Gala issued by the Corporation	[]	[]	[]
12	Copy of License given as per Explosive Act	[]	[]	[]
13	Copy of License given as per Petroleum Act	[]	[]	[]

Declaration

I/We state on solemn affirmation that the above information is true and correct to the best of my/our knowledge. If the information given is found wrong then I/We shall be held legally liable for its consequences.

Date:-

Applicant's Signature

(

)

The document may please be delivered to:

1. Self/Nominated Person [] a) C.F.C. [] b) Camp No. []

Name of Nominated Person (_____)

2. By Post

a) U.P.C. []

b) Register A.D. []

3. Courier []

(Not to be filled if address is same as above)

Correspondence Address:-

Last Name/ Surname	Name		Father/Husband Name	
House/Building/Soc. Name:				
Flat/Block/Barrack No.:	Wing/Floor:			
Road/Street/Lane:				
Area/Locality/Town/City:	Taluka:			
Pin code:				
Email Address (if any):				