

OFFICIAL USE

A. Received on

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Date Month Year

Name of officer : Signature of officer :
(Block letters)

B. Recommended for identification numbers / Rejected because of

Deputy Road Transport Commissioner : Signature : Date

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Date Month Year

C. Approved / Not Approved

Road Transport Commissioner : Signature : Date

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Date Month Year

D. Cashier

Please accept payment of Rs. for additional identification numbers and
..... sets of identification plates as listed below.

(1)

T	P				
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 (2)

T	P				
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 (3)

T	P				
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 (4)

T	P				
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 (5)

T	P				
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Senior Finance Officer: Signature : Date

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Date Month Year

PAYMENT

Received on

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 Receipt No.

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Date Month Year

Name of cashier : Signature of cashier :
(Block letters)