S.N. .....

NATIONAL TRANSPORT AUTHORITY
MSI Building, Royal Road, Les Cassis, Port Louis Tel : 202 2800

APPLICATION FOR THE RESERVATION OF A REGISTRATION MARK

1. Full name and address of applicant *(Applicable for individual applicants)*

a. Title Mr. ☐ Mrs. ☐ Ms. ☐ *(Please tick appropriate box)*

b. Surname *(Block letters)*

c. Other names *(Block letters)*

e. Permanent address *(Block letters)*

f. National identity card number

2. Full name and address of applicant *(Applicable for registered companies, etc.)*

a. Name *(Block letters)*

b. Address *(Block letters)*

c. Registered corporate number

3. Registration mark to be reserved

4. Name of dealer from which the vehicle is to be purchased

(Block letters)

5. Who will be effecting the registration of the vehicle? *(Please tick appropriate box)*

Dealer ☐ Purchaser ☐ Other ☐ *(Please specify)*

6. Declaration

I apply for registration mark ☐☐☐☐☐☐☐☐ and I enclose the non-refundable fee of Rs. 2,000.

I undertake to effect the registration of the vehicle **within the month** the registration mark is due to be issued failing which I understand that I shall forfeit my reservation fee and the registration mark.

I, ..., declare that, to the best of
(Block letters)
my knowledge and belief, the particulars given above are true and correct.

Signature of applicant : ..... Status : .....
(Applicable for registered companies only)

Date ☐☐ ☐☐ ☐☐
Date Month Year

OFFICIAL USE

Received on ☐☐ ☐☐ ☐☐ Receipt No. ☐☐☐☐☐☐☐☐☐☐
Date Month Year

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

NOTE TO APPLICANTS

Please ensure that the same particulars given at paragraph 1 or 2 appear on the deed of sale.