



FORM – III
(See Rule 3 (4))
APPLICATION FOR RENEWAL

1.	Name of the Shop / Establishment & Address	
2.	Previous Registration Certificate No. & Date	
3.	Year for which renewal is required along with	
	(i) Challan No. with date:	
	(ii) Amount paid through the Challan:	
4.	Full Name of the Employer (Age) including S/o, D/o, W/o. Name:	
5.	Full Name of the Manager (Age) including S/o, D/o, W/o. Name:	
6.	Change in the Name of the Partner's if any	
7.	Change in the Postal Address & Door No. if any of the Shop / Establishment	
8.	Total Number of Employees	

I hereby declare that the above information is true to the best of my knowledge and belief.

Signature of the Employer / Manager