

# FORM IX

[ See Rule 14 (2) ]

## APPLICATION FOR RENEWAL OF LICENCE

1. Name and Address of the Contractor :-.....  
.....  
.....
2. Number and Date of the Licence :-.....
3. Date of expiry of the previous Licence:- .....
4. Whether Licence of the Contractor was  
Suspended or revoked :- .....
5. No. and Date of the crossed demand  
draft enclosed :- .....

(Signature of the Applicant)

Place:- .....

Date:-.....

(To be filled in the Office of the Licensing Officer)

Date of receipt of the Application with crossed demand draft No. and Date.

Signature of the Licensing Officer