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