

FORM III

[Vide Rule 3 (4) of the A.P. Shops & Establishments Rules, 1990]

APPLICATION FOR RENEWAL

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| 1. | Name of the Shop / Establishemnt & Address: | |
| 2. | Previous Registration Certificate No. And 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 and Door No. if any of the Shop / Establishment: | |
| 8. | Total Number of Employees: | |

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

Date :

Signature of the Employer / Manager.