

FORM B

See sub-rule (2) and (3) of Rule 4

Part I Application for Registration

Space for
Stamp

To
The Registering Authority,
Shops and Establishment.

(Here specify the area and address)

Sir,

I beg to apply for registration of my shop/establishment under the West Bengal shops and Establishments Act, 1963. Particulars about the shop/establishment, are furnished in the statement below.

2. Revenue stamps worth _____ are affixed with this application as the required fee for registration.

Statement

1. Name of shop/establishment, if any _____
2. Post address and exact location of shop/establishment _____

3. Exact location of office, store-room, godown, warehouse, or work-place, if any, attached to shop but situated in premises different from those of shop/establishment. _____
4. Name of shop-keeper/employer _____
5. Residential address of shop-keeper/employer _____

6. Name of manager, if any, and his residential address. _____

7. Names of partners and their residential addresses (if a partnership concern) _____

8. Names and residential addresses of directors (if a limited company) _____

9. Category of establishment, i.e., whether a shop, commercial establishment, residential hotel, restaurant, eating house, theatre, cinema or other place of public amusement or entertainment. _____

10. Nature of business. _____

11. Date of commencement of business. _____

12. Name of members of owner's family employed in the shop/establishment who live with the owner and are dependent on him/her.

	Relationship	Adults	Young persons
Males			
Females			
TOTAL:			

13. Names of other person employed—

(i) in managerial or confidential capacity; _____

(ii) as a traveller, canvasser, messenger, watchman or caretaker; and _____

(iii) exclusively in connection with customs, examination collection, despatch, delivery or conveyance of goods from or to booking offices for transport by rail, road or air, docks, wharves or airports (indicate sex and age in case of young persons). _____

14. Total number of employees—

	Adults	Young persons	Total
Males			
Females			
TOTAL:			

15. Declaration of weekly closing days (in the case of a shop or commercial establishment). _____

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

Yours faithfully,

Signature of shop-keeper/employer

Dated. _____

Note:--1. Item 3 should be filled in only when the office, store-room, etc., are not separately registered under the Act. In respect of such store rooms, etc., not separately registered, particulars required under items 12, 13, 14 should be given separately for each officer, store rooms, etc.

2. If any item is not applicable, enter "Not applicable".

Part II

(To be filled in by the Officer of the Registering Authority under
the West Bengal Shops & Establishments Act, 1963)

Registration Certificate

It is hereby certified that the _____ has registered as _____
under the West Bengal Shops and Establishments Act, 1963, this _____
of _____ 19____ and the Registration No. *is _____ Seal

Signature of the Registering Authority.

Change notified in Form has been registered _____ on_
_____ has been registered.

Signature of the Registering Authority

Date _____

1. Renewed up to _____ Registration No. _____
2. Renewed up to _____ Registration No. _____
3. Renewed up to _____ Registration No. _____

seal

Date
authority

Signature of the registering

* The first part of the number shall be the name of the area in which the shop/establishment is situated and the second part shall be the serial number of the Register of Shops and Establishments for the district concerned.