APPLICATION FOR LICENSE TO IMPORT A MOTOR VEHICLE UNDER THE SPECIAL VEHICLE SCHEME

CIE 7

Please type or write your answers in the space provided below in each item.

01. Name (Organization / Institution)

02. Address

03. Telephone No.		**04.** E - Mail	
05. Registered No. (if individual N.I.C. No.)			
06. Name of the Bank			
07. Name & Address of Supplier			

08. Details of the vehicle (If vehicle is registered, registration certificate should be attached.)

(a) Class		**(b)** Make		**(c)** Cylinder capacity		**(d)** Country of made	
(e) Year of Manufactured		**(f)** Date of first Registration		**(g)** Date of Purchased			
(h) Chassis No.		**(i)** H.S. No.		**(j)** C.I.F. Value			

I hereby declare that the facts stated above are true & correct to the best of my knowledge under the 13 (1) of the Imports & Exports Control Act No.01 of 1969.

Date:……/……/……. Signature of Applicant:……

Please ensure that you have answered items 01 to 06 & sign the declaration. (Incomplete forms will be returned.)

FOR OFFICE USE ONLY

Date of handed over: ...../...../.....

Date of issue of License: ...../...../.....

Officer In charge: