

GOVERNMENT OF MIZORAM
OFFICE OF THE CONTROLLER OF LEGAL METROLOGY
MIZORAM : : AIZAWL

Attached
2 copies of
recent passport
size photo

[FORM LD – 1]

*(Application Form for Licence as Dealers in Weights & Measures
under The Legal Metrology Act, 2009)*

1. Name of Applicant with address : _____
(in capital letters) _____
2. Aadhaar number : _____
(photo copy to be attached)
3. Name & Address of the establishment / shop : _____
(Contact no.) _____
4. Date of establishment of shop : _____
5. Email (if any) : _____
6. Address of Ware houses(if any) : _____
7. Number & Date of registration of current shop / establishment / municipal trade licence : _____
(photo copy to be attached)
8. Registration no. of VAT / CST / Sales Tax / Professional Tax / Income Tax : _____
9. Do you intent to import any Weights & Measures from places outside the State / Country? _____
If so, indicate source of supply : _____
(give details of manufacturer trade / monogram and his licence no.) : _____
and provide
 - a) Registration of Weights & Measures if any : _____
 - b) Approval of model imported to India by Central Govt. : _____
10. Have you applied previously for a dealers licence either in this State or elsewhere? _____
If so give details : _____

Certified that I / we have read the Legal Metrology Act, 2009 and The Mizoram Legal Metrology (Enforcement) Rules, 2010 and agree to abide by the same and also the Administration orders and instructions issued or to be issued there under.

I / We agree to deposit the schedule Licence fees with Government as soon as requested to do so by the Licensing Authority.

All the information furnished above are true to the best of my /our knowledge and belief.

Place : _____

Date : _____

(Signature of Applicant)

(for official use)

1. Date of receipt of the application : _____
2. Serial No. of the applicant : _____
3. Date of Inspection : _____
4. Recommendation of the Inspecting Officer

Final Order of the Licencing Authority

1. License granted/refused : _____
2. License No. : _____
3. Date of Registration : _____

Signature & Designation
of Licensing Authority
