

FORM C. F. R. A.

[See Rule 45 (6)]

Application for renewal of Certificate of Fitness

The inspector of Motor Vehicle / Authorised Testing Station, Silvassa. I hereby apply for renewal of the certificate of fitness described below :

Registration mark of Vehicles : _____

Type of Vehicle : _____

Name of Owner : _____

Address : _____

Place where the vehicle is ordinarily kept _____

Number of the certificate of fitness and date of issue of last renewal _____

Authority by which the certificate of fitness was issue of last renewal _____

The date of next inspection as endorsed in the certificate of fitness last renewal if _____

Date of expiry of the certificate of fitness _____

Date :

Signature or thumb impression of applicant

Strike out whichever not applicable :

Road Tax : _____ Valid Upto : _____

Permit No. : _____ Valid Upto : _____

PUC No. : _____ Valid Upto : _____

Auth. No. : _____ Valid Upto : _____

Insurance No.: _____ Valid Upto : _____

Make : _____

Model : _____

Chassis No.: _____

Engine No. : _____