SCHEDULE – II "A" [See rule 11 (1)] Form – LM – 1

[Application form for licence as manufacturer of weights & measures under the Legal Metrology Act, 2009]

To,

			To be filled by	y the Comments of the
			Applicant	inspection officer
	(1)		(2)	(3)
1.		e of the manufacturing concern sired.	n for which licence	÷
2.	Complete address of the concern. Whether premises are owned/rented/taken on lease/leave licence, duly supported by documents.			
3.	Date of Establishment of workshop/factory.			
4.	Name (s) and address (s) along with their father's/ husband's name of proprietor (s) and/or Partners and Managing Director (s) in the case of Limited company			
5.	The date and current registration number of factory/shop/ establishment/ Municipal Trade licence.			
6.		re of manufacturing activities a		
7.	The type of weights and measures manufactured viz:		roposed to be	
	(i)	Weights		
	(ii)	Measures		
	(iii)	Weighing Instruments	And the transfer and	
	(iv)	Measuring Instruments with		
	(i)	umber of persons employed/pi Skilled	toposed to be emp	10 y c u
	(ii)	Semi-skilled	×	
	(iii)	Unskilled		
	(iv)	Specialist trained in the line		
€.		nonogram or trade mark intend	led to be Imprinted	<u></u>
		ights and measures to be manu		

			•	
	10.	Details	of machinery, tools accessories, owned and or manufacturing weights measures etc.	
	П.	Details	of foundry/workshop facilities arranged.	
		Wheth	er ownership, long term lease etc.	
	12.	Faciliti	ies of steel casting and hardness testing of	
		Vital p	arts etc or other means.	
	13.	Availa	bility of electric energy	
	14.		s of loan received from Government or financia	ıl
			tion. If so, give details.	
	15.	Name	of bankers, if any.	
	16.		Sales Tax Registration Number/CST Number/	
	12		sional Tax registration Number/IT Number.	
	17.		you applied previously for a manufacturer's	
	1.0		e? If so, when and with what results?	
	18.	(a)	Whether the item (s) proposed to be manufactured will be sold within the State or	
			out side the state or both.	
		(b)	Details of Model Approval received from	
		(0)	Government of India;	
		©	When can you produce	
			for inspection samples of your products for wh	nich
			licence is desired?	
	То	be certif	fied by the applicant (s)	
	Leg adm	gal Metr	tified that I/We have read the Legal Metrology ology (Enforcement) Rules, 2011 and agree tive orders and instructions issued or to be issued	to abide by the same and also the
		I/W	e agree to deposit the Scheduled licence fees with the Licencing Authority.	
		All	the information furnished above is true to the be	est of my/our knowledge.
			2	
	D1			
	Plac			
	Dat	e:		Signature and Designation
	To Dat	be filled	in by Departmental Officer of the Administrat	ion.
¥			ber of application:	
			pection:	
		735	dation of Inspecting Officer:	
			e a variable to the	

SCHEDULE – IIA [See rule 11 (1)] Form LD-1

[Application Form for Licence as Dealers in Weights & Measures under the Legal Metrology Act, 2009]

To,					
	1	To	be filled by	Comme	nts of the
			e applicant		ng officer
	1		2	3	3
1.	Name of the establishment/sh	op/person se	eking the	•••••	•••••
	licence.				
2.	Complete address of the estab	lishment etc	•		
3.	Date of establishment				
4.	Name (s) and address (s) of pr	oprietors an	d / or partner	rs	
- A	and Managing Director (s) in	the case of I	imited comp	oany.	
5.	Number and date of Registration	on Number	of current		
•	shon/establishment/Municipal	Trade licen	ce.		
6.	Categories of weights and mea	asures sold/p	proposed		
٠.	to be sold at present.				
7.	Registration Number	of	VAT/C	ST/Sales	Tax/Professional
est Co					
	Tax/Income Tax.				
8.	Do you intend to import weigh	nts, etc. fron	places.		••••••
	outside the State/Country? If	so indicate s	ources of		
	supply. (Give details of manuf	acturer's tra	de mark/		
	monogram and his licence num	nber) and pr	ovide		
(a)	Registration of Importer of We	ights and M	leasures, if a	ny	
(b)	Approval of model imported in	to India by	Central Gove	ernment.	
9.	Have you applied previously for	or a dealer's	licence,		•••••
	either in this State or elsewho	ere? If so g	ive details?		

To be certified by the applicant(s)

Certified that I/We have read the Legal Metrology Act, 2009, Daman and Diu Legal Metrology (Enforcement) Rules, 2011 and agree to abide by the same and also the administrative orders and instructions issued or to be issued there under.

I/We agree to deposit the Scheduled licence fees with Government as soon as required to do so by the Licensing Authority.

All the information furnished above is true to the best of my/our knowledge.

Place:	
Date:	Signature and Designation
Taka Siladia I. Dayan J. 1005	A I
To be filled in by Departmental Officer of the	e Administration
Date of Receipt of Application:	
Serial Number of application :	
Date of inspection:	
Recommendation of Inspecting Officer:	
Place:	
Date:	Signature and Designation of Inspecting Officer
Till Critical Autom	
Final orders of Licensing Authority	
licence granted/refused:	
licence Number:	
Valid till:	
Place:	
Date:	
Date.	Signature and Designation

SCHEDULE - IIA

[See rule 11 (1)]
Form LR - 1
[Application for licence as repairers of Weights & Measures under the Legal Metrology Act, 2009]

To,

		To be filled by	Comments	of the		
		the applicants	inspecting	inspecting officer		
	Ī	2	3			
		*				
1.	Name of the concern seeking the lice	ence.		••••		
2.	Complete address of the workshop.		,	·•••		
3.	(a) Whether premises are owned/rented/taken. on lease dully supported by documents.(b) Date of establishment.					
4.	Name (s) and address (s) along with their father's/ husband's name of proprietor (s) and/or Partners and Managing Director (s) in the case of Limited company.					
5.	Number and date of shop/establishme	ent/current		••••		
6.	Municipal Trade Licence. Professional Tax/IT Tax	registration	Number etc	if	any.	
7.	The type of weights	and measure	es proposed	to 1	repaired.	
8.	Area in which you wish to operate.					
9. 10.	Previous experience in the line. Number of skilled staff employed or p	proposed to be		••••		
	employed: (i) Skilled					
	(ii) Semi-skilled					
	(iii) Unskilled					
	(iv) Employees trained in the line					

 Details of machinery/tools/accessories at 12. Availability of electric energy. Have you sufficient stock of loan/test w Give details. Have you applied previously for a repair If so, When and with what results? 	eights. etc.?
To be certified by the applicant(s)	
Certified that I/We have read the Leg Metrology (Enforcement) Rules, 2011 and administrative orders and instructions issued	
I/We agree to deposit the Scheduled I to do so by the Licensing Authority.	icence fees with Government as soon as required
All the information furnished above is	s true to the best of my/our knowledge.
Place: Date:	Signature and Designation
To be filled in by Departmental Officer of the	e State Government
Date of Receipt of Application:	
Serial Number of application:	
Date of inspection:	
Recommendation of Inspecting Officer:	
Place:	Signature and Designation of Inspecting Officer
Date:	
Final orders of Licensing Authority	
licence granted/refused:	
licence Number:	
Valid till:	
Place:	
Date:	Signature and Designation