AGRICULTURAL MARKETING BOARD

Application for Registration as Dealer at AMB and NWM

Photograph of Applicant or Designated Representative

1.	Name	of Applicant:					
2.	Natio	nal Identity Card Number:					
3.	Name of Designated Representative (in case of Company):						
0.							
				•••••			
4.	Addre	ess of Applicant:					
				•••••			
5.	Telep	hone/Fax Number(s):					
6.	BRN	Number:					
7.	Trading Licence No. (Foodstuffs):						
8.	Certificate of Incorporation/Current Standing (in case of Company)/ Certificate of Registration from Registrar of Co-Operative Societies:						
9.	Munic	cipality/District Council:					
10.	Place	of Business:					
11.	Stall	No. (where applicable):					
12.	Food Handlers Certificate:						
13.	Produ	ıct(s) to which registration applie	es (Tick as appropriate)				
	a)	Potato – Table					
	b)	Onion – Table					
	•	Garlic - Table					
	d)	Spices – Turmeric /Cardamom					
	e)	Glass Jars and Caps					
	f)	Vegetables					
	g)	Fruits					
	h)	Flowers					
			DT				

14. Do you intend to buy vegetables	fruits and	l flow	ers from	the National WI	nolesale Market
situated at Wooton.	•	Yes		No	
15. How do you intend to pay at the	National W	/hole	sala Mar	kat	
a. Cash		riioie	Saic Mai	NGL.	
b. Cheque					
c. Internet Banking					
d. Telegraphic Transfer	4				
d. relegraphic transfer					
16 Major vagotables fruits and flow	vara ta ha r	urah	acad wa	okhu	
16. Major vegetables, fruits and flow	ers to be p	Juicii			
A. Name of vegetable			Quant	ity/kg/unit	
			_		-
					-
					-
			_		
		ı			1
B. Fruits			Quanti	ty kg/unit	
		<u> </u>			I
C. Flowers			Qı	antity	
					-
					-
					-
					-
		l			J

For Bo	pard Use only	Reg No. AMB / DM / / 2021						
17.	I,	, bearing ID Card No						
	and acting o	on behalf of myself or						
	company, confir	n that the following list of						
drivers, helpers and staff are hereby authorised to represent me/or the above noted								
com	pany at AMB and NWM. I also confirm that the followi	ng list of vehicles are hereby						
authorised to enter AMB and NWM premises on my/ the company's behalf.								
SN	NAME	ID No						
1		- A - A						
2		1111						
3								
SN	VEHICLE NO(S)	REGISTRATION CERTIFICATE (SUBMITTED)						
1								
2								
DECLARATION								
l hei	reby declare that the information provided in this app	plication form and its related						
anne	xures are, to the bes <mark>t of my</mark> know <mark>ledge a</mark> nd bel <mark>ief, tru</mark>	th <mark>ful and</mark> c <mark>orrect, and</mark> request						
that	my application as Dealer for the year 2021 be considered	d accordingly.						
Sign	ature:							
Nam	e:							

Acting For (if applicable):

Date:

18. The following documents are also submitted:

Documents	Please tick if submitted
Copy of BRN	
Copy of Trade License	
Copy of Certificate of Incorporation	-1 -
Two (2) recent photo passport of the applicant and any other designated representative(s)	
Copies of the National Identity Card for applicant and representative(s)	
Copies of Registration Certificates of vehicles to be used by applicant	
Food Handlers Certificate	
Copy of a duly signed/ stamped Certificate of current Standing issued by the Registrar of Companies (Not more than three months old)	