

FORM 9

[See rule 34(3)]

FORM OF APPLICATION FOR REGISTRATION/RENEWAL OF REGISTRATION
AS A CURER OF VIRGINIA TOBACCO

1. Name of the applicant
2. Whether the applicant is an individual, partnership firm private or public limited company or co-operative society ?
3. If the applicant is an individual give his name, father's name and address of the applicant and if the applicant is a partnership firm private or public limited company or co-operative society give the name and address of the person/persons in charge of the affairs of such firm, company or society as well as the address of such firm, company or society.
4. Name of Village, Taluk, District and State where the premises wherein virginia tobacco is proposed to be cured is situated.
5. Where the application is for registration or renewal of registration ?
6. Method of curing of virgina tobacco
7. Curing facilities available with the applicant
8. Whether virginia tobacco proposed to be cured is of his own or that of others. If others tobacco the details of the person, area and quantity from which green leaf is to be cured.
9. Whether any tobacco other than virginia tobacco is proposed to be cured. If so indicate variety and area.
10. Whether applicant has been granted a certificate of registration for growing virginia tobacco. If so give details.
11. Amount of fee remitted for registration (Furnish Particulars)

I/We do hereby solemnly declare that to the best of my/our knowledge and belief the above stated informations are true and correct.

Place :

Date :

(Signature of the applicant)