

FORM C. F. R. A.

{ See Rule 45 (6) }

Application for renewal of Certificate of Fitness

To,

The Inspector of Motor Vehicles/Authorised Testing Station, Daman, I hereby apply for renewal of the Certificate of fitness described below :

Registration mark of Vehicle _____

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 issued of last renewal _____

The date of next Inspection as endorsed in the Certificate of Fitness last renewed, if any

The date of expiry of the Certificate of Fitness _____

Date : _____

Signature or Thumb impression of Applicant

TT Strike out which ever not applicable :

1. Chassis No. :
2. Engine No. :
3. Make :
4. Model :
5. Road Tax :
6. Goods Tax :
7. Permit No. :
8. Insurance No. :
9. F. C. No. :