FORM P.Co.S.A

APPLICATION FOR A PERMIT IN RESPECT OF A CONTRACT CARRIAGE TO BE **REGULARLY SO USED**

[See Rule 143(b)]

To

10					
	The Regional / State Trans	port Auth	ority,		
	•	ereby app		f the Motor Vehicles Act, 1988 (59 tion 66 of the Act in respect of a	
1.	Full Name	:			
2.	Name of father/husband (in the case : of an individual)				
3.	Address				
				(7)	
4. Area for which the permit is:				Y	
	required				
5.	The Vehicle to be used is	:			
	Registration mark		Type	Seating capacity (Excluding Driver)	
	(1)		(2)	(3)	
6.	Particulars of service to be: performed by the contract carriage (not necessary in case of a motor cab) and the manner in which it is claimed that the public convenience will be served.				
7.	Particulars of contract carriage : permits held by the applicant and valid on the date of application				
8.	I/We enclose Chalan Receipt No				
9.	. Whether the vehicle is fitted with taxi-meter.				
10.	10. I/We desire a permit foryears.				
11.	. I/We hereby declare that the above statements are true and undertake to avail the permit, if granted in accordance with its terms and conditions and in conformity with the provisions of the Motor Vehicles Act, 1988 (59 of 1988) and the rules made there under from time to time.				
Date:			Signature of the applicant		
in t				e space provided in any of the columns ation sheets, containing the number of	

the column and the necessary information bearing the signature of the applicant may be attached to the form.