

# **FORM C**

## **APPLICATION FOR THE GRANT/AMMENDMENT/RENEWAL OF A LICENCE TO FILL &/OR STORE COMPRESSED GAS IN CYLINDERS**

**Documents listed overleaf must be enclosed with this application,if it is for the grant of the licence in Form 'E' and 'F'**

1. Applicants Name : \_\_\_\_\_  
Applicant's Calling : \_\_\_\_\_  
Applicants Full Postal Address : \_\_\_\_\_  
: \_\_\_\_\_
2. Situation of the premises where compressed gas is to be stored : \_\_\_\_\_  
State : \_\_\_\_\_  
District : \_\_\_\_\_  
Town or Village : \_\_\_\_\_  
Nearest Police Station : \_\_\_\_\_  
Nearest Rly. Station : \_\_\_\_\_
3. Nature of compressed gas proposed to be filled/Stored namely : \_\_\_\_\_  
a)Toxic b)Non toxic and non flammable c)Non toxic and  
flammable d)Dissolved acetylene gas e)Non toxic and  
flammable liquefiable gas other than LPG f) Liquefied  
petroleum gas
4. Chemical name of each compressed gas proposed to be : \_\_\_\_\_  
Filled/stored
5. Quantity of each compressed gas proposed to be filled/ Stored in : \_\_\_\_\_  
terms of numbers for gassed mentioned under items 3 (a), 3 (b), 3  
© or 3(d)  
In terms of kgs for gasses mentioned under items 3(e) or 3(f)
6. Nature of chemical name and quantity of each compressed gas : \_\_\_\_\_  
already filled/stored in the premises.
7. Number of the licence held for the premises and the full name of : \_\_\_\_\_  
the holder of the license

I hereby declare that the statements made above have been checked up by me and are true and undertake to abide by the norms and conditions of the license which will be granted to me.

**Date of Application**

**Sign & Designation of Applicant**