



ASSOCIATION OF CONTAINER TRANSPORTERS
- We Move the Economy -

APPLICATION FORM FOR MEMBERSHIP

Name of the organization:.....

Registered address of the organization:.....

Telephone No :..... Fax No :..... E-Mail:.....

Name of the nominee representing the organization:.....

Tel / Mobile:..... Signature of the nominee :.....

Number of specialized container carrying equipment registered under the organization :

Prime Movers:..... Trailers:..... Lorries:.....

Name of the Insurer for vehicles :..... SLPA File No:.....

I / We certify that the particulars furnished above are true and correct I / We also confirm that I / We will abide by the rules and regulations of the constitution and directives of the Association of Container Transporters.

I / We Enclose here with cheque / cash for Rs. Five thousand as entrance fee and Rs. Ten thousand as Annual Subscription fee for Membership of the Association of Container Transporters.

Also I / We are aware that if the application is rejected the entrance fee and annual fee will be refunded. Any changes in address and nominee will be notified in writing to the secretary.

Date :.....

Signature & Rubber Stamp

Proposed by :.....

Seconded by :.....

Please attach copy of the Business Registration and Registration Numbers of vehicles

Membership committee approval

.....

President

.....

Secretary

.....

Date