

**SCHEDULE – III**  
**(See Rule 11(3))**  
**Form LD– I**

**Application Form for licence as Dealers in Weights and Measures**  
**(Under Rule 11(3) of Tamilnadu Legal Metrology Enforcement Rule,2011)**

Si. No	To be filled by the Applicant.	Comments of the Inspecting Officer.
1.	Name of the establishment / shop /person seeking the license :	
2.	Complete address of the establishment etc. :	
3.	Date of establishment :	
4.	Name(s) and address(s) Proprietors and / or Partners and Managing Directors(s) in the case of Limited Company :	
5.	Number and date of Registration Number of current shop/establishment/ Municipal Trade License. :	
6.	Categories of weights and measures sold/ proposed to be sold at present :	
7.	Registration Number of Value Added Tax / Central Sales tax / Sales Tax / Professional tax / Income tax. :	
8.	Do you intend to importer of Weight etc. from places outside the State / Country? If so indicate sources of supply. (Give detail of manufacturer's trade mark/ monogram and his license number) and provide. a)Registration of Importer of Weights and Measures if any  b)Approval of model imported into India by Central Government	
9.	Have you applied previously for a dealer's license, either in the State or elsewhere? If so, give details :	

**To be certified by the applicant(s)**

Certified that I / We have read the Legal Metrology Act, 2009 (Central Act 1 of 2010) and the Tamil Nadu Legal Metrology (Enforcement) Rules, 2011 and agree to abide by the same and also the administrative orders and instruction issued or to be issued thereunder.

I / We agree to deposit the Scheduled license fees with Government as soon as required to do so by Licensing Authority.

All the information furnished above is true to the best of my / our knowledge.

**Signature.**

**To be filled in by Department Officer of the State Government.**

Date of Receipt of application :

Serial Number of application :

Date of Inspection :

Recommendation of the Inspecting  
Officer :

Place :

Date : **Signature and Designation of Inspecting  
Officer.**

**Final Orders of Licensing Authority**

License granted/refused :

License Number :

Valid till :

Place:

Date : **Signature and Designation.**