

**DECLARATION OF THE ASSESSMENT OF TAX ON PROFESSIONS,  
TRADES, ETC. TO BE PRODUCED BY THE TRANSPORT OPERATORS.**

**(TO BE FILLED IN BY THE APPLICANT/DECLARANT)**

1. Name of the Owner : \_\_\_\_\_  
\_\_\_\_\_
2. Father's / Husband name : \_\_\_\_\_
3. Business Address: Village/ Town : \_\_\_\_\_  
P. O. : \_\_\_\_\_  
District: \_\_\_\_\_
4. Vehicles Registration No. : \_\_\_\_\_
5. Permit No. & Date : \_\_\_\_\_
6. Loading Capacity : \_\_\_\_\_
7. Seating capacity : \_\_\_\_\_
8. Trading License No. & Date : \_\_\_\_\_
9. Particular of Tax paid : \_\_\_\_\_

SL.NO	ASSESSMENT YEAR	TAX PAID	REMARKS
1			Challan.No: _____ Date _____
2			
3			

(Rupees \_\_\_\_\_)only

N. B: Copy of the Registration permit enclosed.

I declare that the above information is correct and complete to the best of information and belief.

**Signature of the Applicant/ Declarant**

MEMO.NO.DC.PT/CC/XXIII/

Dated Shillong, the \_\_\_\_\_ 200\_\_.

Certified the above named Owner has paid the Professional Tax upto date.

This certificate is valid upto \_\_\_\_\_

**Superintendent (Professional Tax),  
Khasi Hills Autonomous District Council.  
Shillong.**