

**Ministry of Commerce and Consumer Protection**  
(Consumer Affairs Unit)

APPLICATION FORM

**CONSUMER PROTECTION (PRICES & SUPPLIES CONTROL) ACT 12 OF 1998**

Name of Applicant : .....

Private Address : .....

Trade Name : .....

Name of Business : .....

Address of Trading Premises: .....

.....

Licence/s held: .....

**WAREHOUSES**

**Location**

**Class of Commodities Stored**

.....

.....

.....

.....

.....

.....

.....

.....

Date:.....

.....  
Signature of Applicant

---

**FOR OFFICIAL USE**

Registration No. : .....

Date Checked : .....

Remarks : .....

.....

Date Approved : .....

Signature for PS : .....