

FORM EIS – C
(see rule ..)
Grant /Renewal of Licence to Electrical Contractors for Class A/B
(Please Tick whichever is applicable)

1. Licence No :
2. Name (title) in which an Electrical Contractor’s Licence is applied for :
3. Business Address :
4. Details of Proprietor (if applicable) :

Sl. No.	Name of Proprietor	Residential Address	Mobile/Landline No.	Age
1	2	3	4	5

5. Details of Partner(s) (if applicable)

Sl.No.	Name of Partner	Residential Address	Mobile/Landline No.	Age
1	2	3	4	5

6. If Contractors licence has been previously suspended/terminated, details to be given.
.....

7. Details of work/Installation done (a or b or c as required for Class A application)

Option (a/b/c)	Details of HT Installations	Details of Generators of 100 kVA or above	Details of APFC Panel of 100 kVA or above.
1	2	3	4

8. Details of Minimum staff required.

Name of Staff	Position (supervisor/wireman)	Competency Certificate/Permit No.	Residential Address	Contact No.

9. I hereby declare that I am medically fit to work as an Electrical Contractor, as stated in the Medical Certificate issued by(Name of Doctor) working in.....(Name of Hospital/Dispensary) as.....(Position)

10. I hereby declare that the application is accompanied with the document as specified under ruleof the Electrical Inspectorate, Sikkim (Formation of Technical committee and Grant of Licence, Competency Certificate to work and Permit to work) Rule 2017.

I do hereby declare that the particulars given above are correct.

Date:

Signature of applicant

Date.....

Signature of Applicant.