

Bank Name:

Branch Name:

Account No:

IFSC Code:

MICR Code:

(Copy of the cheque)

3. In case you are facing any difficulty online please fill in the following proforma (hard copy) and forward the same to us at the following address. We will fill in the registration on your behalf as per the details furnished in the proforma:-

| | |
|---|---|
| Type of Registration: | <input type="text" value="-- Select --"/> |
| Agency Name: | <input type="text"/> |
| Act/Registration No: | <input type="text"/> |
| Date of Registration(DD/MM/YYYY): | <input type="text"/> |
| Registering Authority: | <input type="text"/> |
| State of Registration: | <input type="text"/> |
| TIN Number: | <input type="text"/> |
| TAN Number: | <input type="text"/> |
| Block No/Building/Village/Name Of Premises: | <input type="text"/> |
| Road/Street/Post Office: | <input type="text"/> |
| Area/Locatlity: | <input type="text"/> |
| City: | <input type="text"/> |
| State: | <input type="text" value="--Select--"/> |
| District: | <input type="text"/> |
| Pin Code: | <input type="text"/> |
| Contact Person: | <input type="text"/> |
| Phone No: | <input type="text"/> |
| | (Maximum 100 charaters with comma separated allowed.) |
| Alternate Phone/Mobile No: | <input type="text"/> |
| | (Maximum 100 charaters with comma separated allowed.) |

Email:

Unique Agency Code:

(Unique Agency Code minimum 4 and maximum 15 characters.)

Word Verification:

Enter the letters as they are shown in the image above (Letters are not case-sensitive)

Next

Cancel

For any problem in registratoin,please [Conta](#)

(R.C. Belwal)
Section Officer
Email: r.belwal@nic.in