

HSRP Application Form







Number: _____
Date : _____

Celex Technologies Pvt. Ltd.
P-5, C I T Road, Scheme VI (M), Calcutta 700054, India
Email : info@celex.co.in, website: www.celex.co.in

Registration Number of the Vehicle: Vehicle Model:.....
Engine Number:..... Chassis Number:.....

Owner's Name:
Contact Person (In case owner is a company):
Address.....
PIN:..... City:..... State: West Bengal
Telephone No (Home)..... Telephone No. (Work)..... Mobile No.....
Email ID:

Color of HSRP: (Please Tick)	White <input type="checkbox"/>	Yellow <input type="checkbox"/>		
Size of HSRP: (Please Tick)				
Front	285X45 mm <input type="checkbox"/>	200X100 mm <input type="checkbox"/>	500X120 mm <input type="checkbox"/>	340X200 mm <input type="checkbox"/>
Shapes				
Rear	285X45 mm <input type="checkbox"/>	200X100 mm <input type="checkbox"/>	500X120 mm <input type="checkbox"/>	340X200 mm <input type="checkbox"/>

Dealer/Agent's Name: _____ Signature of Owner/Owner's Authorised person _____

Not to be filled by the Applicant

Customer Reference No _____ Operator Signature _____ Cashier Signature _____