## Form -II

[See rule 3(2)(b) & 12(2)(b)]

## Particulars of Applicant for License of Agency For verification of his/her Antecedents of Applicant

Thu	mb Impression of the Applicant							
Sign	nature of the Applicant	Passport Size recent						
Nan	ne of Attesting Officer		Photograph Attested by					
Desi	ignation of attesting Offecer		Class I Gazetted Officer					
1.	Name of applicant (in BLOC	CK letters)						
	Last nameI	First name						
2.	If name has been changed e	ver, the previous name(	s):					
			•••••					
3.	Sex: (male/female)	•••						
4.	Date of Birth:							
5.	Patents' Full Name and Address:							
	i. Father							
	ii. Mother		• • • • • • • • • • • • • • • • • • • •					
6.	Permanent Address (complete postal address):							
	House No	Mohalla						
	Street	Village	•••••					
	Post Office	Police Station	• • • • • • • • • • • • • • • • • • • •					
	District	Pin Code						
7.	Present Residential Address (	complete postal address)	:					
	House No	Mohalla						
	Street	Village						
	Post Office	Police Station						
	District	Pin Code						
	Talanhana Na /Mahila Na							

Address	Address of residences during last five years								
S.No.	From	То	Address						
1									
2									
3									
4									
5									
S.No.	From	То	Address						
In case of	of stay abroad pa	rticulars of all p	laces where resided for more th						
-	r attaining the ag		· 						
	1 10111	10	Tudicss						
1									
2									
. If marrie			(a) (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c						
. If marrie									
. If marrie	Residential Addre	ess of Spouse							
. If marrie	Residential Addre	ess of Spouse							
. If marrie  Present I  Other De	Residential Addre	ess of Spouse							
. If marrie  Present I  Other De	Residential Addre	ess of Spouse  at :							
. If marrie  Present I  Other De	Residential Addre	ess of Spouse  it: ications:held if any along							
2  If marrie  Present I  Other De  (a) Ec  (b) Pr	Residential Addre	ess of Spouse  it: ications:held if any along	g with name and address of emp						

14.	Name, address of the Agency and license particulars of Private Security Agency operated earlier as partner or majority shareholder or Director:								
	Name of Agency:								
	Address:								
	License particular:								
15.	Are you a citizen of India by: Birth/Descent/Registration/								
	Naturalization (strike out which is not applicable):								
16.	(a) Have you ever possessed any other citizenship: Yes/No.					Yes/No.			
	(b) If y	es, in	dica	te coun	try (ie	s):	•••••		
17.	(a) Is an	ny Fl	R pe	ending a	agains	t you ?			Yes/No.
	(b) If yes, attach copy of FIR.								
18.	(a) Is a	(a) Is any criminal proceeding pending against you in any court? Yes/No.							
	(b) If yes, furnish the following details:								
S N	o FIR N	FIR No. Case No.		Name of Police Station		Name of Court	f Section	Sections of Law	
1					1	Station	Court		
2									
19. (a) Have your ever been convicted/acquitted/discharged? Yes/No.									
(b) If yes, furnish the following details:									
S No	FIR No.	Ca N		Nam Poli Stati	ce	Name of Court	Sections Of law	Date of Judgment	Whether Discharge/ Acquitted/ convicted
2									
2									

Enclosures:

a. Affidavit in Form Ill.

c.----

20.

## 21. **Self Declaration**:

The information given by me in this form and enclosures is true and I am solely responsible for accuracy.

	(Signature/T.I* of applicant)
	Full Name
Date:	
Place	
(*Left Hand Thumb Impression is	f Male and Right Hand Thumb Impression if Female)