

FORMAT OF APPLICATION FOR LOGIN ID CREATION FOR THE SLD-MAKER/RFC



REQUESTING:	New Login Id Creation	Modify Information \Box
1. Name of Applicant Organization*:		
2. Name of the Person	Applying*:	
3. Designation*:		
4. Office Address*:		
City & PIN Code*:		
5. Telephone No: (O)*	(M)*	:
6. E-Mail Id*:		
7. FAX No:		
8. Current/Prior Login	n ID (if any):	
9. User required for: RFC (Retro Fitment Centre)		
* Mandatory Fields		
Note:		
	hall be accompanied with (LOI from manate) and submitted on official letter head	
2. The Commissionerate	will verify and approve the applications.	:
sent to State Admin for creation of User ID and Password for RFC. 3. Only one user id/ password will be issued to an RFC by the department.		
		Signature of Applicant
		Date:
		Seal/Stamp