



# THE SIALKOT CHAMBER OF COMMERCE & INDUSTRY

P.O.BOX 1870, SHAHRAH-E-AIWAN-E-SANAT-O-TIJARAT, SIALKOT-51310, PAKISTAN

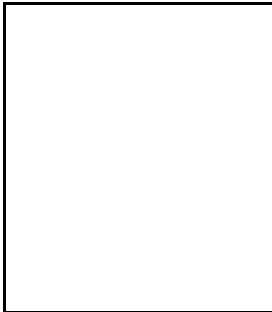
Tele (052) 4261881-3, Fax # +92-052-4268835, 4267919, Gram: Commerce

E-Mail : sialkot@sccl.com.pk, Website : www.sccl.com.pk

## IDENTITY CARD FORM

(TYPE THE FORM IN DUPLICATE, USING CAPITAL LETTERS/WORDS)

- Name of Member Firm \_\_\_\_\_  
\_\_\_\_\_
- Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Membership No.                      **A**                      \_\_\_\_\_                      **M**                      \_\_\_\_\_
- Name of applicant. \_\_\_\_\_
- Designation of applicant \_\_\_\_\_
- N.T.N (National Tax No.) \_\_\_\_\_
- N.I.C (National Identity Card No) \_\_\_\_\_
- Date of Birth \_\_\_\_\_
- Blood Group \_\_\_\_\_



### Declaration:

I/We do hereby solemnly declare attest that the photograph and signature affixed on this form are true

- Signature of Applicant. \_\_\_\_\_

### Note:-

- Please provide **two passport size photo graphs**, one for Identity Card and one for application form (**with stamp**).
- Please affix stamp of the company/firm on the one photo graph on the duplicate copy of the form, in such a manner as to cover part of the photograph.

### For office use only:

1. Date of issue	_____ -2015
2. Valid upto	_____ 31-03-2016
3. SCCI code #	_____

