



गढ़वाल मण्डल विकास निगम लि०
74/1, राजपुर रोड़, देहरादून।
(उत्तराखण्ड शासन का प्रतिष्ठान)

C.I.N.NO U 31101UR 1976SGC004259

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**APPLICATION FORM FOR THE APPOINTMENT OF AUTHORIZED
TRAVEL AGENCY OF GMVN
(A govt. of Uttarakhand Undertaking)**

(A) REGISTRATION

- (1) Name & Style of Firm/Travel Agency -----
- (2) Date of Registration/Incorporation -----
- (3) Location of Registered Office with Telephone/Fax nos & e-mail Address -----
- (4) Address of any other office from Where Travel Trade activities are Being carried out by the applicant along with Tel/Fax nos and e-mail address, if any. -----

(B) OWNERHIP

- (5) Whether the firm is:-
- (A) Individually Owned -----
- (b) Partnership Firm -----
- (c) Private Ltd. Firm -----
- (d) Limited/Public Firm -----
- (6) Name's of owner/Partners/Directors of the Firm, their addresses, Qualifications and experience in the relevant field. -----
(Attach separate sheet, if requested.) -----
- (7) Minimum 5 years Travel Trade Business experience Bonafied document recognised by Govt. of India Tourism Deptt.or any state Tourism corporation. -----

(c) FINANCIAL

- (8) Name and Address of Banker's -----

- (9) Turnover achieved by the firm, -----
in respect of Travel Trade Business -----
During the last three years. -----

- (10) Inome Tax Clearanec from the Income -----
Tax Department.(Attach Xerox copy) -----

- (11) Agency Sought for the Area of -----

- (12) Do you have any objection to having -----
Your premises inspected by officials -----
of GMVN prior to entering into an -----
Agreement for authorized travel agency. -----

- (13) Do you presently provide air/ rail/ -----
surface Transport reservation facility -----
to your clients -----

- (14) Are you a member of -----

LATO/TAAI/LAT -----
or any other such organizations. -----

- (15) Name of experience of personnel -----
Employed by you for carrying out -----
Ravel Trade activities/business -----

- (16) Are you registered with the State -----
with Tel/Fax nos and e-mail -----
Tourism Deptt. Of your state -----
along with Tel/Fax nos and e-mail -----

- (17) Are you working as GSA/PSA -----
along with Tel/Fax nos and e-mail -----
along with Tel/Fax nos and e-mail -----
Authorized Travel Agency -----
along with Tel/Fax nos and e-mail -----
along with Tel/Fax nos and e-mail -----
of any State Tourism Development -----

