

ISSUANCE AND ENDORSEMENT OF
CERTIFICATE OF ORIGIN AND/OR OTHER SHIPPING DOCUMENTS BY THE MTMA
REGISTRATION FORM

We (name of company)
hereby apply to become a subscriber to the above facility.

Our particulars are as follows:

Office Address: _____

Telephone : _____

Fax : _____ Email : _____

Factory Add. : _____

Telephone : _____

Fax : _____ Email : _____

Please address all mail to the Office / Factory address for the attention
of (Name and Designation).

Name of Constitution

Name of Directors/Partners

Sole Proprietor

1. _____

2. _____

Partnership

3. _____

4. _____

Limited Company

5. _____

6. _____

Issued Capital

Products Manufactured / Exported

\$ _____

No. of Employees

**I certify that the above Information is true and correct and authorize MTMA to
verify with any authority as may be required.**

Signature & Company Cop:

Name: _____

Designation: _____

Date: _____