



THE PAKPATTAN CHAMBER OF COMMERCE & INDUSTRY

Gunj Shakkar Road, Near Shell Petrol Pump,

Sahiwal Road, Pakpattan

Office Mobile#: 0308-9499111, LandLine#: 0457-374111, President#: 0313-9499111

E-Mail: pccipcci22@gmail.com, Website: www.pcci.com.pk

FORM OF APPLICATION FOR MEMBERSHIP

The Secretary General,
Pakpattan Chamber of Commerce & Industry, Pakpattan

Dear Sir,

I/We request you to register my/our Firm/Company as Corporate Member/Associate Member of your Chamber against payment of prescribed fee. I/We accept the objects of the Chamber & fully agree to abide by the rules & procedures of business as laid down in the Memorandum & Articles of Association of the Chamber. Further I/We undertake to say that we are not involved in any criminal act/case. We understand that my/our membership will be subject to the approval of the Committee.

Name of Firm: _____

Name (Authorized Representative): _____

Designation: Sole Proprietor Chief Executive Director Partner Others _____
(Please Specify)

Nature of Business: _____

Principal Business Activity: Manufacturer Importer/Exporter Distributor Trader Services Others _____
(Please Specify)

Business Category: _____ Business Sub Category: _____

National Tax No. _____ GST No. (If Applicable) _____

CNIC No. _____ Telephone No. _____

Mobile No. _____ Whatsapp No. _____

E-Mail Address: _____ Website: _____

Business Address: _____

Town/City: _____ Tehsil: _____ District: _____

Postal Address: _____

Town/City: _____ Tehsil: _____ District: _____

Declaration:

I/We do solemnly declare and affirm that particulars provided are true and correct. I/We hold myself/ ourselves responsible for legal/judicial consequences arising from the false statement/information.

Yours faithfully,

Date: _____

Signature _____

| Proposed by | | Seconded by | |
|-----------------|--|-----------------|--|
| Company Name: | | Company Name: | |
| Name of Member: | | Name of Member: | |
| Membership No. | | Membership No. | |
| Signature | | Signature | |

FOR OFFICIAL USE ONLY

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|--------------------------------------|--------|---------------------|-----------|
| Receipt No: | | Amount: | |
| Receipt Date: | | Membership No: | |
| Recommendation of Standing Committee | | Accepted / Rejected | |
| Chairman | Member | Member | President |