"ඇමුණුම III"

Application for Motor Vehicle Permit on Concessionary Terms under the Trade and Investment Policy Circular No. 01/2018 and subsequent amendments.

PART "A"

FOR OFFICE USE ONLY

Application No

(Please read the Circular carefully before completion of the application)

PART 'B' - PERSONAL INFORMATION OF THE OFFICER

01. Name (only in English block capitals) please keep a blank cage to separate words and initials

1.1 Name with initials :

1.2 Name in full:

02. National Identity Card Number :

03. Private Address :

04. Private Telephone Numbers :

Fixed Telephone No	Mobile Telephone No.

05. Details of previous Motor Vehicle permits obtained under concessionary schemes :

	Date		Month		Year				Date of Registration

PART 'C' – INFORMATION OF THE POST AND SERVICE PLACES OF THE OFFICER

06. Post and Service Place :

6.1 Present Post (only in English block capitals)

6.2 Date of appointed to the present Post : Date .....Month:..... Year .....

6.3 Grade and class of the present Post: .....

6.4 Salary Code relevant to the present Post: .....

6.5 Present service place:

6.6 Address of the present service place:

6.7 Telephone Number and Fax number:

Telephone										Fax									

6.8 Ministry/ Provincial Council which belongs the present service place (only in English block capitals)

6.9 Date of appointment to the eligible post under this Circular: Date .....Month ..... Year.....

6.10 Whether confirmed in this post? : .....

6.11 If confirmed, date of confirmation: Date .....Month ..... Year.....

6.12 Details of the service periods (initiate with the present post)

Post and the work place	From			To			Total Period		
	Date	Month	Year	Date	Month	Year	Date	Month	Year

6.13 Details of no pay leave:

Post and the work place	From			To			Total Period		
	Date	Month	Year	Date	Month	Year	Date	Month	Year
Total									

PART ' D' - Details of the spouse/ Nominee

07. Details of the Spouse/Nominee

7.1 Full name of the spouse:

7.2 NIC Number of the spouse :

7.3 If unmarried full name of the Nominee:

7.4 NIC Number of the Nominee :

PART ' E ' - DECLARATION OF THE APPPLICANT

I do hereby certify that the information furnished by me in this application is true and accurate to the best of my knowledge. I know that my application will be rejected in case of revealing the information provided by me is not satisfactory and also know that I am liable to penalty for submission of false information according to the rules and regulations prevailed at the time. Further, I agreed that the relevant concessions will be recovered from me and liable to any penalty under the prevailing terms and conditions if information furnished by me are found to be false, before or after importation/purchasing of the vehicle.

....

Date Signature of the Applicant

PART ' F ' - RECOMMENDATION OF THE HEAD OF THE DEPARTMENT

My No. .....

Secretary,

.....

I examined the application dated ……..... .....and other relevant documents submitted to me by Rev/ Mr. / Ms. …….....serving in the post of ……..... in this Department/ institution for a motor vehicle permit on concessionary terms in terms of the Trade and Investment Policy Circular No. 01/ 2018 and subsequent amendments thereto. I am satisfied that the officer has duly completed the application under the Circular No. 01/2018 and subsequent amendments and furnished all the relevant documents.

Accordingly, I certify that this officer has confirmed in an eligible post under the aforesaid circular and eligible for a motor vehicle permit on concessionary terms in terms of the Section ……of the above circular.

I certify that this officer does not come under any provisions not to be eligible under the circular and he/she has satisfied following conditions.

1. The officer has completed in the relevant post/s an active service period of .....……..years from …….....…. to .....……. (Any time period which cannot be accounted for active service should be deducted).
2. The officer has been confirmed on the day/ days of ……..…….....in the relevant post/s. (If the officer has served in several posts eligible for the permit, s/he should have been confirmed in all the relevant posts).
3. The relevant post/s was approved by the Department of Management Services on …….....Scheme of Recruitment (SOR) for the post has/has not been approved. The recruitment for this post was made/ was not made as per the approved SOR.
4. The officer has not been appointed to the/ a post on the basis of "Personal to Holder" or "Supernumerary". (If appointed on the basis of "Personal to Holder" or "Supernumerary" and later removed the same, mention in respect of this with the relevant time period/s).
5. i). There is no any preliminary investigation or formal disciplinary inquiry currently conducting against the officer.

   ii). This officer has not been punished under the relevant provisions of the Establishment Code or any other relevant disciplinary procedures./This officer was made to punishment under the Section …….....of the Establishment Code/similar disciplinary procedures on the offence/s committed on the day of ……..... However, the officer has completed 5 year service with good conduct, in addition to the required active service period at the date of the application is submitted.
6. There was no reason to take actions in terms of the Section 3.10 of the Circular./ It was decided to be made this officer as eligible by referring the decision of the Director General, Department of Trade and Investment Policy.

According to the above facts, I recommend that Rev/ Mr. / Ms.……..... is entitled to obtain a Motor Vehicle Permit on Concessionary terms under the TIP Circular No. 01/ 2018 and subsequent amendments thereto, and kindly submitted for Approval.

....

Date Signature of the Head of the Department/Institution and Rubber Stamp

....

Date Signature of the Head of the Department/Institution and Rubber Stamp

Information relevant to the above Numbers are as follows:

Note:
i). Delete the ward/s not applicable
ii). Please provide information in annexures for clear reference, when it is required to provide information of several posts in filling the applications.

Approval of the Provincial Health Secretary

My No. .....

Approval is granted/ not granted to the above application.

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Date Signature of the Provincial Health Secretary and the Rubber Stamp

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PART "G "

Approval of the Secretary

My No. .....

Approval is granted/ not granted to the above application.

....

Date Signature of the Secretary and the Rubber Stamp