IMPORT OF DUTY FREE CAR BY DISABLED PERSONS
APPLICATION FORM

1. Name (in block letters)	
2. National Identity Card No.	
3. National Tax Number	
4. Contact Information	
a) Address	
b) Telephone Number	
5. Details of Disability	
6. Annual Income	
7. Source of Income	
8. Particulars of Car to be Imported	
9. Preferred Place of Interview	
10. Whether the applicant was previously authorized to Import a Duty Free Car	(Yes /No)
a) Authorization Number & Date	
b) Particulars of Car so Imported	
11. Whether the applicant has availed the facility of purchase of car at concessional rate of duty	(Yes /No)
a) If so, authorization No, date and particulars of the car	
12. Copies of Documents attached (Original to be presented during interview)	
a) Document (s) proving disability	Special CNIC/ Medical Certificate
b) Valid Driving License No. □□□ □□□□□□□□□□ Issuing Authority: □□□□□□□□□□□□□□□□□□□ □□□□□□□□	(Yes /No)

Dated: □□□□□□□□/□□□□□□□ □□□□□□□□□□□□/□□□□□□□ □ Expiry Date: □□□□□□□□/□□□ □□□□□□□□/□□□□□□□□□ □□□	
c) National Identity Card	(Yes /No)
d) National Tax Number Certificate	(Yes /No)
e) Proof of Income (Any one of below)	
• Last filed income tax return	(Yes /No)
• Pay slip (in case of Government Servant)	(Yes /No)
• Proof of Agricultural Income Certificate by Revenue Department	(Yes /No)

I, ________________________________ s/o ______________________________ hereby certify that the information given above is true to best of knowledge and belief and that I have read and understood the terms and conditions overleaf.

Dated: Signatures

For Official Use Only:
Application received on:
□□□ □□□□□□ along with the required copies of documents/copies of following documents not provided:

Stamp