

**SCHEDULE**  
**[See Section-2 (m) read with Section 24]**

**FORM "A"**  
**APPLICATION FORM**

1. Name of the establishment, if any.
2. Postal address of the establishment with contact No.
3. Full name of the employer (including his father's name) and NIC & contact No.
4. Full name of the Manager if any (including his father's name) and NIC & Contact No.
5. Category of the establishment i.e. whether a shop, industrial establishment, commercial establishment, residential hotel, restaurant, eating house, theatre or other place of public amusement or entertainment.
6. Total number of employees (state separately the number of men, women and or young person, (if any).
7. Date on which the establishment commenced its work.
8. I hereby declare that the details given above are correct to the best of my knowledge.

Dated

Signature of the employer

**Note:** This statement shall be sent to the Deputy Chief Inspector of the area concerned with such fare as are prescribed in section 25 (2) of the Khyber Pakhtunkhwa Shops and Establishments Act, 2015.