



Chakwal Chamber of Commerce & Industry

(MEMBERSHIP RENEWAL FORM FOR THE YEAR 20____)

Membership No. AM/CM _____

1	Company Name	
2	Business Address	
3	NTN of the Company	
4	Sales Tax Registration # (If applicable)	
5	Telephone Nos. (Landline)	
6	Mobile No.	
7	Fax Nos.	
8	Email Address	
9	Name of Authorized Representative (already existing as per CCCI record)	
10	CNIC No. (along with copy)	

- Applicants should provide all latest information. Their records shall be updated according to information provided in this form.
- Attached herewith a copy of latest income Tax Return or Challan paid to FBR.

Signature (Applicant)

Secretary General