

APPLICATION FOR CHANGE OF ADDRESS

TO
SAYAK HALDER
REGISTRAR
WEST BENGAL PHARMACY COUNCIL

NO. CA

Purta Bhavan, Sec-I, Bidhannagar West Division,
Kolkata-700 091, Ground Floor, Room No.-5 & 6
Phone No. 2321-6454 / 2359 5180
E-mail : registrar.wbpc2014@gmail.com

Sir,

I, Shri / Smt.

Son / Daughter / Wife of would like to inform
you that I am a registered Pharmacist bearing Registration No. have already
changed my residential address.

So, I request you sir, to be kind enough and take necessary action to incorporate my new address in your register.
Your early action in this regard will be thankfully appreciated.

Old Address :

New Address :

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WEST BENGAL Phone :

(Documents in support of new address, house rent bill / telephone bill / electric bill / municipal tax bill enclosed.)
Please reciprocate me at my new address.

Thanking you,

Yours faithfully,

Dated, the 20

(Full Signature)

Rs. 50/- (Rupees Fifty Only)