



Receipt No.....
Date.....
Signed..... Receiver
Rank.....

Application for Permission to Bring or Transport Ether Chemical Solution (Ether) and Chloroform Chemical Solution (Chloroform)

Date..... Month..... B.E.....

1. Name of Applicant

1.1 In Case of Juristic Person (Company/Partnership)....., Registration Number....., Head Office Located at No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Postal Code....., Telephone....., Facsimile....., E-mail.....

1.2 In Case of Ordinary Person (Mr./Mrs./Ms.)....., Number of Identity Card....., Address No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Postal Code....., Telephone....., Facsimile....., E-mail.....

2. Name of Receiver at Destination

2.1 In Case of Juristic Person (Company/Partnership)....., Registration Number....., Head Office Located at No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Postal Code....., Telephone....., Facsimile....., E-mail.....

2.2 In Case of Ordinary Person (Mr./Mrs./Ms.)....., Number of Identity Card....., Address No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Postal Code....., Telephone....., Facsimile....., E-mail.....

3. Volume of Ether Chemical Solution (Ether) and Chloroform Chemical Solution (Chloroform) Which the Applicant Intends to Apply for Permission

- to Bring
 - Ether Chemical Solution (Ether) Volume.....Kilogram (s) / Litre (s)
 - Chloroform Chemical Solution (Chloroform) Volume.....Kilogram (s) / Litre (s)
- to Transport
 - Ether Chemical Solution (Ether) Volume.....Kilogram (s) / Litre (s)
 - Chloroform Chemical Solution (Chloroform) Volume.....Kilogram (s) / Litre (s)

4. Bringing or Transporting

4.1 Place of Origin, Departing from Company/Partnership/Store.....

Place of Storing Goods/Warehouse..... Located at No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Telephone....., Facsimile....., E-mail.....

4.2 Place of Destination, Bringing or Transporting to Company/Partnership/Store.....

Place of Storing Goods/Warehouse..... Located at No., Alley/Lane....., Road....., Sub-district/Sub-area....., District/Area....., Province....., Telephone....., Facsimile....., E-mail.....

4.3 Objective for Bringing or Transporting.....

4.4 Route of Journey.....

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5. Period of Time Required for Bringing or Transporting

5.1 Starting from Date.....Month.....B.E.....Time.....hrs.

5.2 until Date.....Month.....B.E.....Time.....hrs.

6. Vehicle to Be Used for Bringing or Transporting.....Registration Number.....

Certify that the statements as given above are true in all respects.

Signed.....Person who can sign to bind a juristic person/Owner
(.....)
Position.....

Signed.....Person who can sign to bind a juristic person/Owner
(.....)
Position.....

(a juristic person's seal to be stamped) (if any)

Date.....Month.....B.E.....

Remark : As for filling out information on the route of journey, it is required to specify the name of the highway or the name of the road.