## **INLAND REVENUE DEPARTMENT**

**PHONE**: 784-457-1493

EMAIL: <a href="mailto:svgird@gov.vc">svgird@gov.vc</a>



Inland Revenue Department Kingstown St.Vincent and the Grenadines

Form 8.	* FIRST SCHEDULE	
-		
(S.20 of	of Ord.)	
	FORM OF APPLICATION FOR DEALERS' G The Motor Vehicles and Road Traffic Or	
1.	. Full Name of Applicant	
2.	. Place of Business	
3.		
	(Deale	r, Manufacturer or Repairer)
4.	. Number of General Identification Marks Required	
5.	. Insured with	
6.	. Terms of Policy	40
7.	. Number of Policy	
8.	. Policy expires	<u></u>
		Signature of Owner
Date		

N.B. Vide Sections 20-26 of the Ordinance and Regulations No. 10.