					Dated:	
Ship Rang Leve	Executive Secretary opers' Council of Bangladesh gs Fortune Square el # A-5, House # 32, Road # 02 mmondi, Dhaka-1205.					
	SUBJECT: APPLICATION FOR AS	SSOCIA	TE MEMBERS	SHIP OF SCB.		
Dear	· Sir,					
	We apply for Associate Membership of the	he Shipp	pers' Council of	Bangladesh for t	he year	
1.	Name of the Organization	:				
2.	Name of Chairman /Managing Director/ Proprietor/Managing Partners	:				
3.	Activities of the Firm	:				
4.	i) Mailing Address	:				
	::\ Talanhana Na	_				
	ii) Telephone No.	•				
	iii) Mobile No.	:				
	iv) Fax No.	:				
	v) Email Address	:				
5.	Tax-payer Identification Number (TIN)	:				
6.	Valid Trade License No. and	:				
	Date of Issuance & Renewal	:				
7.	Name & Designation of Officer who will represent the firm in the Shippers' Counc of Bangladesh.					
	Admission Fee	<u>Annual</u>	Subscription	Certifica	te Fee	Total
8.	Associate Tk. 2,500/-	Tk	. 2,500/-	Tk.2	200/-	Tk. 5,200/-
	We are enclosing herewith two copies of	passpor	t size photograp	ohs, photo copies	of Valid Tra	de License with
rene	wal copies and TIN Certificate along	with Ca	ash/Pay Order/I	Bank Draft/Cheq	ue No	
date	ddrawn on		for Tk	.5,200/- being	Admission	Fee, Annual
Subs	scription and Certificate Fee for the year	•••••				

Yours faithfully

Signature with seal