

Title of Exemption Certificate Application Document

Application for Certificate of Exemption

Applicant Information

Full Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Details of Exemption Requested

Exemption Type: _____

Reason for Exemption: _____

Supporting Documents: _____

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge, and that all relevant supporting documents are attached to this application.

Signature: _____ Date: _____

Important Notes:

- Ensure all information and supporting documents are accurate and complete before submission.
- Submission of false or misleading information may lead to disqualification or legal consequences.
- Processing times may vary; please allow sufficient lead time for application review.
- Contact the issuing authority for any queries or clarification regarding the exemption process.