

**FORMAT OF NOC FROM DEPARTMENT**  
**(to be submitted for fresh arms license by employees)**

It is certified that Shri \_\_\_\_\_s/o  
Shri \_\_\_\_\_R/o\_\_\_\_\_ is  
a permanent/temporary employee of this department and serving as \_\_\_\_\_  
\_\_\_\_\_. This department has no objection if an arm  
license is granted to him.

Seal & Signature of the competent Authority