

## **AFFIDAVIT FOR MIGRATION REGISTRATION**

**To be submitted on a Non-Judicial Stamp Paper of Rs. 10/- duly attested by the  
1st Class Magistrate / Notary Public.**

### **AFFIDAVIT**

I.....S/o/D/o .....resident of..... Aged.....  
.....do hereby solemnly affirms and declare as under:

1. That I am a permanent resident of \_\_\_\_\_  
\_\_\_\_\_

(Mentioned address) for the last.....years. I have submitted my Ration card /  
Voter Card as a Residence proof of above mentioned Address.

**Note: If Voter Card is submitted, it must be certified by the Election officer or M C of the  
area.**

2. That I have submitted my Aadhar Card which is mandatory for Aadhar Link only.  
3. That my Date of Birth as per matriculation certificate is.....  
4. That I am a Citizen of India.  
5. That I have passed my Matriculation from.....(Name of  
School) Affiliated with \_\_\_\_\_(Name of Board) Under Roll

6. That I have passed my 10+2/ Sen. Secondary from.....(Name  
of School) Affiliated with \_\_\_\_\_(Name of Board) Under Roll  
No \_\_\_\_\_ in the year..... with \_\_\_\_\_ Stream( Medical / Non Medical).

7. That I have passed my \_\_\_\_\_( Diploma / Degree Pharmacy)  
from.....(Name of Institute) Affiliated with  
\_\_\_\_\_ (Name of University / Board) Under \_\_\_\_\_( Reg /  
Permanent Roll No) in the year.....

8. That I have attended the \_\_\_\_\_ Course as a regular candidate (D. Pharm /B.  
Pharm/M.Pharm / Pharm D whichever is applicable).  
9. That I have not worked anywhere at the time of Undergoing the Pharmacy course.

10. That previously was registered with \_\_\_\_\_ bearing Regn. Number \_\_\_\_\_ dated \_\_\_\_\_ and now I want to be registered with Haryana State Pharmacy Council, Panchkula.

11. That I shall abide by the rules & regulations of Haryana State Pharmacy Council constituted under Pharmacy Act, 1948 & I will wear White Apron during working hours.

12. That no case is pending against me under Drugs & Cosmetics Act, 1940 and rules in 1945 as well as pharmacy act 1948 and the rules made under State Pharmacy Rules 1951

13. That I have never been convicted under Pharmacy Act 1948, and the rules made under state pharmacy rules 1951.

14. That I will serve my business in Haryana State only.

15. That a Fee of Rs. ....with Bank Challan no.....

dated.....has been deposited

in \_\_\_\_\_ (Name  
of Bank with Address).

16. That all the documents submitted by me are true & genuine & if any documents submitted by me are proved to be false at any stage, I shall be held responsible & my registration may be cancelled at any time & I may be prosecuted as per Law.

DEPONENT

Verification:

Verified that the above statement of mine is true & correct to the best of my knowledge & nothing has been concealed there in.

DEPONENT

DATED:

PLACE

I know the deponent personally and he has signed in my presence.