

ASSOCIATION OF TRAVEL AGENTS OF BANGLADESH

Sattara Center (15th Floor), 30/A Naya Paltan, VIP Road, Dhaka-1000, Bangladesh.

Tel: +88 02 9332728, 8332712, Cell: 01882088749 Email: atab@citech.net, Web: www.atab.org.bd One copy Passport size Photography

Application Form for ID Card								
1. Name of Applicant								
2.	Designation			Date of	Birth		Blood Group	
3.	Agency Name	& Address			•			
4.	Tell		Cell			Fax		
5.	Email				Website			
6.	TIN No							
Papers to be submitted.								
i.								
11. iii.	DI - CEDIC CC							
iv.								
Signature with Saal					Specimen Signature of Applicant (Middle Spece)			
Signature with Seal Specimen Signature of Applicant (Middle Space)								
FOR ATAB OFFICE USE ONLY (ACCOUNTS)								
	. No.				MR. Dat	te:		
ID '	Validity Date:	0 1				*		
	Seal			Signature (Accounts)				
NID								
NB: 1. Proprietor / Managing Director / Director / Managing Partner / Partner are only entitled to get ATAB Identity								
Card.								
		· · · · · · · · · · · · · · · · · · ·	TAD f T 1 200.00	.1 1 1 1	1 1			
2. Cash / Pay order in favor of ATAB for Taka 300.00 should be enclosed								