

Date:

The Managing Director,  
Telangana State Film Development Corporation Limited.,  
# 10-2-1, FDC Complex,  
A.C. Guards, Hyderabad – 500 028.

Sir,

I request you to certify to our licensing authority that I have completed necessary formalities for obtaining regular supply of approved films. I agree to enter into contract with you as per your standard terms and conditions. In case of any default on my part, in observing the conditions of the contract/instructions, you may withdraw the certificate issued. The particulars of my cinema theatre are furnished below:

1. Name of the Licensee :
2. Proprietor/Managing Partner/Manager/  
Managing Director/General Manager :
3. Name of the Cinema Theatre :
4. Theatre Address for  
Correspondence :
  - A). Permanent address of Licensee  
for Correspondence :
  - B). Theatre Telephone No. :
  - C). Cell No. (Licensee/Manager) :
  - D). Email Id :
5. Population of city/town/village :



6. Type of Cinema Theatre -Permanent/  
Semi-permanent/Touring/Temporary :
7. Size of films screened – 35MM/70MM :
8. Digital Providers Name :
9. Authority who grant License :
10. Authority who grant renewals of Licensee:
11. Particulars of other Cinema Theatre :  
controlled by Licensee
12. Particulars of proposed rates of admission and seating capacity of the Cinema Theatre

S.No.	Name of Class	No. of Seats	Rates of Admission	Maintenance Charges
1.				
2.				
3.				
4.				
5.				

13. Total Seating Capacity :
14. Gross Collection per show :
15. Total number of shows in a week:
16. Period for which certificate is required :

Signature of the Licensee  
with stamp