Government of Goa
Department of Tourism
1st Floor, Paryatan Bhavan, Patto - Panaji
Goa - 403001

APPLICATION FORM FOR PLACEMENT OF DECK BEDS AND UMBRELLAS ON BEACHES OF GOA

To,
 The Prescribed Authority,

☐ North Zone Office,
1st Floor, Paryatan Bhavan, Patto - Panaji
Goa - 403001

☐ South Zone Office,
Block No.43, Ground Floor,
Mathany Saldanha Administrative Complex,
Margao Goa - 403601

☐ Photo of Applicant or Authorized Signatory

Sir,

I/We request to issue me permission for placement of Deck beds and Umbrellas/chairs, tables on beaches of Goa.
1.Permission from period of 01ˢᵗ October 2024 to 30th May 2025 ☐ 2. Permission from period of 01st October 2024 to 30th September 2025. ☐

The particulars are as under:

Dated: | D | D | M | M | Y | Y | Y | Y |

☐ New permission   ☐ Renewal   Existing NOC No | | | | | | | | | |

1 Applicant Type: ☐ Private Restaurant Owner   ☐ Hoteliers   ☐ Private Shack Owner

2 Registration No of N.O.C issued by local body **(In case of Restaurant owner)** | | | | | | | | | | |

3 Registration No of License issued by tourism department **(Incase of Private Shack owner/Hotelier).** | | | | | | | | | |

4 Operated By: ☐ Company ☐ Individual   Nationality: | | | | | | | | | | | | |

5 Details of the Individual/Company with full address intending to place deckbeds & umbrella and chairs & tables.(In Case of Company provide name and address of the company)

NAME of Company/Person:

AREA

VILLAGE/TOWN

TALUKA   PINCODE

PAN CARD

MOBILE

EMAIL

6 Name of the proprietors (In case of company, authorized signatory, In case partners name of all the partners)

SR NO	NAME	MOBILE NO	AADHAAR NO	PANCARD NO

7 Village   Taluka

8 Beach Stretch where Deckbeds & Umbrellas / Chairs & tables to be placed.

9. a)Number of Deckbeds & Umbrellas:

b) Number of Tables/ Chairs

10 Applicant permanent resident of Goa   ☐ YES   ☐ NO

11 Details of Hotel / Guest House

NAME OF THE HOTEL*

ADDRESS*

12 Name of Restaurant

Address*

13 Name of Private Shack

Address*

Place: _____   Date: _____

Signature of the applicant

Enclosures:- Tick mark necessary documents enclosed with the application form		
Document Type		
1 Proof of Full Address (if not mentioned on Aadhaar) (In case of new permission/renewal)*	Document No.	D D M M Y Y Y Y
	Issue Date :	D D M M Y Y Y Y
2 Affidavit	Document No.	
	Issue Date :	D D M M Y Y Y Y
3 PAN Card	Document No.	
	Issue Date :	D D M M Y Y Y Y
4 GST Registration No. (if Available)	Document No.	
	Issue Date :	
5 License Number **(In case of Hotel/ Private Shack)**	Document No.	
	Issue Date :	
Other Document (Specify name and other Details in the Space provided below)		
1	Document No.	
	Validity Date:	D D M M Y Y Y Y
	Issue Date :	D D M M Y Y Y Y
2	Document No.	
	Validity Date:	D D M M Y Y Y Y
	Issue Date :	D D M M Y Y Y Y
3	Document No.	
	Validity Date:	D D M M Y Y Y Y
	Issue Date :	D D M M Y Y Y Y

Note:
1) ALL FIELDS MARKED WITH *(ASTERIX), ARE COMPULSORY.