AFFIDAVIT

In the court of ld. Judicial magistrate (1st Class): ……

I, …….. (Name Registered with which) son/daughter of …… (Name Registered with which) residing at …… ……, D.O.B. ……., occupation Pharmacist do hereby solemnly affirm and declare as follows:

1. That I am a Registered Pharmacist bearing Registration No. ……
2. That I am an Indian citizen.
3. That I have applied for **renewal of my registration with the West Bengal Pharmacy Council**.
4. That all original documents, including **Voter ID Card/Aadhaar Card/Passport**, **Registration Certificate and Last Renewal Certificate**, submitted by me through the online application process in connection with my renewal application, are genuine, valid, and correct.
5. That none of the documents or certificates submitted by me has been forged, fabricated, altered, or tampered with in any manner whatsoever.
6. That I shall be fully responsible for the genuineness, validity, and authenticity of all documents, certificates, declarations, and information submitted by me in connection with my renewal application.
7. That, in the event any document, certificate, declaration, or information submitted by me is found to be false, forged, fabricated, altered, tampered with, or otherwise incorrect, I shall be liable for such appropriate action as may be taken against me in accordance with law.

NOTE: For first-time renewal, do not mention the Last Renewal Certificate, because there was no previous renewal. Mention only the Registration Certificate and other applicable original documents.