



Form C
Government of West Bengal
Department of Health and Family Welfare
Food Safety and Standards Authority of India
License under FSS Act, 2006



GOVERNMENT OF WEST BENGAL
DEPARTMENT OF HEALTH & FAMILY WELFARE

अनुज्ञप्ति संख्या / License Number: **12823011000078**



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| 1. Name & Registered Office address of Licensee / अनुज्ञप्तिधारी के पंजीकृत कार्यालय का नाम और पता: | SHYLO QUIK WELLNESS PRIVATE LIMITED
HOUSE NO. 21, STATION ROAD, SANTI KANAN,
BINAY SARKAR-ER GALI, NEAR POST OFFICE,
P.O.& P.S , BERHAMPORE, Murshidabad , West Bengal-742101 |
| 2. Address of Authorized Premises / प्राधिकृत परिसरो का पता: | HOUSE NO. 21, STATION ROAD, SANTI KANAN,
BINAY SARKAR-ER GALI, NEAR POST OFFICE,
P.O.& P.S , BERHAMPORE, BERHAMPORE,
Murshidabad , West Bengal-742101 |
| 3. Kind of Business / कारोबार का प्रकार: | Trade/Retail - Retailer
Trade/Retail - Distributor
Trade/Retail - Wholesaler |
| 4. Dairy Business Details / डेयरी कारोबार विवरण हेतु : | No |
| 5. Category of License / अनुज्ञप्ति का वर्ग: | State License |

This license is granted under and is subject to the provisions of FSS Act, 2006 all of which must be complied with by the licensee. / यह अनुज्ञप्ति खाद्य संरक्षा और मानक अधिनियम, 2006 के अधीन अनुदत्त की गई और वह अधिनियम के उपबंधों के अध्यादीन है जिनका अनुज्ञप्तिधारी द्वारा अवश्य पालन किया जाना चाहिए.

Place / स्थान: Murshidabad

Designated Officer

Issued On / दिनांक: 03-04-2024 (Renewal License)

Valid Upto: / वैधता: 03-04-2025 (For details, refer Annexure)

Annexures:

1. [Product Annexure](#)
2. [Validity Annexure](#)
3. [Non-Form C Annexure](#)
4. [Conditions Of License](#)