

No.J-23020/1/2025 -E&N
GOVERNMENT OF MIZORAM
EXCISE & NARCOTICS DEPARTMENT
MIZORAM SECRETARIAT, MINECO BUILDING-2, BASEMENT-II

Dated Aizawl, the 27th November, 2025

NOTIFICATION

No.J-23020/1/2025-E&N : In exercise of the powers conferred by section 45 B(1) of the Mizoram Liquor Prohibition (Amendment) Act, 2025, Rule 15(3) and Rule 45(1)(2)(3) of the Mizoram Liquor (Prohibition) Rules, 2025 and in the interest of the public, the Governor of Mizoram is pleased to notify the following Forms for official use for implementation of the said Mizoram Liquor Prohibition Act and Mizoram Liquor Prohibition Rules within the State.

Forms	Description
MLPR XVII (See rule 45(1)(2)(3))	Application form for possession and consumption of Indian-Made Foreign Liquor for dignitaries and tourists.
FORM MLPR XVIII (See rule 15 (3))	Licence to fortified wine/local fruit beer
FORM MLPA XIII (See section 45 B(1))	Application for possession and consumption of IMFL by private individual on health ground

Receipt No. 2078
Date 27.11.25
Commissionerate of Excise & Narcotics
Mizoram : Aizawl

Sd/- VINOD P.KAVLE

Commissioner & Secretary to the Govt. of Mizoram,
Excise & Narcotics Department
Dated Aizawl, the 27th November, 2025

Memo No.J-23020/1/2025-E&N

Copy to:

1. Secretary to Governor, Mizoram.
2. P.S to Chief Minister, Mizoram, Aizawl.
3. P.S to Speaker/Deputy Speaker, Mizoram
4. P.S to all Ministers/ Ministers of State, Mizoram.
5. P.S to Leader of Opposition, Mizoram
6. P.S to Vice Chairman, State Planning Board/ Deputy Chief Whip, Mizoram
7. Sr. P.P.S to Chief Secretary, Government of Mizoram
8. All Principal Secretaries/Commissioners/Secretaries, Government of Mizoram
9. Secretary, Mizoram Public Service Commission.
10. All Administrative Departments, Government of Mizoram

Handwritten notes:
27/11
for
27/11
Nagar

11. All Heads of Department, Government of Mizoram
12. Chief Controller of Accounts; Accounts & Treasuries Mizoram, Aizawl.
13. Controller, Printing & Stationeries Department with 6 (six) spare copies for publication in the Official Gazette.
14. Commissioner of Excise & Narcotics Department, Mizoram, Aizawl.
15. All Deputy Commissioners, Mizoram
16. All Assistant Commissioner, Excise & Narcotics Department.
17. Guard File.


(ZOHMINGTHANGI FANAI)

Under Secretary to the Govt. of Mizoram
Excise & Narcotics Department

FORM- MLPR XVII
(See rule 45(1)(2)(3))

**APPLICATION FORM FOR POSSESSION AND CONSUMPTION OF INDIAN-MADE FOREIGN
LIQUOR FOR DIGNITARIES AND TOURISTS**

Passport size
photograph of
permit holder

1. Name, and address of : _____
of the applicant _____
2. Age : _____
3. Father's name : _____
4. Profession / Official designation : _____
5. Country of origin/Nationality : _____
6. Purpose of visit to Mizoram : _____
7. Period of stay in Mizoram : _____
8. Name of Sponsor and address : _____

9. Address in Mizoram : _____
10. Tourist Visa Number : _____
11. Passport number : _____

12. Requirement of Liquor :-

- (1) Rum(in bottle)
- (2) Whisky - do -
- (3) Brandy - do -
- (4) Gin - do -
- (5) Wine - do -
- (6) Beer - do -

*Signature of the applicant
with date*

FORM MLPR XVIII

[See rule 15(3)]

Licence to fortified wine/local fruit beer

OFFICE ORDER

Permission is hereby issued to _____ for fortification of wine / local fruit beer. _____ litre of Extra Neutral Spirit (ENA), Rectified Spirit from the Store is hereby issue to be use in the fortification of wine/local fruit beer in Tank No. _____ Batch No _____

Attention is hereby drawn to the licensee that details and correct entry shall be made in FORM MLPR – IV and FORM MLPR – II of MLP Rules 2025.

Seal and Signature of the Competent Authority

FORM MLPA XIII

[See u/s 45 B (1)]

***Application for possession and consumption of IMFL by
Private individual on health ground :***

1. Name of applicant : _____
2. Father's name : _____
3. Address : _____
4. Age : _____
5. Profession : _____
6. Name & address of Doctor : _____
Issuing prescription
7. Diagnosis : _____
8. Dosage prescribed for a day : _____
9. Validity required for a permit : _____

Dt :

Signature of applicant

- NB :-
- i) *Passport-size photo 2(two) copies should be enclosed*
 - ii) *Prescription should be countersigned by not below the rank of D.C.M. & H.O.*