GOVERNMENT OF NCT OF DELHI PUBLIC WORKS DEPARTMENT (ALLOTMENT BRANCH) 5TH LEVEL "B" WING DELHI SECRETARIAT: NEW DELHI

LIEN HOLDER FORM FOR GENERAL POOL RESIDENTIAL ACCOMMODATION

Date of Receipt (To be filled by J.E./A.E., PWD)

Recent Family photograph

TO BE FILLED UP BY THE APPLICANT

Please follow the instructions given at the end of this Form before filling this form.

Registration Number (To be filed up by the Applicant if already registered)			(To be filed up the applicant if available)						Group of Service (Please Tick $\sqrt{\ }$)						
										Α		В	С	D	
										-	-				
1.	Service to which the Office	cer / Official b	elongs.												
2.	Full Name of Allottee	Shri / Sm	t. / Ms.												
3.	Name of Father / Spouse														
4.	Designation														
5.	Details of Department	(i) At the	time of Alle	otment											
J.	with office Address	(ii) Present Department													
			(iii) Name of Departments												
		where wo	where worked after allotment,												
		with peri	od.												
	8				1										
6.	Are you working in an el	gible office o	f Govt. of N	CT of Dell	ni										
Yes /															
If No	, then the Department/Orga tiree, PPO No. by which pe	nization wher	e working	nd last off											
	her quarter is on Interpool 1					ails									
7.	Service Status, whether P			r yes, then	tile det	4115									
8.	a) Pay Band (Rs	b) Present Basic Pay (Rs.)					c) Present Grade Pay (Rs.)								
	, , , ,		(Pay Band+ Grade I				ade Pay)								
9.	Date of Birth									_					1
10.	a) Date from which cont	inuously ampl	oved in Gov	ut Sarvice											
10.	a) Date from which cont	indously empl	- Idyeu iii Go	vt. Service			Т			T					1
				1) 70			0.1				1 .		\ D ::	CD	
11.	a) Are you on deputat		b) If yes, the name of the Departmen					nt and	it and date (c)			Duration of Deputation (in Year)			
	Yes	No			-								-	ili i cai)	
	1 05	110						-							
12.	Particulars of the Gove	ernment acco	mmodatio	ns allotte	d till	now	includ	ling th	e nrese	ent one					
12.		Block House No.			Allotment Category			Date of Occupation			Date of Vacation				
	110use Type	Locality	DIOCK	House No.		(General/SC,ST/Medical			cal	Date of Occupation			Date of vacation		
							etc.)			diedi					
							(10.)								

. Wł	hether the allotte	e/ spouse/ depe	ndent children	ithin the juriso	diction of	f Yes		No			
	cal Municipality	or any adjoinir	ng municipality	y D. I. di	1.1	Ad	Address of House				
	yes, please give tails	e Owner's Name			Relationship with Applicant			Address of House			
	Retable Value of House per ann				nnum, if any Mor			thly Rental Income, if any			
. Pe	rmanent / Home	Town Address	(if any)								
one			Fax		Office Phon	e No.					
obile			•		E-mail						
	It is certified th	at the above pa		claration by the							
	Date:			Signature of th	ne Applicant:						
			TO BE FII	LLED IN BY T		RDING	OFFICE	Data			
	Office ID		ent No.			Date					
((10-digit ID) Office										
	Office								Central		
					lovernment				Government		
	tegory of Office ase tick (√)	Department	Attached Office	Subordinate Office	Autonom Body	ous	Statutory Body	Other			
Nan	me of Applicant										
	Designation										
1. 2. 3. 4. 5. 6.	as per serv Certified the Certified accommod	ice records. nat the marital stathat the applical lation.	atus of the applic	cant is	office and ha	(singles not be on.	le/widow/di en debarred	ivorcee / marri from allotme	ed). nt of General Po		
	Certified t	hat all the inform	ation mentioned	in the application	are verified if	om the rec	00140		ι.		
	Certified t	hat all the inform	ation mentioned	in the application							
	Certified t	hat all the inform	ation mentioned	in the appreciation		with Da	te:				
	Certified t	Office Sea		in the apprearion	Signature Name (in Designation	with Da	te:				
	Certified t			in the approach	Signature Name (in	with Da	te:				

. . .

INSTRUCTIONS

Please fill up the form in BLOCK LETTERS only. 1.

Fill dates as day (01-31), month (01-12) & year (2009) in the format DD-MM-YYYY. 2.

Please tick ($\sqrt{}$) wherever required to do so. 3.

Pools have been coded as follows: 4. GP: General Pool SG: Secretary to Govt. of India CM: Chairman / Member SC: SC Pool LS: Ladies Single Pool TN: Tenure Pool (Non-AIS) ST: ST Pool LM: Ladies Married Pool TP: Tenure Pool SE: Secretary equivalent

Hostel (Transit accommodation) has been coded as follows: 5.

SS: Single Suite without kitchen SK: Single Suite with kitchen

Please ensure that the application is complete in all respect, signed by the applicant and forwarded and stamped by the 6. Forwarding Officer of your Office.

Forwarding Officer should mention the newly allotted 10 digit Office ID only, and not the old Department code given earlier 7. by this Directorate.

- The completed application must be submitted by the applicant in person or through his / her representative at the Information 8. Facilitation Centre of the Delhi Government (Allotment Branch) located at 5th Floor, B-Wing, Delhi Secretariat, New Delhi-110002.
- Registration number and Allottee Account Number (AAN) must be filed up if already allotted by this Directorate. 9.

All India Service Officers on Central Deputation must fill up the details at para-14. 10.

Hostel is a transit accommodation and if you are allotted Hostel accommodation, you must also apply for regular 11. accommodation.