**Puraseva Centre**

**(Citizen Service Centre)**

**User Manual**

**O/o Director of**

**Municipal Administration,**

**Andhra Pradesh,**

**Guntur.**

**GOVERNMENT OF ANDHRA PRADESH**

**MUNICIPAL ADMINISTRATION DEPARTMENT**

 O/o. Director of Municipal

 Administration., Gorantla,

 Guntur

**Roc. No. /2016/K3** **Dt. -01-2017**

**C I R C U L A R**

Sub: Citizen Services – eMunicipal ERP – Implementing Citizen Service Centres (Puraseva Centres) under eMunicipal ERP – Certain instructions – Issued.

Ref: G.O. Ms. No.198 MA & UD (R) Dept., Dt. 15.05.2013 of MA&UD Dept.,

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The attention of all the Commissioners of Urban Local Bodies in the State are invited to the reference cited, wherein Government issued orders for establishment of Citizen Service Centres (CSCs) in all the ULBs of the State for implementation of Citizen Charter in providing municipal services to the community in an efficient manner within a reasonable time limit. Of late, it has come to the notice of the undersigned that the Citizen Service Centres (CSCs) are not functioning properly and thereby the service deliverance is not proper. With a view to rejuvenate, to bridge these gaps and also to develop robust middle ware and back-end office processes, it is decided to expand and deepen the operations of Citizen Service Centres (CSCs) in ULBs, by introducing e-services.

 In the first instance, it is proposed to run the Citizen Service Centres (CSCs) in ULBs, with their own staff (or) outsourcing staff available within their Municipality.

 Therefore, all the Municipal Commissioners are directed to rejuvenate/re-establish these CSCs as per the following instructions, immediately. The objectives, nature of services, SOP and logistics in the CSC and other guidelines in the implementation process, are mentioned below:-

**Objectives:-**

The objectives of CSCs are:-

1. To act as single window mechanism to cater to most of the citizen’s service needs. These services could be relating to Public Grievances and Municipal Services.
2. To provide the services in a professional and customer friendly manner, by introducing e-services.
3. To establish, separate and exclusive citizen-interface processes to receive, attend and monitor citizen services including the delivery of the same through single window.
4. The Citizen Service Centre **hereafter called as (Puraseva Centres)** and it will handle the TWO major components as described below:

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1. Public Grievances
2. Municipal Services

Citizen Service Centre

**II) Municipal Services**

**I) Public Grievances**

 An integrated Application with ERP System in this regard is developed by e-governments team and will be made available in the **Puraseva Centres** shortly. When citizen approaches the **Puraseva Centres** to register a Grievance/Service, the Operator of the Counter has to select any one of the category in the ERP Screen, and initiate the service provision.

# I) Public Grievances:

 Whenever the Citizen approaches the Puraseva Centre Counter with a grievance, then the operator of the counter will choose the “Grievance” Option from the drop down list. This will take him to the relevant page where he can create a grievance. After that, an acknowledgement screen will pop up along with CRN number (Complaint Registration Number). This can be printed and handed over to the citizen.

 Upon successful registration, the citizen and grass root level functionary will get the message (SMS) with CRN Number. Once the SMS reaches the Functionary he shall act as per the SLA. When complaint is redressed, the citizen gets a sms stating that his complaint is redressed. In case of unhappy redressal the citizen can reopen the grievance.

 Citizen can quote CRN number or acknowledgement no for the future reference to know the status of the complaint / grievance.

 The following 91 types of grievances are available in the PGR Module. If any of the grievance is not attended by the field functionary, within the SLA period as mentioned below, the same will automatically be escalated to his next level of higher authority as per the work flow configured in the ULB system.

**Grievance-wise SLA Period:-**

|  |  |  |
| --- | --- | --- |
| S. No. | Service Name | Total No. of days (SLA) |
| 1 | Non Burning of Street Lights | 1 |
| 2 | Electric Shock due to street light | 1 |
| 3 | Pot hole fill up/Repairs to the damage surface | 7 |
| 4 | Repairs to existing footpath | 7 |
| 5 | Removal of shops in the footpath | 3 |
| 6 | Repairs to the SWD | 7 |
| 7 | Desilting of Drain | 1 |
| 8 | Obstruction of water flow | 1 |
| 9 | Stagnation of water | 1 |
| 10 | Disposal of removed silt on the Road | 1 |
| 11 | Removal of fallen trees | 1 |
| 12 | Unauthorised tree Cutting | 1 |
| 13 | Parking Issue | 1 |
| 14 | Stoppage of Civil Works | 2 |
| 15 | Poor quality of work | 1 |
| 16 | Over head cable Wires running in Hapazard manner | 1 |
| 17 | Removal of garbage | 1 |
| 18 | Over flowing of garbage bins | 1 |
| 19 | Shifting of garbage bin | 1 |
| 20 | Provision of garbage bin | 1 |
| 21 | Request for Anti Larval operations - to prevent Dengue /Malaria etc | 2 |
| 22 | Mosquito menace | 2 |
| 23 | Dog menace | 1 |
| 24 | Burning of garbage | 1 |
| 25 | Unsanitary conditions on the road | 1 |
| 26 | Unhygeinic conditions because of Slaughter House | 1 |
| 27 | Unauthorised sale of meat and meat product | 1 |
| 28 | Stray cattle | 1 |
| 29 | Illegal slaughtering | 1 |
| 30 | Stray Pigs | 1 |
| 31 | Death of Stray Animals | ½ day |
| 32 | Unhygienic and improper transport of meat and livestock | ½ day |
| 33 | Food adulteration: Road Side Eateries | 1 |
| 34 | Issues relating to Vacant lands | 3 |
| 35 | New Property Tax Fixation | 5 |
| 36 | New Vacant Land tax Fixation | 5 |
| 37 | Property Tax Bifurcation | 5 |
| 38 | Revision Petition on Property Tax | 30 |
| 39 | Transfer of Title of property | 7 |
| 40 | Vacancy Remission | 30 |
| 41 | Issues relating to Advertisement Boards | 7 |
| 42 | Hanging of Streetlight Wires | 1 |
| 43 | Unauthorised Road cutting | 1 |
| 44 | Complaints regarding function Halls | 1 |
| 45 | Unclaimed Dead Bodies | ½ day |
| 46 | Double Assessments | 7 |
| 47 | Replacement of Cover for Manholes | 7 |
| 48 | Unauthorised / Illegal construction | 15 |
| 49 | Violation of DCR/Building bye laws | 15 |
| 50 | Encroachment on the public property | 2 |
| 50 | Illegal draining of sewage to SWD/Open site | 2 |
| 52 | Misuse of Community Hall | 1 |
| 53 | Maintenance of Parks | 7 |
| 54 | Maintenance of Playground | 7 |
| 55 | Repairs to Flyovers/ bridges/ Culverts | 7 |
| 56 | Repairs to Centre Median | 7 |
| 57 | Repairs to Traffic Island | 7 |
| 58 | Absenteesim of sweepers | 1 |
| 59 | Absenteesim of door to door garbage collector | 1 |
| 60 | Removal of Debris | 3 |
| 61 | Bio Medical waste/Health hazard waste removal | 1 |
| 62 | Obstruction of road by Trees branches | 1 |
| 63 | Complaints regarding burial ground | 1 |
| 64 | Complaints regarding public toilets | 1 |
| 65 | Complaints regarding restaurants / Function halls | 1 |
| 66 | Complaints regarding Dispensary  | 1 |
| 67 | Improper Sweeping | 1 |
| 68 | Broken Bin | 1 |
| 69 | Garbage lorry with out Net | 1 |
| 70 | Transfer Station Smell | 1 |
| 71 | Spilling of Garbage from lorry | 1 |
| 72 | Complaints related to property tax  | 5 |
| 73 | Complaints related to issue of Trade License  | 5 |
| 74 | Complaints regarding Voter list | 6 |
| 75 | Inclusion, delection of correction in the Voter list | 6 |
| 76 | Complaints regarding Schools | 3 |
| 77 | Unauthorised Advt. Boards | 3 |
| 78 | Fevers - Dengue/Malaria/ Gastro-enteritis | 2 |
| 79 | Vaddi Leni Runalu | 3 |
| 80 | Non Receipt of Pensions (Disabled/ Old age/ Widow) | 3 |
| 81 | Sanction of Gas Connection Under Deepam Scheme | 7 |
| 82 | Complaints regarding all Sanctioned loans | 7 |
| 83 | Contamination of Water | 1 |
| 84 | Issues Related to Drinking Water Supply | 2 |
| 85 | Repair Bore wells | 2 |
| 86 | Water pipe leakage | 2 |
| 87 | UGD Over Flow  | 1 |
| 88 | Non Sanction of Bank Linkage to the group | 7 |
| 89 | Provision of Placement after Training under ESTP | 7 |
| 90 | Disputes in SSG / SLF / TLF | 7 |
| 91 | Errors in demand Notice | 7 |

II) Municipal Services:

 Similalrly, whenever the Citizen approaches the Puraseva Centre Counter for any Municipal Services, then the operator of the counter will choose the appropriate service option from the drop down list. This will take him to the specific service creation screen.

 After that he is supposed to enter the application details and scan the relevant documents and issue acknowledgement which will be generated in duplicate from the system with acknowledgement number for future reference.

1. **Services through ERP:**

 Applications on the following 36 Municipal Services under **ERP system** can be submitted by the Citizens in the Puraseva Centres;-

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SL No**  | **Sec.** | **Municipal Service** | **Category** |  | **SL No**  | **Sec.** | **Municipal Service** | **Category** |
| 1 | Rev. | Property Tax | New Assessment | 19 | Rev. | Land Tax | Conversion of House Tax to Land Tax (VLT) |
| 2 | Rev. | Property Tax | Addition / Alteration | 20 | Rev. | Land Tax | Collection of Land Tax (VLT) |
| 3 | Rev. | Property Tax | Revision Petition | 21 | Engg | Water Charges Management | New Connection |
| 4 | Rev. | Property Tax | General Revision Petition | 22 | Engg | Water Charges Management | Additional Connection |
| 5 | Rev. | Property Tax | Title Transfer - Full Transfer (Registration not done)  | 23 | Engg | Water Charges Management | Change of Usage |
| 6 | Rev. | Property Tax | Title Transfer - Registration Already Done | 24 | Engg | Water Charges Management | Closure of connection |
| 7 | Rev. | Property Tax | Mutation / Tittle Transfer Fee | 25 | Engg | Water Charges Management | Reconnection |
| 8 | Rev. | Property Tax | Tax Exemption  | 26 | Rev. | Water Charges Management | Collection of Water Charges |
| 9 | Rev. | Property Tax | Tax Exemption ( Cancellation of Exemption ) | 27 | PH | Trade License | New Trade |
| 10 | Rev. | Property Tax | Conversion of VLT to House Tax | 28 | PH | Trade License | Renewal of Trade |
| 11 | Rev. | Property Tax | Sub Division ( Bifurcation ) | 29 | PH | Trade License | Closure of Trade |
| 12 | Rev. | Property Tax | Vacancy Remission | 30 | PH | Trade License | Trade Title Change |
| 13 | Rev. | Property tax | Amalgamation | 31 | PH | Trade License | Collection of Trade Lic.Fee. |
| 14 | Rev. | Property Tax | Demolition | 32 | PH | Marriage Registration | New Registration |
| 15 | Rev. | Property Tax | Ownership Certificate | 33 | T.P | Advertisement | New Advertisement |
| 16 | Rev. | Property Tax | Valuation Certificate | 34 | T.P | Advertisement | Renewal of Advertisement |
| 17 | Rev. | Property Tax | Collection of Property tax | 35 | T.P | Advertisement | Closure of Advertisement |
| 18 | Rev. | Land Tax | Vacant Land New Assessment | 36 | T.P | Advertisement | Collection of Advertisement Tax |

 After that, the Operator of the Counter, shall forward the application to the Jr. Asst/Sr.Asst. of the concerned section, from whom the work-flow will begins under **ERP** and the service shall be delivered to the Citizen as per the following SLA. Citizen gets sms at various levels.

1. **Services through CRS:**

 After logged into <http://crsorgi.gov.in> portal, by the Puraseva Counter Operator, he can:-

* Report a Birth / Death to the Registrar and provide digital acknowledgement to the citizen.
* They can even receive a delayed event application from the citizen, generate payment receipt and provide a digital acknowledgement after reporting the event to the registrar.
* In both the cases, it is the responsibility of the registrar to verify the correctness in the events reported, and then approve / reject the event based on the facts of the case submitted / received.
* Receive Add Child Name requests from the Citizen, digitize the same in the CRS portal duly verifying the proofs regarding the claim of authority to include the name and can provide a manual acknowledgement stating the time bound of the service delivery, payment details, etc.,.
* Receive Add Corrections / Modification to the birth events request from the citizen, digitize the same in CRS portal based on the facts in the proofs / documents submitted and can provide a manual acknowledgement stating the time bound of the service delivery, payment details, etc.,.
* In the above cases, based on the facts of the case submitted, attaining satisfaction over the supporting documents, the registrar may accept / reject the application submitted.
* Receive applications from the citizen regarding death corrections and forward the same to the registrar physically and provide a manual acknowledgement to the citizen, as add corrections to the death events provision is not available with the DEO.
* Receive application for Birth / Death search, if the event is registered, he / she can issue certificate from the Counter itself duly collecting the amount from the citizen.
* Non - Availability birth / death cannot be issued from the DEO login, but search can be made, and if no record pertaining to the search criteria available, a manual request may be done with the registrar and certificate can be received from the registrar. For this purpose, a manual acknowledgement may be issued to the citizen pertaining to this request from the DEO.

As a whole, the following services pertains to Birth & Death registration and issue of Certificates under **CRS** **system,** can be submitted by the Citizens in the Puraseva Centres:-

|  |  |
| --- | --- |
| **Section** | **Municipal Service** |
| Public Health (Vital Statistics) | I. Issuance of Birth Certificate  |
|  | a) in case of digitization of records (already registered) |
|  | b) in case of other than (a) (to be registered) |
|  | Child name inclusion in Birth Certificate |
|  | Name correction in Birth Certificate  |
|  | Non-availability certificate for Birth Entry |
|  | II.Issuance of death certificate  |
|  | a) in case of digitization of records (already registered) |
|  | b) in case of other than (a) (to be registered) |
|  | Name correction in Death Certificate  |
|  | Non-availability certificate for death entry |

1. **Services through e-Office:**

 Also the following services pertains to various sections of the ULB, which are being run manually can be submitted by the Citizens in the Puraseva Centres. These applications can be processed through **e-office** system, by giving an acknowledgement to the citizen, which is available in e-office.

|  |  |
| --- | --- |
| **Section** | **Municipal Service** |
| **Revenue (or) Town Planning** | Temporary Use of Parks/Community Halls/Play ground  |
| **Engineering** | Road cutting permission for individuals  |
| **Public Health** | Sanitation Certificate  |
| **Public Health** | Registration of Pet Dogs  |
| **Town Planning** | Occupancy Certificate  |
| **Town Planning** | Certified copy of Building Permission  |
| **Town Planning**  | Land use certificate as per Master Plan |
| **All Sections** | Other Services if any , which are delivering manually |

**SLA period of various Municipal Services at each level under ERP:**

 The following Services have to be delivered through the CSCs within the SLA (or) time line given below [excluding public holidays]:-

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S. No. | Service Name | Total No. of days (SLA) | SLA for 1st level emp. | SLA for 2nd level emp. | SLA for 3rd level emp. | SLA for 4th level emp. | Zonal Commissioner, Dy. Commr (or)Commissioner |
|  | **I. Revenue Section** |  |  |  |  |  |  |
|  | 1. **Property Tax**
 |  |  |  |  |  |  |
| 1. | New Assessment | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 2. | Addition / Alteration | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 3. | Revision Petition | 30 days | 6 days | 6 days | 6 days | 6 days | 6 days |
| 4. | General Revision Petition | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 5. | Title Transfer – Full Transfer (Registration not done)  |  3 days | 1 day | ½ day | ½ day | ½ day | ½ day |
| 6. | Title Transfer – Registration Already Done | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 7. | Mutation / Title Transfer Fee | - | - | - | - | - | - |
| 8. | Tax Exemption  | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 9 | Tax Exemption ( Cancellation of Exemption) | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 10. | Conversion of VLT to House Tax | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 11. | Sub Division ( Bifurcation ) | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 12 | Vacancy Remission | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 13 | Amalgamation | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 14. | Demolition | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 15. | Ownership Certificate |  3 days | 1 day | ½ day | ½ day | ½ day | ½ day |
| 16. | Valuation Certificate |  3 days | 1 day | ½ day | ½ day | ½ day | ½ day |
| 17. | Collection of Property tax | - | - | - | - | - | - |
|  | 1. **Land Tax**
 |  |  |  |  |  |  |
| 18. | Vacant Land New Assessment | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 19. | Conversion of House Tax to Land Tax (VLT) | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 20. | Collection of Land Tax (VLT) | - | - | - | - | - | - |
|  | **II.Engineering Section** |  |  |  |  |  |  |
|  | **Water Taps & Charges** |  |  |  |  |  |  |
| 21. | New Connection | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 22. | Additional Connection | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 23. | Change of Usage | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 24. | Closure of connection | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 25. | Reconnection | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 26. | Collection of Water Charges | - | - | - | - | - | - |
|  | **III.Public Health Section** |  |  |  |  |  |  |
|  | **Trade License** |  |  |  |  |  |  |
| 27. | New Trade | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 28 | Renewal of Trade | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 29. | Closure of Trade | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 30. | Trade Title Change | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 31. | Collection of Trade License Fee. | - | - | - | - | - | - |
| 32. | Marriage Registration | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
|  | **IV.Town Planning Section** |  |  |  |  |  |  |
|  | **Advertisement Tax** |  |  |  |  |  |  |
| 33. | New Advertisement | 15 days | 3 days | 3 days | 3 days | 3 days | 3 days |
| 34. | Renewal of Advertisement | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 35. | Closure of Advertisement | 7 days | 2 days | 2 days | 1 day | 1 day | 1 day |
| 36. | Collection of Advertisement Tax | - | - | - | - | - | - |

**Note:**

Wherever the 4th level employee is not there, his time lines may be availed by the 1st level employee. Similarly, wherever, 3rd and 4th level employees are not there, their time lines can be availed by the 1st and 2nd level employees. Also wherever the 3rd, 4th and 5th level employees are not there, their time lines, may be availed by the 1st level employee.

**SLA period of Birth & Death registration and issue of Certificates at each level under CRS:-**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Section** | **Municipal Service** | Total No. of days (SLA) | SLA for 1st level emp. | SLA for 2nd level emp. | SLA for 3rd level emp. | SLA for 4th level emp. | Zonal Commissioner, Dy. Commr (or)Commissioner |
| Public Health (Vital Statistics) | **I. Issuance of Birth Certificate**  |  |  |  |  |  |  |
|  | a) in case of digitization of records (already registered) | Across the Counter |  |  |  |  |  |
|  | b) in case of other than (a) (to be registered) | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | Child name inclusion in Birth Certificate | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | Name correction in Birth Certificate  | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | Non-availability certificate for Birth Entry | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | **II.Issuance of death certificate**  |  |  |  |  |  |  |
|  | a) in case of digitization of records (already registered) | Across the Counter |  |  |  |  |  |
|  | b) in case of other than (a) (to be registered) | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | Name correction in Death Certificate  | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |
|  | Non-availability certificate for death entry | 5 days | 1day` | 1 day | 1 day` | 1 day | 1 day |

**SLA period of Other services at each level which are delivering manually in the ULBs:-**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Section** | **Municipal Service** | Total No. of days (SLA) | SLA for 1st level emp. | SLA for 2nd level emp. | SLA for 3rd level emp. | SLA for 4th level emp. | Zonal Commissioner, Dy. Commr (or)Commissioner |
| **Revenue (or) Town Planning** | Temporary Use of Parks/Community Halls/Play ground  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Engineering** | Road cutting permission for individuals  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Public Health** | Sanitation Certificate  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Public Health** | Registration of Pet Dogs  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Town Planning** | Occupancy Certificate  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Town Planning** | Certified copy of Building Permission  | 5 | 1 | 1 | 1 | 1 | 1 |
| **Town Planning**  | Land use certificate as per Master Plan | 5 | 1 | 1 | 1 | 1 | 1 |
| **All Sections** | Other Services if any , which are delivering manually | 5 | 1 | 1 | 1 | 1 | 1 |

**Processing Charges applicable for the Services:-**

 It works unlike as “Mee-seva” center, where the services will be delivered to the citizens by collecting the processing charges as mentioned below:-

* No processing charges for registering Public grievances in the ERP System.
* Rs.35/- per application will be collected in respect of Municipal Services in the ERP System
* No processing charges for applications processed through e-office system at the time of initiating services. But once the services are processed and approved by the competent authority, then the specified amount will be collected through NTR Module of ERP system.
* In regard to Birth & Death services, the specified fee can be collected through CRS system, across the Counter.

**Standard Operating Procedures:-**

* PURASEVA Centre shall function during 9.00 AM to 6.00 PM in all working days.
* Citizen need not enter the sections of the Municipal Offices / Zonal Offices and make enquiries about their applications as a time frame is prescribed for each service
* Citizen who wish to avail the CSC services have to submit an application at the CSC duly enclosing the required documents
* The PURASEVA Centre operator after taking the application along with its enclosures, shall inform the Citizen the fee prescribed for delivery of the Service and outstanding Property Tax/ Water Charges if any, in respect of the services like Mutation, Trade License, Revision Petition for Property Tax, Additional Water Tap connection etc.,
* The PURASEVA Centre operator shall ensure that the applications are received in complete shape only. Income applications shall not be received, as they lead to delays and protracted correspondence, which is difficult to monitor.
* The PURASEVA Centre Operator shall ensure that the outstanding arrears of Property tax/Water Charges are paid by the applicant, while receiving application. If any such arrears are there, the applicant may be directed to clear off the same and submit application.
* After collection of the amount, he shall enter the complete application details in the relevant screen in the ERP system and shall forward the same to the concerned clerk who is dealing the services, by uploading the same along with it’s enclosures.
* After that, acknowledgement will be generated in duplicate from the ERP system which will indicate the date and time on which the citizen can obtain Permission/License/ Certificate/Order/Proceedings etc., from the Service Centre according to the mandated time frame. One copy of the same should be handed over to the Citizen and another is an internal copy which will also contain the employee to whom the application is being forwarded. Citizen will also be given access to get the Permission/License/Certificate/Order/Proceedings etc., through ULB portal, in respect of some services wherever practicable, apart from PURASEVA Centre
* The PURASEVA Centre Operator bunches the documents submitted by the citizen along with the internal copy of acknowledgement printout, with its enclosures and shall handover the same to the concerned functionary in the next day morning without fail.
* The application is forwarded to the concerned functionary’s Inbox and the application goes through its regular life cycle
* The delivery of services ie., issue of permission/Licenses/Certificates and Orders shall be issued from the PURASEVA Centre during 2.00 PM to 5.00 PM every day.

**Logistics and Infrastructure to be provided in the PURASEVA Centres-**

* The minimum number of counters in CSCs is to be assessed based on the size of the ULB as follows:-

|  |  |
| --- | --- |
| GVMC | One counter in each Zonal Offices and One counter at Head Office |
| VMC | One counter in each Circle Offices and One counter at Head Office |
| GMC | One counter in each Circle Offices and One counter at Head Office |
| Other Municipal Corporations | 3 Counters  |
| Selection , Special and First Grade Municipalities | 2 Counters |
| IInd, III rd and Nagar Panchayats | 1 Counter |

* The prescribed Application forms for each of the service are attached to this Circular and these shall be made available in the Puraseva Centres. Sufficient copies should be got printed locally.
* Application forms are to be issued free of cost.
* Computers with LAN facility along with Printers shall be made available in the Puraseva Centre as per requirement.
* High-end Scanners should be made available.
* Proper furniture (service counters, almarahs and chairs of good quality) shall be provided.
* Writing Desk and feedback box shall also be provided.
* Signage and display boards within the Centre which pertains to the Services offered along with SLA, Processing charges if any, shall be displayed at conspicuous places both in English and Telugu languages.

**Personnel in the Puraseva Centre:-**

* Puraseva Centre shall be manned by sufficient staff and their selection shall be based on qualifications, competences, disposition, temperament and attitude towards citizen services. Preferably, two DEO and one Collection Assistant (from the category of Bill Collector, Record Assistant, Junior Assistant etc.,) for each counter shall be made available.
* Service Counters, can be manned by trained outsourced personnel (or) Municipal employees, but cash collection shall only be manned by Municipal regular employees.

**Training:-**

* Induction Training shall be provided to the Puraseva Centre staff so that they are aware and alert to all municipal services and Public Grievance Redressal Module (PGR Module) and rules. Orientation training is to be given to the Officers and staff concerned in the section for prompt and timely attending of the services.
* Information handouts and citizen feedback forms with drop boxes are to be made available for citizen information. Drop boxes will be opened by the Municipal Manager once in a week and analyzed by the Commissioner.

**Publicity:-**

* Wide publicity has to be arranged duly informing that the applications should be submitted only through PURASEVA Centre /Mee-seva/Online and not directly to the ULB Officials. The acknowledgement to the applications shall be obtained and the applications submitted by the citizens can be tracked online or through the PuraSeva App.

**Layout:-**

* Five types of Layout Models are herewith attached with this circular for ready reference. Please select a model as per the space available in your office premises and establish the Puraseva Centre.

**Compensation for delay in service:-**

* As per G.O. cited, if the above timeframes fixed, is not adhered to, compensation is to be paid to the Applicant @ Rs. 50/- per day, towards loss of valuable time of the applicant, in case of services of Revenue, Engineering and Health Sections and @ Rs.100/- per day, in case of services of Town Planning Section. This compensation will be recovered from the person who delayed the service delivery. Disciplinary action will be initiated against the defaulting employee, who has paid fine atleast 3 times in a year. Similar disciplinary action would be initiated against the persons responsible who failed to pay fines imposed.

* MIS reports are to be generated through ERP system/CRS every month by 20th instant. Besides that an online challan will be generated from the system and will be issued to the employee (with respect to name/code) respectively by the concerned authorities. The challan amount will be shown as outstanding, till the same is remitted by the defaulting employee, in whose favour it was generated. The challan revenue for such income can also be tracked in the system.
* Not withstanding the recovery of the challan amount from the defaulting employee, the said amount has to be paid to the Applicant, by way of a cheque which should be prepared and handed over to the PURASEVA Centre counter, along with the delayed Permission/License/Certificate/ Order/Proceedings etc., as a compensation to the citizen.

Director

To

All the Commissioners of Urban Local Bodies in the State.

All the RDMAs in the State

Copy to the Director, e-seva for use of the prescribed application forms in the Mee-seva counters

Copy to the Engineer-in-Chief, Public Health, A.P., Guntur

Copy to the Director of Town & Country Planning, A.P., Guntur

Copy to the S.F.

**ABSTRACT**

|  |  |  |
| --- | --- | --- |
| **Sl. No.** | **Service Name** | **Form No.** |
| **I. Revenue Section** |
| 1. | Assessment/Re-assessment of PT | 001 |
| 2. | Assessment/Re-assessment of VLT | 002 |
| 3. | RP/GRP for PT | 003 |
| 4. | RP/GRP for VLT | 004 |
| 5. | Mutation (or) Transfer of Property(Registration not done) | 005 |
| 6 | Mutation (or) Transfer of Property(Registration already done) | 006 |
| 7. | PT exemption | 007 |
| 8. | Sub-division (or) Bifurcation of Property | 008 |
| 9 | Vacancy Remission | 009 |
| 10. | Amalgamation of Property | 010 |
| 11. | Demolition of Property | 011 |
| 12 | Ownership certificate | 012 |
| 13. | Valuation Certificate | 013 |
| **II. Engineering Section**  |
| 14. | New/Additional Water Tap connection | 014 |
| 15. | Change of Usage of Water Tap connection | 015 |
| 16. | Closure of Water Tap connection | 016 |
| **III. Public Health Section** |
| 17. | New Trade License (Post approval time-line) | 017 |
| 18. | Renewal of License (Post approval time-line) | 018 |
| 19. | Change of name of the Trade | 019 |
| **IV. Vital Statistics** |
| 20. | Issuance of Birth Certificate  | 020 |
| 21. | Child name inclusion in Birth Certificate (After One year) | 021 |
| 22. | Child name inclusion in Birth Certificate (within One year) | 022 |
| 23. | Name correction in Birth Certificate  | 023 |
| 24. | Non-availability certificate for Birth Entry | 024 |
| 25. | Issuance of Death Certificate  | 025 |
| 26. | Non-availability certificate for death entry | 026 |
| 27. | Sanitation Certificate (Manual System) | 027 |
| 28. | Application for Marriage Registration | 028 |

**FORM – OO1**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR ASSESSMENT / RE-ASSESSMENT OF PROPERTY TAX**

**File No**

(to be generated by **CSC)**

**A. Owner Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Aadhar No.** | **Mobile No.** | **Owner Name** | **Gender** | **Email Address** | **Guardian Name** **(S/o, D/o, W/o)** |
|  |  |  |  |  |  |

**B. Property Particulars:**

|  |  |
| --- | --- |
| 1.Category of Ownership |  Private [ ] State Govt. [ ] Central Govt. [ ] |
| 2.Property Type |  Residential [ ] Non-Residential [ ] Mixed [ ] |
| 3.Apartment / Complex Name |  |
| 4. Door No. (In case of existing building) |  |
| 5. Assessment No. (In case of existing building)  |  |
| 6.Locality |  |
| 7.Revenue Zone No. |  |
| 8.Revenue Ward No. |  |
| 9.Revenue Block No. |  |
| 10.Street No. |  |
| 11.Election Ward No. |  |
| 12.Property Address |  |
| 13.Pin Code |  |
| 14.Amenities :  | 1. Lift [ ]2. Toilets [ ] 3. Water Tap [ ]4. Cable Connection [ ]5. Electricity [ ]6. Attached Bathroom [ ]7. Water Harvesting [ ] |

**C. Assessment Details :**

**i) Extent of Site (in Sq.mts):**

 **ii) Floor-wise Details:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| FloorNo. | Classification of the Building (\*) | Nature of Usage(Residential/Non-Residential) | In case of NR, detailed usage(\*\*) | Firm Name | Occupancy(Owner/Tenant) | Occupant Name | Construction date |
|  |  |  |  |  |  |  |  |
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| --- | --- | --- | --- | --- | --- | --- |
| Effective from Date | Length(in Meter) | Width (in Meter) | Plinth Area (in Sq.Mt.) | Building Plan Permission No. | Building Plan Permission date | Plinth Area in Building Plan |
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**D. Documents:**

|  |  |
| --- | --- |
| i. Document Type | 1. Patta Certificate (issued by Revenue Dept.) [ ]
2. Registered will deed [ ]
3. Un-registered will deed [ ]
4. Decre by Civil Court [ ]
5. Un-registered Documents / Notary Document [ ]
6. Registered Document [ ]
 |
| ii.Certificate No. & Date (required only for patta certificate)  |  |
| iii.MRO Proceedings No. & Date(required only for patta certificate) |  |
| iv. Deed No. & Date(required for Registered/Un-registered will deed) |  |
| v. Testator and Witnesses Signed(required if Un-registered will deed) |  |
| vi. Decre No. & Date(required for decre by civil court) |  |
| vii. Name of Court(required for decre bv civil court) |  |
| viii. Document No. & Date(required for Registered Document) |  |

**E. Enclosures:**

1. Photo of Property / Land [ ]

2. Building Permission copy [ ]

3. Attested copies of Property Documents

 i. Patta Certificate [ ]

 ii. MRO Proceedings [ ]

 iii. Will Deed [ ]

 iv. Decree Document [ ]

v. Registered Document [ ]

4. Two Non-Judicial Stamp papers of Rs.10 each [ ]

5. Copy of Death Certificate / Succession [ ]

 Certificate / Legal Hair Certificate

6. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking:** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence it is requested to assess my property.**Applicant** |

**Office Use Only**

I have verified the application and the enclosures and the application qualifies for further verification.

**PuraSeva Centre Operator**

**Note:-**

1. **Classification of Building: (\*)**

RCC posh, RCC Ordinary, Madras Terrace, Mangalore Tiles, Country Tiles, AC or Zinc Sheet

1. **Non-Residential detailed usage (\*\*)**

Shop, Shopping complex, Office, Bank, ATM, Hospital, Clinic, Dispensary, Lab, Educational Institute, Hostel, Gym, Star Hotel, Bar/Pub/Restaurant, Hotel, Guest House, Gowdown, Petrol Bunk, Industry, Cinema Theatre, Multi/group theatres, Function Hall, Any other usage (specify the usage)

**FORM – 002**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR ASSESSMENT / RE-ASSESSMENT OF VACANT LAND TAX**

**File No**

(to be generated by **CSC)**

**A. Owner Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Aadhar No.** | **Mobile No.** | **Owner Name** | **Gender** | **Email Address** | **Guardian Name** **(S/o, D/o, W/o)** |
|  |  |  |  |  |  |

**B. Property Particulars:**

|  |  |
| --- | --- |
| 1.Category of Ownership |  Private [ ] State Govt. [ ] Central Govt. [ ] |
| 2.Apartment / Complex Name |  |
| 3. Door No. (In case of existing building) |  |
| 4. Assessment No. (In case of existing building)  |  |
| 5.Locality |  |
| 6.Revenue Zone No. |  |
| 7.Revenue Ward No. |  |
| 8.Revenue Block No. |  |
| 9.Street No. |  |
| 10.Election Ward No. |  |
| 11.Property Address |  |
| 12.Pin Code |  |

**C. Vacant Land Details :**

|  |  |
| --- | --- |
| 1.Survey No. |  |
| 2.Patta No. |  |
| 3.Vacant Land Area (in Sq.Mtr.) |  |
| 4.Market Value (per Sq.Mtr.) |  |
| 5.Document Value |  |
| 6.Effective date |  |
| 7.Surrounding Boundaries:North –East –West –South - |  |

**D. Documents:**

|  |  |
| --- | --- |
| i. Document Type | 1. Patta Certificate (issued by Revenue Dept.) [ ]
2. Registered will deed [ ]
3. Un-registered will deed [ ]
4. Decre by Civil Court [ ]
5. Un-registered Documents / Notary Document [ ]
6. Registered Document [ ]
 |
| ii.Certificate No. & Date (required only for patta certificate)  |  |
| iii.MRO Proceedings No. & Date(required only for patta certificate) |  |
| iv. Deed No. & Date(required for Registered/Un-registered will deed) |  |
| v. Testator and Witnesses Signed(required if Un-registered will deed) |  |
| vi. Decre No. & Date(required for decre by civil court) |  |
| vii. Name of Court(required for decre bv civil court) |  |
| viii. Document No. & Date(required for Registered Document) |  |

**E. Enclosures:**

1. Photo of Property / Land [ ]

2. Attested copies of Property Documents

 i. Patta Certificate [ ]

 ii. MRO Proceedings [ ]

 iii. Will Deed [ ]

 iv. Decree Document [ ]

v. Registered Document [ ]

3. Two Non-Judicial Stamp papers of Rs.10 each [ ]

4. Copy of Death Certificate / Succession [ ]

 Certificate / Legal Hair Certificate

5. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking:** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence it is requested to assess my property.**Applicant** |

**Office Use Only**

I have verified the application and the enclosures and the application qualifies for further verification.

**PuraSeva Centre Operator**

**FORM – 003**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR SUBMISSION OF REVISION/GENERAL REVISION PETITION AGAINST ASSESSMENT / RE-ASSESSMENT OF PROPERTY TAX**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |  |
| --- | --- | --- |
|  | Name of the Applicant |  |
|  | S/o, D/o, W/o. |  |
|  | Address for correspondence |  |
|  | Contact (Mobile) No. |  |

**B. Details of property of which the tax is to be revised :**

|  |  |
| --- | --- |
|  1. Door No.  |  |
| 2. Assessment No. |  |
| 3. Category of Ownership |  |
| 4. Property Type |  |
| 5.Apartment / Complex Name |  |
| 6.Amenities :  | 1. Lift [ ]2. Toilets [ ] 3. Water Tap [ ]4. Cable Connection [ ]5. Electricity [ ]6. Attached Bathroom [ ]7. Water Harvesting [ ] |

**C. Assessment Details :**

**i) Extent of Site (in Sq.mts):**

**ii) Floor-wise Details:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| FloorNo. | Classification of the Building(\*) | Nature of Usage(Residential/Non-Residential) | In case of NR, detailed usage(\*\*) | Firm Name | Occupancy(Owner/Tenant) | Occupant Name | Construction date |
|  |  |  |  |  |  |  |  |
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| --- | --- | --- | --- | --- | --- | --- |
| Effective from Date | Length(in Meter) | Width (in Meter) | Plinth Area (in Sq.Mt.) | Building Plan Permission No. | Building Plan Permission date | Plinth Area in Building Plan |
|  |  |  |  |  |  |  |
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**D. Documents:**

|  |  |
| --- | --- |
| i. Document Type | 1. Patta Certificate (issued by Revenue Dept.) [ ]
2. Registered will deed [ ]
3. Un-registered will deed [ ]
4. Decre by Civil Court [ ]
5. Un-registered Documents / Notary Document [ ]
6. Registered Document [ ]
 |
| ii.Certificate No. & Date (required only for patta certificate)  |  |
| iii.MRO Proceedings No. & Date(required only for patta certificate) |  |
| iv. Deed No. & Date(required for Registered/Un-registered will deed) |  |
| v. Testator and Witnesses Signed(required if Un-registered will deed) |  |
| vi. Decre No. & Date(required for decre by civil court) |  |
| vii. Name of Court(required for decre bv civil court) |  |
| viii. Document No. & Date(required for Registered Document) |  |

**E. Enclosures:**

1. Photo of Property / Land [ ]

2. Building Permission copy [ ]

3. Attested copies of Property Documents

 i. Patta Certificate [ ]

 ii. MRO Proceedings [ ]

 iii. Will Deed [ ]

 iv. Decree Document [ ]

v. Registered Document [ ]

4. Two Non-Judicial Stamp papers of Rs.10 each [ ]

5. Copy of Death Certificate / Succession [ ]

 Certificate / Legal Hair Certificate

6. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to my knowledge. Incase of any discrepancies I will be held responsible. **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification. **PuraSeva Centre Operator**  |

**Note:-**

1. **Classification of Building: (\*)**

RCC posh, RCC Ordinary, Madras Terrace, Mangalore Tiles, Country Tiles, AC or Zinc Sheet

1. **Non-Residential detailed usage (\*\*)**

Shop, Shopping complex, Office, Bank, ATM, Hospital, Clinic, Dispensary, Lab, Educational Institute, Hostel, Gym, Star Hotel, Bar/Pub/Restaurant, Hotel, Guest House, Gowdown, Petrol Bunk, Industry, Cinema Theatre, Multi/group theatres, Function Hall, Any other usage (specify the usage)

**FORM – 004**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR SUBMISSION OF REVISION/GENERAL REVISION PETITION AGAINST ASSESSMENT / RE-ASSESSMENT OF VACANT LAND TAX**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |  |
| --- | --- | --- |
|  | Name of the Applicant |  |
|  | S/o, D/o, W/o. |  |
|  | Address for correspondence |  |
|  | Contact (Mobile) No. |  |

**B. Details of property of which the tax is to be revised :**

|  |  |
| --- | --- |
|  1. Door No.  |  |
| 2.Assessment No. |  |
| 3.Category of Ownership |  |
| 4.Property Type |  |
| 5. Extent of Site (in Sq. mts) |  |

**C. Vacant Land Details :**

|  |  |
| --- | --- |
| 1.Survey No. |  |
| 2.Patta No. |  |
| 3.Vacant Land Area (in Sq.Mtr.) |  |
| 4.Market Value (per Sq.Mtr.) |  |
| 5.Document Value |  |
| 6.Effective date |  |
| 7.Surrounding Boundaries:North –East –West –South - |  |

**D. Documents:**

|  |  |
| --- | --- |
| i. Document Type | 1. Patta Certificate (issued by Revenue Dept.) [ ]
2. Registered will deed [ ]
3. Un-registered will deed [ ]
4. Decre by Civil Court [ ]
5. Un-registered Documents / Notary Document [ ]
6. Registered Document [ ]
 |
| ii.Certificate No. & Date (required only for patta certificate)  |  |
| iii.MRO Proceedings No. & Date(required only for patta certificate) |  |
| iv. Deed No. & Date(required for Registered/Un-registered will deed) |  |
| v. Testator and Witnesses Signed(required if Un-registered will deed) |  |
| vi. Decre No. & Date(required for decre by civil court) |  |
| vii. Name of Court(required for decre bv civil court) |  |
| viii. Document No. & Date(required for Registered Document) |  |

**E. Enclosures:**

1. Photo of Property / Land [ ]

2. Attested copies of Property Documents

 i. Patta Certificate [ ]

 ii. MRO Proceedings [ ]

 iii. Will Deed [ ]

 iv. Decree Document [ ]

 v. Registered Document [ ]

3. Two Non-Judicial Stamp papers of Rs.10 each [ ]

4. Copy of Death Certificate / Succession [ ]

 Certificate / Legal Hair Certificate

5. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to my knowledge. Incase of any discrepancies I will be held responsible. **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification. **PuraSeva Centre Operator**  |

**FORM – 005**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR OBTAINING MUTATION / TRANSFER OF PROPERTY**

**(Full Transfer - Registration not done)**

**File No**

(to be generated by CSC)

 **A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Transferer Name
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |

**B. Transferee Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Aadhar No.** | **Mobile No.** | **Owner Name** | **Gender** | **Email Address** | **Guardian Name** **(S/o, D/o, W/o)** |
|  |  |  |  |  |  |

**C. Registration Details:**

|  |  |
| --- | --- |
| 1. Registration document No. & Date |  |
| 2. Parties consideration value (Document value) |  |
| 3. Department guidelines value (Market Value) |  |

**D. Enclosures:**

1. Address proof of parties [ ]

2. Affidavit from seller and buyer [ ]

3. Registered title deed [ ]

7. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking :**I hereby declare that all the information mentioned above is true to my knowledge. In case ofany discrepancies I will be held responsible. Hence, I request you to Transfer the property in myname basing on the documentary evidences.Date : **Applicant’s Signature** |

**Office Use Only**

 I have verified the application and the enclosures and the application qualifies for further verification.

 **PuraSeva Centre Operator. .**

**FORM – 006**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR OBTAINING MUTATION / TRANSFER OF PROPERTY**

**(Registration already done)**

**File No**

(to be generated by CSC)

 **A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Transferer Name
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |

**B. Transferee Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Aadhar No.** | **Mobile No.** | **Owner Name** | **Gender** | **Email Address** | **Guardian Name** **(S/o, D/o, W/o)** |
|  |  |  |  |  |  |

**C. Registration Details:**

|  |  |
| --- | --- |
| 1. Registration document No. & Date |  |
| 2. Parties consideration value (Document value) |  |
| 3. Department guidelines value (Market Value) |  |

**D. Enclosures:**

1. Address proof of parties [ ]

2. Affidavit from seller and buyer [ ]

3. Registered title deed [ ]

7. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking :**I hereby declare that all the information mentioned above is true to my knowledge. In case ofany discrepancies I will be held responsible. Hence, I request you to Transfer the property in myname basing on the documentary evidences.Date : **Applicant’s Signature** |

**Office Use Only**

 I have verified the application and the enclosures and the application qualifies for further verification.

 **PuraSeva Centre Operator .**

**FORM – 007**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR TAX EXEMPTION**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |

**B. Tax Exemption particulars:**

Reason for Tax exemption:

i. Places set apart for public worship [ ]

ii. Choultries [ ]

iii. Recognized Educational Institutions / Charitable Institutions. [ ]

iv. Ex-Service men / In-service men of Army [ ]

v. Retired Pensioners Association [ ]

vi. NGO Homes / Teachers Association Buildings [ ]

 **C. Enclosures:**

 1. In case of recognized Educational Institutions:

i. Copy of Educational Institute recognition order

 ii. Copy of State Gazette/District Gazette, in which the Trust (or) Organization is

 notified as Charitable Institution by the Commissioner of Endowments.

 iii. Copy of registered Trust Deed under Registration Act, 1908.

 iv. Copies of Minutes of the meeting of the Trust/Organization for the last 3 years

 v. Copies of Annual Reports/ Audit Reports /Annual Accounts of the organizations,

 for the last (3) years

2. In case of charitable institutions:-

 i.

 ii.

 iii.

 iv.

 v.

 3. In case of Ex-Service Man/In-Service man:

i. Proof of identify

 ii. Photo of the Applicant

4. In case of Retired Pensioners Association:

i. Copy of Association recognition order of the Government

 ii. Copy of resolution for making a request for exemption of property tax which is

 passed in the Association

5. In case of NGO Homes/Teachers Association Buildings

i. Copy oof Association recognition order of the Government

 ii. Copy of resolution for making a request for exemption of property tax which is

 passed in the Association

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to myknowledge. In case of any discrepancies I will be held responsible **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification.**PuraSeva Centre Operator.**  |

**FORM – 008**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR SUB-DIVISION (OR) BIRFURCATION OF PROPERTY**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |
| 1. Property to be divided into No. of parts
 |  |

**B. Assessment Details :**

**i) Extent of Site (in Sq.Mts.) to be divided :**

|  |  |
| --- | --- |
| Sl.No. | Site divided into parts |
| No. | Extent of site |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**ii) Floor-wise Details and part-wise to be divided:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| FloorNo. | Classification of the Building(\*) | Nature of Usage(Residential/Non-Residential) | In case of NR, detailed usage(\*\*) | Firm Name | Occupancy(Owner/Tenant) | Occupant Name | Construction date |
|  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Effective from Date | Length(in Meter) | Width (in Meter) | Plinth Area (in Sq.Mt.) | Building Plan Permission No. | Building Plan Permission date | Plinth Area in Building Plan |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to myknowledge. In case of any discrepancies I will be held responsible **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification.**PuraSeva Centre Operator**  |

 **Note:-**

1. **Classification of Building: (\*)**

RCC posh, RCC Ordinary, Madras Terrace, Mangalore Tiles, Country Tiles, AC or Zinc Sheet

1. **Non-Residential detailed usage (\*\*)**

Shop, Shopping complex, Office, Bank, ATM, Hospital, Clinic, Dispensary, Lab, Educational Institute, Hostel, Gym, Star Hotel, Bar/Pub/Restaurant, Hotel, Guest House, Gowdown, Petrol Bunk, Industry, Cinema Theatre, Multi/group theatres, Function Hall, Any other usage (specify the usage)

**FORM – 009**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

 **APPLICATION FOR VACANCY REMISSION**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |

**B. Vacancy Remission Details:**

|  |  |
| --- | --- |
| 1. Vacancy remission from date
 |  |
| 1. Vacancy remission to date
 |  |
| 1. Name of the Owner
 |  |

**C. Enclosures:**-

1. Photo showing the vacant premises
2. Electricity Bills for the period for which the claim is made

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies I will be held responsible. **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification. **PuraSeva Centre Operator**  |

**FORM – 010**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR AMALGAMATION OF PROPERTY**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |

**B. Amalgamated Properties Detail:**

|  |  |
| --- | --- |
| Assessment No. | Owners Name |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**C. Owners to be added:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Aadhar No.** | **Mobile No.** | **Owner Name** | **Gender** | **Email Address** | **Guardian Name** **(S/o, D/o, W/o)** |
|  |  |  |  |  |  |

**D. Property Particulars:**

|  |  |
| --- | --- |
| 1.Category of Ownership |  |
| 2.Property Type |  |
| 3.Apartment / Complex Name |  |
| 4.Locality |  |
| 5.Revenue Zone No. |  |
| 6.Revenue Ward No. |  |
| 7.Revenue Block No. |  |
| 8.Street No. |  |
| 9.Election Ward No. |  |
| 10.Property Address |  |
| 11.Pin Code |  |
| 12.Amenities :  | 1. Lift [ ]2. Toilets [ ] 3. Water Tap [ ]4. Cable Connection [ ]5. Electricity [ ]6. Attached Bathroom [ ]7. Water Harvesting [ ] |

**E. Assessment Details (After amalgamation) :**

**i) Extent of Site (in Sq.mts):**

**ii) Floor-wise Details:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| FloorNo. | Classification of the Building(\*) | Nature of Usage(Residential/Non-Residential) | In case of NR, detailed usage(\*\*) | Firm Name | Occupancy(Owner/Tenant) | Occupant Name | Construction date |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Effective from Date | Length(in Meter) | Width (in Meter) | Plinth Area (in Sq.Mt.) | Building Plan Permission No. | Building Plan Permission date | Plinth Area in Building Plan |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to myknowledge. In case of any discrepancies I will be held responsible **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification.**PuraSeva Centre Operator**  |

**Note:-**

1. **Classification of Building: (\*)**

RCC posh, RCC Ordinary, Madras Terrace, Mangalore Tiles, Country Tiles, AC or Zinc Sheet

1. **Non-Residential detailed usage (\*\*)**

Shop, Shopping complex, Office, Bank, ATM, Hospital, Clinic, Dispensary, Lab, Educational Institute, Hostel, Gym, Star Hotel, Bar/Pub/Restaurant, Hotel, Guest House, Gowdown, Petrol Bunk, Industry, Cinema Theatre, Multi/group theatres, Function Hall, Any other usage (specify the usage)

**FORM – 011**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR DEMOLITION OF PROPERTY**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |
| 1. Date of demolition
 |  |

**B. Vacant Land Details :**

|  |  |
| --- | --- |
| 1.Survey No. |  |
| 2.Patta No. (If it is a patta) |  |
| 3.Vacant Land Area (in Sq.Mtr.) |  |
| 4.Market Value (per Sq.Mtr.) |  |
| 5.Document Value |  |
| 6.Effective date |  |
| 7.Surrounding Boundaries:North –East –West –South - |  |

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to myknowledge. In case of any discrepancies I will be held responsible **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification.**PuraSeva Centre Operator**  |

**FORM – 012**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

 **APPLICATION FOR OWNERSHIP CERTIFICATE**

**File No**

(to be generated by CSC)

**Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No. for which Ownership Certificate is required
 |  |

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies I will be held responsible. **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification. **PuraSeva Centre Operator**  |

**FORM – 013**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

 **APPLICATION FOR VALUATION CERTIFICATE**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No. for which Valuation Certificate is required
 |  |

**B. ENCLOSURES:-**

1. Photo of the Owner

2. Building front elevation photo.

|  |
| --- |
| **Applicant Undertaking** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies I will be held responsible. **Signature of the Applicant** |
| **Office Use only** I have verified the application and the enclosures and the application qualifies for further verification. **PuraSeva Centre Operator**  |

**FORM – 014**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR NEW / ADDITIONAL WATER TAP CONNECTION**

**File No**

(to be generated by **CSC)**

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |
| 1. Consumer No. (In case of Additional Water Tap connection)
 |  |

**B. Connection Details :**

|  |  |
| --- | --- |
| 1. Water Source Type |  Ground Water [ ] Surface Water [ ] |
| 2. Connection Type |  Metered [ ] Non Metered [ ] |
| 3. Property Type |  Residential [ ] Non Residential [ ] |
| 4. Category |  BPL [ ] General [ ] OYT [ ] NSDP [ ] |
| 5. Usage Type |  Domestic [ ] Commercial [ ] |
| 6. Pipe Size |  1 inch [ ] ½ inch [ ] 3/2 inch [ ] ¾ inch [ ] |
| 7. Sump capacity (in Lts.) |   |
| 8. No. of Persons |  |

**C. Enclosures:**

1. Property Tax receipt [ ]

2. Distribution Line Location Map [ ]

3. White Ration Card (in case of BPL) [ ]

4. 20/- Non Judicial Stamp Paper [ ]

5. Any other document [ ]

|  |
| --- |
| **Applicant Undertaking:** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence it is requested to accord sanction for Water Tap Connection / Additional Water Tap Connection in my house.**Applicant** |

**Office Use Only**

I have verified the application and the enclosures and the application qualifies for further verification.

**PuraSeva Centre Operator**

**FORM – 015**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR CHANGE IN USAGE OF WATER TAP CONNECTION**

**File No**

(to be generated by **CSC)**

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |
| 1. Consumer No.
 |  |

**B. Connection Details :**

|  |  |
| --- | --- |
| 1. Connection Type |  Metered [ ] Non Metered [ ] |
| 2. Usage Type |  Domestic [ ] Commercial [ ] |
| 3. Category |  BPL [ ] General [ ] OYT [ ] NSDP [ ] |
| 4. Property Type |  Residential [ ] Non Residential [ ] |
| 5. Pipe Size |  1 inch [ ] ½ inch [ ] 3/2 inch [ ] ¾ inch [ ] |
| 6. Water Source Type |  Ground Water [ ] Surface Water [ ] |
| 7. Sump capacity (in Lts.) |   |
| 8. No. of Persons |  |
| 9. Date from which the change in usage is requested |  |
| 10. Reason for Change of Use. |  |

**C. Enclosures:**

1. Documents if any [ ]

|  |
| --- |
| **Applicant Undertaking:** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence it is requested to change in usage of my water tap connection.**Applicant** |

**Office Use Only**

I have verified the application and the enclosures and the application qualifies for further verification.

 **PuraSeva Centre Operator**

**FORM – 016**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR CLOSURE OF WATER TAP CONNECTION**

**File No**

(to be generated by **CSC)**

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Applicant
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Door No.
 |  |
| 1. Assessment No.
 |  |
| 1. Consumer No.
 |  |

**B. Closure of Connection Details :**

|  |  |
| --- | --- |
| 1. Connection Closure Type
 |  Temporary [ ] Permanent [ ] |
| 1. Reasons for closure
 |  |

**C. Enclosures:**

1. Document if any [ ]

|  |
| --- |
| **Applicant Undertaking:** I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence it is requested to assess disconnect my water tap connection in view of the reasons mentioned above.**Applicant** |

**Office Use Only**

I have verified the application and the enclosures and the application qualifies for further verification.

 **PuraSeva Centre Operator**

**FORM – 017**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION APPLICATION**

**APPLICATION FOR OBTAINING TRADE LICENSE CERTIFICATE**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Business Owner
 |  |
| 1. Address of the business establishment
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Property Tax Assessment No. of Business establishment
 |  |

**B. Trade Details :**

|  |  |
| --- | --- |
| 1. Nature of Trade
 |  |
| 1. Title of Trade
 |  |
| 1. Brief Description of trade
 |  |
| 1. Type of Business establishment
 | []Own []Rented(Incase of rented, Rental Agreement should be enclosed) |
| 1. If Rent, Monthly Rent of Business establishment
 |  |
| 1. Trade Existing Zone
 | [] Residential [] E Commercial |
| 1. Plinth Area of the establishment
 |  |
| 1. No. of workers
 |  |
| 1. H.P. Required
 |  |
| 1. No. of machines
 |  |
| 1. Period of license required
 |  |

**C. Enclosures:**

1. Self Assessment Form [ ]

2. Rental Deed/Lease Deed/Sale Deed [ ]

3. Property tax receipt up-to-date paid [ ]

4. Location plans – Blue Print Copies -3 [ ]

5. NOC from two Immediate neighbours [ ]

6. Sanctioned Plan. [ ]

7. Passport Size Photos -2 [ ]

|  |
| --- |
| **Applicant Undertaking:**I hereby declare that all the information mentioned above is true to my knowledge. Incase of any discrepancies if arises I will be held responsible. Hence I request you to issueme D & O Trade License.**Date: Applicant’s Signature** |
| **Office Use Only**I have verified the application and the enclosures and the application qualifies for furtherverification.  **PuraSeva Centre Operator**  |

**FORM – 018**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION APPLICATION**

**APPLICATION FOR OBTAINING RENEWAL OF EXISING TRADE LICENSE CERTIFICATE**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Business Owner
 |  |
| 1. Address of the business establishment
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Property Tax Assessment No. of Business establishment
 |  |
| 1. Existing Trade License Assessment No. (in case of renewal)
 |  |

**B. Trade Details :**

|  |  |
| --- | --- |
| 1. Nature of Trade
 |  |
| 1. Title of Trade
 |  |
| 1. Brief Description of trade
 |  |
| 1. Type of Business establishment
 | []Own []Rented(Incase of rented, Rental Agreement should be enclosed) |
| 1. If Rent, Monthly Rent of Business establishment
 |  |
| 1. Trade Existing Zone
 | [] Residential [] E Commercial |
| 1. Plinth Area of the establishment
 |  |
| 1. No. of workers
 |  |
| 1. H.P. Required
 |  |
| 1. No. of machines
 |  |
| 1. Period of license required
 |  |

 **C. Enclosures:**

 1. Property tax receipt up-to-date paid [ ]

 2. Previous year trade license fee paid receipt [ ]

|  |
| --- |
| **Applicant Undertaking:**I hereby declare that all the information mentioned above is true to my knowledge. Incase of any discrepancies if arises I will be held responsible. Hence I request you to issueme D & O Trade License.**Date: Applicant’s Signature** |
| **Office Use Only**I have verified the application and the enclosures and the application qualifies for furtherverification.  **PuraSeva Centre Operator**  |

**FORM – 019**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION APPLICATION**

**APPLICATION FOR OBTAINING CHANGE OF NAME IN THE EXISING TRADE LICENSE CERTIFICATE**

**File No**

(to be generated by CSC)

**A. Applicant Particulars:**

|  |  |
| --- | --- |
| 1. Name of the Applicant
 |  |
| 1. S/o, D/o, W/o.
 |  |
| 1. Postal Address of the Business Owner
 |  |
| 1. Address of the business establishment
 |  |
| 1. Contact (Mobile) No.
 |  |
| 1. Property Tax Assessment No. of Business establishment
 |  |
| 1. Existing Trade License Assessment No.
 |  |

**B. Trade Details :**

|  |  |
| --- | --- |
| 1. Existing Title of the Trade
 |  |
| 1. Title of the Trade to be changed
 |  |

**C. Enclosures:**

1. Documents if any [ ]

|  |
| --- |
| **Applicant Undertaking:**I hereby declare that all the information mentioned above is true to my knowledge. Incase of any discrepancies if arises I will be held responsible. Hence I request you to change the Title of the Trade.**Date: Applicant’s Signature** |
| **Office Use Only**I have verified the application and the enclosures and the application qualifies for furtherverification.  **PuraSeva Centre Operator**  |

 **FORM - 020**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR BIRTH CERTIFICATE
(Write in Capital Letters)**

1. Date Of Birth
2. Sex
3. Child Name
	1. If Registered Mention the Child Name.
	2. If Child Name not included a separate form to be filled by the Father and Mother **of** the child
4. Name of the Father
5. Name of the Mother
6. Place of Birth

(Tick the appropriate entry a, b, c below and give the name of the Hospital/Institute or the Address of the House where the Birth took place.lf other place give location)

|  |  |
| --- | --- |
| 1. Hospital/Institution Name
2. House Address
3. Other place
4. No.Of Copies Required
5. a) Do you want the Birth Certificate by Courier- Yes/No

 b) If Yes give Name and Address with PinCode |  |

 (Signature of the Name & address, Applicant)

 Telephone No:

Note:- Birth certificate will be issued subject to entry found Registered in Municipal records.

**CSC Transaction No: CSC Transaction Date:**

 **FORM – 021**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR INCLUSION OF CHILD NAME IN THE BIRTH CERTIFICATE**

**REGISTRATION OF CHILD NAME AFTER ONE YEAR OCCURANCE**

**From To**

Name The Registrar of Birth and Deaths,

Address:

Telephone No:

**Sir,**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/o. /W/o.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aged about years working as (Designation

& office Address) Residing at H.No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Complete door no.)

Declare that my wife Delivered Male / Female child at

 (Actual place of Birth) on (Date of Birth)

Hence, we Request to include our child name as

(Write in Capital Letters)In the Birth Register of the year

**Signature & Signature &**

Name of the father of the child Name of the mother of the child

I hereby enclose the following photo copies with attestation for issuance child name inclusion in certificate

1. Ration Card/ any other Residence Proof
2. School Bonafied Certificate
3. Notarized Affidavit
4. Birth Certificate

 **FORM – 022**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR INCLUSION OF CHILD NAME IN THE BIRTH CERTIFICATE**

**REGISTRATION OF CHILD NAME WITHIN ONE YEAR OCCURANCE**

From To

Name The Registrar of Birth and Deaths,

Address:

Telephone No:

Sir,

III\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/o./W/o.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aged about years working as

(Designation& office Address) Residing at H.No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Complete door no.)

Declare that my wife Delivered Male / Female child at

 (Actual place of Birth) on (Date of Birth)

Hence, we Request to include our child name as

(Write in Capital Letters)In the Birth Register of the year

**Signature & Signature &**

**Name of the father of the child Name of the mother of the child**

 **FORM – 023**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR CORRECTIONS OF BIRTH AND DEATH ENTRIES**

**I S/o**

 Aged about years working as

(Designation and complete address of the individual of the firm)

Residing at

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Complete Door No. Street and Station has to be stated with Telephone No).

Declare that

I/My Delivered Male child/Female child

Born/Died in

(Actual place of event) on (date of event).

 The Birth/Death Certificates issued on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 The name/s was wrongly informed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(the person who informs the event has to be stated)please do the following.

|  |  |
| --- | --- |
| **Incorrect Name** |  **To be Corrected as** |
|  |  |
|  |  |

 SIGNATURE OF THE DECLARANT

Date: (Declarant’s name in Capital)

I know Sri/Smt\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

S/o/W/o\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as a resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The signature of the declarant is taken in my presence and the contents mentioned by the Declarant are

True and correct to the best of my knowledge and belief.

1. 2.

GAZETTED OFFICER GAZETTED OFFICER

 Sign & Seal & Sign & Seal &

(Name of the Officer) (Name of the Officer)

**CSC Transaction No. CSC Transaction Date:**

The following documents should be produced by the declarant for name corrections in Birth/Death

registers:

1. Declaration by the nearest relative (Parents/Childres`s/Spouse) in case of death and either father

 or mother in case of liver Birth

2. The declaration stated should be true and correct by two Gazatted Officers (Names of Gazetted

 Officers are to be written in CAPITALS).

3. Notary Affidavit on (Rs.10/- Non Judicial Stamped Paper).

4. The Original Birth / Death Certificates already taken are to be returned

5. Documentary Evidences like Educational Certificates, Election ID Card, Ration Card, Passport,

 Driving Licenses, Marriage Certificate, LIC Policies, Caste Certificates, Property Papers, etc.,

 (Evidence to be submitted before Birth of the Child or Death of the Deceased)

6. Consent Letter from the concerned Hospital regarding the correction to the effect

7. Other Child Certificates if any

8. In case of Medico Legal Death a) FIR b) Post Mortem Report c)Form\_2 by concerned Police

 Station

9. Any other support documents if any please specify.

|  |
| --- |
|  |
|

 **FORM – 024**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR NON AVAILABILITY CERTIFICATE FOR BIRTH**

From To

Name: The Registrar Birth and Death,

Address:

Telephone No:

Sir,

Sub: - Request of Non-availability Certificate —Reg.

Ref: - Your Endorsement Dated No.

\*\*\*

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/o./W/o.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aged about years working as (Designation & office

Address) Residing at H.No
(Complete door no.)

 I declare that My wife Delivered Male/Female child in

(Place of Birth) on (Date of Birth)

I hereby enclose the following photo copies with attestation for issuance of Non-Availability certificate.

1. Ration Card/Any other Residence Proof
2. School Bonofied Certificate
3. Secondary School Marks Sheet.
4. Notarized Affidavit
5. Any other supporting documents if any please specify

**Signature of the Applicant**

 **FORM – 025**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR DEATH CERTIFICATE
(Write in Capital Letters)**

1. Date Of Death

2. Name of the Deceased

3. Sex of the Deceased

4. Name of the Father of the deceased:

5. Name of the Mother

6. Place of Death

(Tick the appropriate entry a, b, c below and give the name of the Hospital/Institute or the Address of the House where the Death took place. If other place give location)

1. Hospital/Institution Name :
2. House Address
3. Other place

7. No. of Copies Required

8. a) Do you want the Death Certificate by Courier- (Yes / No.)

 b) If Yes give Name and Address with Pin Code

**Name & address. (Signature of the Applicant)**

**Telephone No:**

Note:- Death certificate will be issued subject to entry found Registered in Municipal records.

 **FORM – 026**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

**APPLICATION FOR NON AVAILABILITY CERTIFICATE FOR DEATH**

From To

Name: The Registrar of Birth and Deaths,

Address:

Telephone No:

Sir,

Sub: - Request of Non-availability Certificate –Reg.

Ref: - Your Endorsement Dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

><<>><

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_S/o./W/o.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aged about \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ years working as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Designation

& office Address) Residing at H.No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Complete door no)

I declare that My\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_died in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Place of Birth)

on\_\_\_\_\_\_\_\_\_\_\_\_

(Date of Birth)

I hereby enclose the following photo copies with attestation for issuance of Non-Availability

certificate.

1. Ration Card/Any other Residence Proof

2. Notarized Affidavit

3. Other Documentary Evidences to prove the place of Death

4. Burial Ground Receipt

5. In case of Medico Legal cases

a) FIR (b) PM Report (c) Form\_2 given by concerned Police Station

6. Any other supporting documents if any please specify

 **Signature of the Applicant**

 **FORM – 027**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MUNICIPALITY / CORPORATION**

 **APPLICATION FOR OBTAINING SANITATION CERTIFICATE**

**A. Applicant Particulars**

|  |  |  |
| --- | --- | --- |
|  | Circle No. |  |
|  | Name of the applicant |  |
|  | Father's Name / Husband Name |  |
|  | Postal Address of the Applicant |  |
|  | Address of the premises seeking sanitation certificate |  |
|  | Contact (Mobile) No. |  |
| 8. | Property Tax Assessment No. of Business establishment |  |

**B.**

|  |  |
| --- | --- |
| 1. Nature of business establishment
 |  |
| 1. The premises is
 |  **[ ] Own [ ]Rented [ ]Lease** |
| 1. Date of occupying the premises
 |  |
| 1. Probable number of occupants
 |  |
| 1. Number of rooms
 |  |
| 1. Water storage capacity
 |  |
| 1. Number of urinals
 |  |
| 1. Number of Toilets
 |  |
| **Applicant Undertaking:****I hereby declare that all the information mentioned above is true to my knowledge. In case of any discrepancies if arises I will be held responsible. Hence I request you to issue me Sanitation certificate.****Date: Applicant's Signature** |
| **List of Enclosures**1. **Attested copy of property documents (own)**
2. **Attested copy of lease agreement (in case lease / rent)**
3. **Property Tax Receipt**
 |

**Office Use Only**

**I have verified the application and the enclosures and the application qualifies for further verification. Thereby it is requested to collect the processing fees of Rs.**

 **PuraSeva Centre Operator**

**Form – 028**

**Application for Marriage Registration**

 **[See Section 8 of Andhra Pradesh Compulsory Registration of Marriage Act, 2002]**

**Memorandum of Marriage**

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | **Date of Marriage\*** | : | \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_[Future Date should not be entered] |
| **2.** | **Place of Marriage\*** |  |  |
|  | VenueStreetLocalityCity Town | :::: | Residence/ Function Hall/ Worship Place/ Others<drop-down>[For Function Hall/Worship Place/Others <textbox for entering>]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **3.** | **Bridegroom’s Particulars**  |  |  |
|  | Full Name\*Father’s/Mother’s Name\*His Age at the time of Marriage\*Usual Place of Residence  Street\* Locality\* City Town\* Status of Bridegroom at the time of Marriage\* Aadhar Mobile No. \* eMail Religion  Educational Qualification  Occupation  Nationality  | ::::::::::::::: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Unmarried / Widowed / Divorced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Illiterate; Literate; SSC; Intermediate; Graduate; Post Graduate; Doctorate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  | Witness  |  |  |
|  | a. Name\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  S/o. W/o. D/o. \* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  Age\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Usual Place of Residence\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Relationship\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Aadhar | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  | b. Name\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  S/o. W/o. D/o. \* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  |  |  |
|  |  Age\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Usual Place of Residence\* Relationship\* | :: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  Aadhar | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **4.** | **Bride’s Particulars**  |  |  |
|  | Full Name\*Father’s/Mother’s Name\*Her Age at the time of Marriage\*Usual Place of Residence  Street\*  Locality\*  City Town\*  Status of Bride  at the time of Marriage\*  Aadhar Mobile No. \*  eMail Religion  Educational Qualification   Occupation  Nationality  | :::::::::::::: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Unmarried / Widowed / Divorced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Illiterate; Literate; SSC; Intermediate; Graduate; Post Graduate; Doctorate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  | Witness  |  |  |
|  | c. Name\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  S/o. W/o. D/o. \*  | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  Age\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Usual Place of Residence\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Relationship\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Aadhar | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  | d. Name\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  S/o. W/o. D/o. \* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  Age\* | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  Usual Place of Residence\* Relationship\* | :: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  Aadhar | : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

Signature of the Applicant