SEPT 2015

Making Governance Citizen-friendly

Section II : Designing Simplified Proforma For Services Under Punjab Right To Service Act

> Punjab Governance Reforms Commission September 2015



SECTION II DESIGNING SIMPLIFIED PROFORMA FOR SERVICES UNDER PUNJAB RIGHT TO SERVICE ACT

CONCEPT NOTE

DESIGNING SIMPLIFIED PROFORMA FOR SERVICES UNDER PUNJAB RIGHT TO SERVICE ACT

1. CONCEPT NOTE

The proforma has been devised keeping in view the range of services and varied requirements to avail these services. The first and the foremost requirement is nature of the service required and which agency/department has been authorised to provide this service. The proforma designed has been simplified and backend information gathered to identify the service-provider department online as well as manual.

Second, the proforma has been designed to capture identity applicant. It will include applicants personal details like name, husband's/father's/mother's name, address – both permanent and correspondence and Aadhar Card number along with a copy of Aadhar Card, if available with the candidate.

Third, all the mandatory information and document which are specific to the service are required to be filled without which it will not be possible to provide the service as these documents or information will be required to verify the eligibility of the applicant.

Name of the beneficiary alongwith the Adhaar Number of the beneficiary is required to be filled in to address the issue that in some schemes the applicant and the beneficiary can be different persons.

For each of the 206 services, 206 application Forms will be made which will have a list of mandatory document/information required specific to the service applied for as in part-III of the proposed proforma.

In places where I.T. enablement is possible the proposed proforma will work like this. As soon as the applicant puts in the name of the service through an IT device, to name of the department from the pre filled data in the system will emerge in part-I and simultaneously in part-III mandatory information/document required specific to the service applied for will emerge . A print out can be taken of this if the applicant desires to procure the document required for the service as indicated in part-III. The proforma can be filled at that time only on line or later as per the convenience of the applicant.

If there is no I.T. enablement then proforma of the service which is required can be printed manually and kept with the authority/public interface. After filling up these proforma the same can be submitted to the appropriate authority.

At the time of the submission of the application as per this proforma the acknowledgement receipt will be given to the applicant.

SIMPLIFIED PROFORMA SPECIMEN

2. SIMPLIFIED PROFORMA SPECIMEN

Application No.

Simplified Performa for Services under Punjab RTS Act

Part-1		
1.	Name of Service	
2.	Name of Department/Service Provider	
	(Pre-filled into the system)	
	D. 4 3	

<u> Part-2</u>

Personal Details

1.	Name of Applicant	
2.	Husband/Father's/Mother's Name	
3.	Permanent Address	
4.	Correspondence Address	
5.	Correspondence Phone No.	
6.	Correspondence e-mail	
7.	Adhaar Card No. (Attach copy)	

Part-3

Information/documents required specific to the service

Information.

1.	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary attach copy)	
2.	Relationship with applicant	
3.		

Documents Required

Submitted Tick (✓) / YES

1.	
2.	
3.	

Signature of Applicant

(ACKNOWLEDGEMENT SLIP)

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

SIMPLIFICATION OF PROFORMA: BASIC CIVIC NEED BASED SERVICES

BASIC CIVIC AND NEED BASED SERVICES

Simplified Proforma for Services under Punjab RTS Act (52)

Part -1

1	Name of Service	Residence - domicile
2	Name of Department/ Service Provider (Pre-filled into the system)	Personnel/ Tehsildar

Part -	-2
--------	----

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	



Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	

Documents Required

Submitted Tick $(\sqrt{})$ / Yes

1	Self-declaration	
2	Verification by Sarpanch/Nambardar/MC	
3	Report by Patwari	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	4.	Date by which Service to	
				be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges, if	
				any	
3.	Date of Application	6.	6.	Signature of authorised	
				official	

Simplified Proforma for Services under Punjab RTS Act (52)

		Part -1
1	Name of Service	Residence - by birth
2	Name of Department/ Service	Personnel/ Tehsildar
	Provider (Pre-filled into the system)	

Part -2	2
---------	---

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Place of birth of beneficiary	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes Birth certificate of beneficiary. 1

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Self-declaration regarding Residence Certificate

12)

I,	(Name),
resident of	(Full Address),
am father/mother/guardian of Sh./Smt/Ms	
and declare as under :-	

- (1) That I am a Citizen of India.
- (2) Neither the declarant nor the child/ward of the declarant have availed of the benefit of residence certificate in any other State.

	Signature
Date :	Name of the declarant
Place :	· Full Address

Verification

Verified that the contents of the above declaration are true and correct to the best of my knowledge and belief and nothing has been concealed therein. I am aware of the fact that if the information provided by me is proved to be false, I will be liable for punishment prescribed under law.

Date : Place :

Signature	-
Name	

Verification Regarding Residence Certificate

It is certified that Sh./Smt/Ms	-
son/daughter of Sh./Smt	
resident of	Village/Mohalla/City/Ward No-
Tehsil	District,
/his/her father/mother is personally known to me.	He/she/his/her father/mother is a
permanent resident of this place and has/have be	en living at the above-mentioned
place foryears.	

It is recommended that Residence Certificate of the State of Punjab may be issued to Sh/Smt/Miss------(Father's/Mother's name).

Date :	Signature(Nambardar/Sarpanch/M.C.)
Place :	Name

Patwari's Report

Or

	As	per	the	Revenue	record,	the	applicant/his/her	parents	hold
immovable	pro	perty	of						Acres
in					Villag	e/Cit	w in the State of Pu	mish	

	Signature
Date :	Patwari's Name
Place :	 Name of the Patwar Circle

Office of Tehsildar-----

16

Residence Certificate

Certified that Sh/Smt/Ms,
S/o/ D/o/W/o Sh,
resident ofDistrictDistrict
has been resident in the State of Punjab for at least five years.

No.

Tehsildar

'D'

Date :

Office of Tehsildar-----

18

Residence Certificate

Certified th	at Sh/Smt/Miss,
S/o/ D/o/W/o Sh	,
resident of	,Tehsil,District,
was born in the State of Punja	b as per Birth Certificate.

No.

Tehsildar

'E'

Date :

Office of Tehsildar-----

Residence Certificate

2003

Certified th	nat Sh/Smt/Ms	,
S/o/ D/o/W/o Sh		,
	,Tehsil	
holds immovable prope	erty in the State of Punjab.	

No.

Date :

Tehsildar

·F'

Simplified Proforma for Services under Punjab RTS Act (194)

Part -1

1	Name of Service	Rural Area Certificate
2	Name of Department/ Service Provider (Pre-filled into the system)	Rural Development and Panchayat
J		

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar	
	No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self declaration	
2	Copy of any one document like Voter Card/Driving License /	
	Passport / Electricity Bill / Water Bill or Telephone as proof of	
	Residence	
3	Two Passport size photographs	
4	Prescribed Fee	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

PUNJAB GOVERNMENT RURAL AREA CERTIFICATE

Sr. No. 566

Date 09/09/2010



Sangrur	· .	State Punjab which has been declared as RI	URAL AREA by
P.O ANDA	NA	Tehsil Moonak	District
		IAND NAI is a bonafide resident of Village/To	to the Discounter of
This is to ce	ertify that	Shri/Shrimati/Kumar AMIT SINGH NAIN	S/o/D/o /W/0
On the veri	fication of	NT Khanauri	

PUNJAB STATE GOVERNMENT.

Date 09/09/2010



SIGNATURE DESIGNATION कर भेनिमटरोट (SEAL) भुरुव

Simplified Proforma for Services under Punjab RTS Act (105) Part-1

1.	Name of Service	Issue of Scheduled Caste (SC) Certificate
2.	Name of Department/ Service Provider (Pre-filled into the system)	Welfare of Scheduled Castes and Backward Classes, Punjab

Part-2

Personal Details

1.	Name of Applicant	
2.	Husband/Father's/Mother's Name	
3.	Permanent Address	
4.	Correspondence Address with Mobile Number/	
	e-mail	
5.	Aadhaar Card No. (Attach copy)	

Part-3

Information/documents required specific to the service

Information

1.	Name of beneficiary, if not applicant (Aadhar No. of
	beneficiary, attach copy)
2.	Relation with applicant
3.	Religion (mandatory)
4.	Whether caste certificate has been issued to father. If yes,
	Attach copy.
5	State of origin (Attach copy)

Documents required

submitted Tick ()/Yes

1.	Prescribed application form with Report from Sarpanch	
	/M.C./Nambardar Patwari concerned.	
2.	Self – declaration by the applicant regarding caste by birth	
3.	Attested copy of caste certificate of father	
4.	Attested copy of State of origin	

Signature of Applicant

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

Office of th	ne Tehsildar, Teh. GURDASPUR, GURDASPUR (Punjab) Certificate of Scheduled Caste	
	Sr.No. 68: 75424	3155
Certified that Shri	KUMARI REKHA / ਕੁਮਾਰੀ ਰੇਖਾ	
S/o Shri.	BACHAN SINGH / ਬਚਨ ਸਿੰਘ of DEV NAGAR COLONY, TIBRI ROAD VILL GHURALA	
Village / Town	GHURALA (GSP) / ਘੁਰਾਲਾ of	
District / Division	GURDASPUR / ਗੁਰਦਾਸਪੁਰ	
as Scheduled Caste as Shri KUMARI REKHA	s to RAMDASIA / □□□□□□□ Caste which has been recognize s per "The Constitution (Scheduled Castes). Order 1950". / ਕੁਮਾਰੀ ਰੇਖਾ and his family lives in village / town GHURALA (GSP) / n ਗੁਰਦਾਸਪੁਰ /GURDASPUR of Punjab State.	
Date Of Issuance : 2 3 •	Signature of the Abbroving Authority: Signature of the Abbroving Authority: GURDASPUR Designation : Tehsildar	

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF HEALTH

4. DEPARTMENT OF HEALTH

Application No

Simplified Proforma for Services under Punjab RTS Act (13,14,15)

Part -1

1		Certified Copies of Birth Certificates – Corporation Cities / MC Towns / Rural Areas
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
5	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar No.	
	of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Name of Child	
5	Name of Child's Father	
6	Name of Child's Mother	
7	Name of Child's Grandfather	
8	Date of Birth of Child	
9	Sex (Male /Female)	
10	a) Place of birth (at home)-	
	• Write the name of village, Revenue Block	
	& District in case of rural area.	
	• Write complete address in case of urban	
	area.	
	b) Place of Birth (institutional birth)	
	• Write complete Name & address of	
	Hospital/Nursing Home, PHC/CHC.	
11	If the birth is registered as delayed registration	
	then the year of registration should be mentioned.	
12	No. of Copies of certificate required	

Documents Required		Submitted Tick ($$) / Yes
1	NIL	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Under the provisions of RBD Act, 1969 the events of Births are registered according to their place of occurrence. The detail of offices of Registrars, Births & Deaths where the application for issuance of certified copy of birth certificate can be submitted, is as under:-

S.No	Area	Name of Office
1	Rural area- For current year record.	Multi-Purpose Health Worker (F) of Sub- center having jurisdiction over the village.
2	Rural area- For previous year record.	Respective Civil Surgeon office.
3	Urban area -For current and previous year record	Local Registrar, Births & Deaths, of respective Municipal Corporation/Council.
4	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Current year record	Medical Officer of that medical institution.
5	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Previous year record	*Respective Civil Surgeon office in case the medical institution is located in rural area. *Local Registrar, Births & Deaths, of respective Municipal Corporation/Council in case the medical institution is located in urban area.

 Name of Punjab Government Treasury Head in case the fees is to be deposited in government account.
 2210 – Medical & Public Health

80 – General

800 – Other Receipts

85 – Miscellaneous Receipts

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

ਪੰਜਾਬ ਸਰਕਾਰ / Government of Puniab ਸਿਹਤ ਤੋਂ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ 1036849 Health & Family Welfare Department ਡੀ ਪੀ ਐਚ .D.P.H-368 ਚੀਫ ਰਜਿਸਟਰਾਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ 5./No. 4180 ਫ਼ਾਰਮ/Form-6 Chief Registrar, Births & Deaths, Punjab ਜਨਮ ਸਰਟੀਫਿਕੇਟ / Birth Certificate ਇਹ ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੇਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ਜਨਮ ਰਿਕਾਰਡ ਵਿੱਚੋ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਕਿ ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ ਕੋਂਸਲ/ਪੰਚਾਇਤ/ਪੁਲਿਸ ਥਾਣਾ/ਬਲਾਕ/ਸਬ ਸੈਂਟਰ — 🗴 🛶 – x – × – × ਬਨਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × ਤਹਿਸੀਲ – × – × This is to certify that the following information has been taken from the original birth record which is registered in the birth register of Local Registrar, Births & Deaths, Municipal Corporation / Council / Panchayat / Police Station / Block / Sub Centre Andang Block (P.H.C.) Moonak Tehsil Moonak District Sangezous of Punjab State for the Year 2014 ठाम / Name Amit Singh food / Sex Make นรา ฮา ธาห / Father's Name Subhash Chand ਦਾਦੇ ਦਾ ਨਾਮ / Grand Father's Name Telu Ram ਸਤਾ ਦਾ ਨਾਮ / Mother's Name Har jinder kaur ਜਨਮ ਜਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth Andens ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇ ਮਾਤਾਂਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ-ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child, Vill - Anelg na - Teh Vill- Andans Teh Moong lo Mongk Dist Sangrau Dist. Sangrow ਟਿੱਪਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) Remarks (if any) A No-14/10514 Date 16/9/14 Totom No 56 Remarks (if any) A 122-141 1991 - 1 and a second contraction of the Name & Desigination of Official who prepared certificate Signature, Name & address of the issuing Authority พ.น.ส.(ฮ) อุณ นิชาโยงการกิกิล.th1 above a Dar HPMWR2 ਸਬ ਸੇਂਟਰ 22 28.151. (ਜਿਲ੍ਹਾ ਸੰਗਰਰ) ਮੋਹਰ / Seal ਵੇਰੇ ਜਨਮ ਅਤੇ ਮੌਤ ਗਿਆਵਰੇਸ਼ਨ ਐਕਟ, 1969 ਦੀ ਧਾਰਾ 12/17 ਅਤੇ ਪੰਜਾਬ ਜਨਮ ਤੇ ਮੌਤ ਰਜਿਸਟਰੇਸ਼ਨ ਨਿਯਮ, 2004 ਦੇ ਨਿਯਮ 8/13 ਦੇ ਅਧੀਨ ਜਾਰੀ ਕੀਤਾ ਗਿਆਂ Issued ws12/17 of the registration of Birth & Death Act, 1929 & Rules 8/13 the Punjab Registration of Births & Deaths rules 2004 ਹਰੇਕ ਜਨਮ ਤੋਂ ਮੌਤ ਦੀ ਰਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ " Ensure registration of every birth and death ਮਿਨਮ ਮੌੜ ਦਾ ਘਟਨਾ 21 ਇਨਾ ਵਿਚ ਦਰਜ ਅਰਵਾਕੇ ਸਰਟੀਫਿਕੇਟ ਦੀ ਪਹਿਲੀ ਕਾਪੀ ਮੁਫ਼ਤ ਪ੍ਰਾਪਤ ਕਰੇ। Registered the Births/Deaths events within 21 days and get a free copy of certificate 4576/8-11-2011--30,00,000 ਪੰਜਾਬ ਸਰਕਾਰ ਪ੍ਰੈਸ ਪਟਿਆਲਾ ।

Application No

Simplified Proforma for Services under Punjab RTS Act (13,14,15)

Part -1

1	Name of Service	Certified Copies of Death Certificates – Corporation Cities / MC Towns / Rural Areas
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of the Deceased. (Adhaar No. of	
	Deceased. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Deceased's Father/ Husband's Name	
5	Deceased's Mother Name	
6	Date of Death of Deceased	
7	Sex (Male /Female)	
8	a) Place of death (at home)-	
	• Write the name of village, Revenue Block &	
	District in case of rural area.	
	 Write complete address in case of urban 	
	area.	
	b) Place of Death(institutional Deaths)	
	• Write complete Name and address of	
	Hospital/Nursing Home/PHC/CHC.	
9	If the death is registered as delayed	
	registration then the year of registration	
	should be mentioned.	
10	No. of Copies of certificate required	

Documents Required		Submitted Tick ($$) / Yes	
1	NIL		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Under the provisions of RBD Act, 1969 the events of Deaths are registered according to their place of occurrence. The detail of offices of Registrars, Births & Deaths where the application for issuance of certified copy of death certificate can be submitted, is as under:-

S.No	Area	Name of Office
1	Rural area- For current year record.	Multi-Purpose Health Worker (F) of Sub-center having jurisdiction over the village.
2	Rural area- For previous year record.	Respective Civil Surgeon office.
3	Urban area -For current and previous year record	Local Registrar, Births & Deaths, of respective Municipal Corporation/Council.
4	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Current year record	Medical Officer of that medical institution.
5	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Previous year record	*Respective Civil Surgeon office in case the medical institution is located in rural area. *Local Registrar, Births & Deaths, of respective Municipal Corporation/Council in case the medical institution is located in urban area.

• Name of Punjab Government Treasury Head in case the fees is to be deposited in government account.

2210 – Medical & Public Health

80 – General

800 – Other Receipts

85 – Miscellaneous Receipts

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.		Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

	-532-	
		1000 State
A A A		20
्र यसाथ मत	त्राच / Government of	
12-1	3 3 Udela aund form	TO MICH TO AN INC. BUT AND A STATE
Health 8	Family Welfare Don	orting and
ਡੀ.ਪੀ.ਐਚ./D.P.H369 Chief Rec	ਰਜਿਸਟਰਾਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰ istear, Births & Death	ATE ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
ਫਾਰਮ/Form-7		a cNo
for modeling	रेट / Death Ce	ertificate
ਇਹ ਤਸਦਾਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੈ ਲੋਕਲ ਰਹਿਸਟਰਾਤ ਤਸਤ ਤੇ ਵਿ	ਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ।	ਜਿਹ ਰਿਕਾਰਡ ਵਿੱਚੋਂ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ
ਲੱਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਡ, ਨਗਰ ਨਿਗਮ/ਟ ਬਲਾ	ਸਿਲ/ਗ਼ਾਮ ਪੰਚਾਇਤ/ਬਲ	ਾਕ/ਪੁਲਿਸ ਥਾਣਾ/ਸਬ-ਸੈਂਟਰ
ਤਹਿਸੀਲਬਲਾ	ਕ/ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.)	*
ਤਹਿਸੀਲ ਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ।	Ŋ.	ਪੰਜਾਬ, ਦੇ ਸਾਲ
which is registered in the following	ng information has be	en taken from the original death rec
which is registered in the death register o Council / Gram Panchayat/Block/Polic	Local Registrar Rin	hs & Deather Municipal death rec
Council / Gram Panchayat/Block/Polic Block/Block (P.H.C.)	e Station/Sub-Cent	re Deaths, Municipal Corporatio
Block/Block (P.H.C.)		Tehsil
District ਮ੍ਰਿਤਕ ਦਾ ਨਾਮ / Narie of Deceased	of Punjab State for th	e vear
ਪਿਤਾ ਦਾ ਨਾਮ / Name of Father ਪਤੀ/ਪਤਨੀ ਦਾ ਨਾਮ / Name of Husband/Wite		Sex
ਪਤੀ/ਪਤਨੀ ਦਾ ਨਾਮ / Name of Husband/Wite		
ਪਤੀ/ਪਤਨੀ ਦਾ ਨਾਮ / Name of Husband/Wife ਮਿਤਕ ਦੀ ਮਾਤਾ ਦਾ ਨਾਮ / Name of Deceased		
ਮ੍ਰਿਤਕ ਦੀ ਮਾਤਾ ਦਾ ਨਾਮ / Name of Deceased ਤੇਤ ਦੀ ਮਿਤੀ / Date of Death	Mother	
INHACORS ET IN ST/Date of Registration	ਰਜਿਸਟਰ	時で お/Registration No
a sugar duol 1	ਰਜਿਸਟਰੇ	ਸ਼ੁਨ ਨੈਂ/Registration No
ਮਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ	ਰਜਿਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
a sugar duol 1	ਰਜਿਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
ਮਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ	ਰਜਿਸਟਰ	ਸ਼ੁਨ ਨੇ/Registration No
ਮਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death	ਰਜਿਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
ਮਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ)	ਗਜਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) emarks (if any)	ਗਜਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue	ਗਜਸਟਰ	ਸ਼ੋਠ ਨੇ/Registration No
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸ਼ਈਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਮੁਕੇ ਮਾਜਾ	ਰਾਜਸਟਰ	ੀਮਤਕ ਦਾ ਪੱਕਾ ਪਤਾ ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue	ਗੋਜਸਟਰ ਜਾਰੀ ਕਰ	ਸ਼ੋਠੋ ਠੋਂ/Registration No ਮ੍ਰਿਤੇਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲੇ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖ਼ਤ ਨਾਮ ਤੇ ਪਤਾ
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸ਼ਈਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਮੁਕੇ ਮਾਜਾ	ਗੋਜਸਟਰ ਜਾਰੀ ਕਰ	ੀਮਤਕ ਦਾ ਪੱਕਾ ਪਤਾ ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸ਼ਈਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਮੁਕੇ ਮਾਜਾ	ਗੋਜਸਟਰ ਜਾਰੀ ਕਰ	ਸ਼ੋਠੋ ਠੋਂ/Registration No ਮ੍ਰਿਤੇਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲੇ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖ਼ਤ ਨਾਮ ਤੇ ਪਤਾ
ਮੁਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸ਼ਈਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਮੁਕੇ ਮਾਜਾ	ਗੋਜਸਟਰ ਜਾਰੀ ਕਰ	ਸ਼ੋਠੋ ਠੋਂ/Registration No ਮ੍ਰਿਤੇਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲੇ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖ਼ਤ ਨਾਮ ਤੇ ਪਤਾ
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕਈ ਹੈ) emarks (if any) ਾਰੀ ਕਰਨ ਦੀ ਸਿਤੀ / Date of issue ਸਟੀਫਿਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certifi	ਗੋਜਸਟਰ ਜਾਰੀ ਕਰ sate Signature	ਬੋਠੋ ਠੋਂ/Registration No ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸਪਤ, ਨਾਮ ਤੇ ਪਤਾ Name & address of the issuing Authority
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ ddress of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) emarks (if any) ਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certifi ਸਿੰਘ ਸਿੰਘ ਨੇ ਸ਼ਿੰਦ ਕਿੰਦ ਸੰਕ ਦਾ ਕੇ ਤਾਰ ਹਾਇ	ੀਜਸਟਰ ਜਾਰੀ ਕਰ sate Signature	ਬੋਠੋ ਠੋਂ/Registration No ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲੇ ਅਧਿਕਾਰੀ ਦੇ ਦਸਪਤ, ਨਾਮ ਤੇ ਪਤਾ Name & address of the issuing Authority ਸੋਰਚ / Seol
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ address of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) emarks (if any) ਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸਟੀਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certifi ਸਿੰਘ ਦੇ ਸਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ ਕਰ ਨੇ ਪੰਤ ਦੇ ਗੀ-ਸਟਰ ਵਿੱਚ ਮੰਤ ਦਾ ਜੋ ਕਾਰਨ ਦੱਸਿਆ। Note The cause of Death registered ਦਿਆ।	ਰੀਜਸਟਰ ਜਾਰੀ ਕਰ sate Signature ਗਆ ਹੈ, ਉਸ ਬਾਰੇ ਕਈ ਸੂਚਨ	ਸ਼ੋਠ ਨੇ/Registration No ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖਤ, ਨਾਮ ਤੇ ਪਤਾ Name & address of the issuing Authority ਸੋਹਰ / Seol
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ address of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) emarks (if any) ਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਸਟੀਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certifi ਸਿੰਘ ਦੇ ਸਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ ਕਰ ਨੇ ਪੰਤ ਦੇ ਗੀ-ਸਟਰ ਵਿੱਚ ਮੰਤ ਦਾ ਜੋ ਕਾਰਨ ਦੱਸਿਆ। Note The cause of Death registered ਦਿਆ।	ਰੀਜਸਟਰ ਜਾਰੀ ਕਰ sate Signature ਗਆ ਹੈ, ਉਸ ਬਾਰੇ ਕਈ ਸੂਚਨ	ਸ਼ੋਠ ਨੇ/Registration No ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖਤ, ਨਾਮ ਤੇ ਪਤਾ Name & address of the issuing Authority ਸੋਹਰ / Seol
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ address of deceased at the time of death ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) emarks (if any) ਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certific	ਜਾਰੀ ਕਰ pate Signature ਗਿਆ ਹੈ, ਉਸ ਸਾਰੇ ਕਈ ਸੂਚਾ register, will not be rec ਓ / Ensure registrati	ਸ਼ੋਠ ਨੇ/Registration No ਸਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ Permanent addressof the decease ਨੇ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸ਼ਖਤ, ਨਾਮ ਤੇ ਪਤਾ Name & address of the issuing Authority ਸੋਹਰ / Seol

Application No

Simplified Proforma for Services under Punjab RTS Act [16.a(1)]

Part -1

1	Name of Service	Late Registration of Birth and Issue of Certificate (after 30 days but within one year)
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	None of hereficient if not analized	
1	Name of beneficiary , if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of application	
4	Sex (Male/Female)	
5	Child's Father's Name	
6	Child's Mother's Name	
7	Child's Grandfather's Name	
8	Date of Birth of child	
	a) Place of birth (at home)-	
	• Write the name of village in case	
	of rural area.	
	• Write complete address in case of	
9	urban area.	
	b) Place of Birth (institutional birth)	
	• Write complete Name of	
	Hospital/Nursing Home .	
10	No.of copies of certificate required	

Documents Required

1	Self Declaration	
2	Information form No.1 for Birth (in duplicate)	
3	Proof of date of birth (hospital/ nursing home report in case of	
	institutional birth or a copy of Mother & Child Protection (MCP)	
	Card in case of domiciliary birth)	
4	Report of Registrar that the relevant event is not registered in the	
	registration record	
5	Receipt of requisite late fee of Rs. 10/-	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

S.No	Area	Competent authority for issuing delayed registration
		order after 30 days but within 1 year
1	Rural area	Senior Medical Officer-cum-Additional District Registrar, Births & Deaths I/c of Community Health Centre/Primary Health Centre
2	Urban area	Civil Surgeon-cum- District Registrar, Births & Deaths

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

ਇਹ ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੇਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ਜਨਮ ਰਿਕਾਰਡ ਵਿੱਚੋਂ ਲਈ ਗਈ ਹੈ ਜਿਹੜ ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ ਕੋਸਲ/ਪੰਚਾਇਤ/ਪੁਲਿਸ ਥਾਣਾ/ਬਲਕ/ਸਬ ਸੈਂਟਰ – × – × – ਮ ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × – × ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × – × – × – × – × – × ਦੀ ਸ਼ਿਲਾ Corporation / Council / Panchayat / Police Station / Biock / Sub Centre – <i>Rhadaus</i> Block (P.H.C) – <i>Macma</i> k Block (P.H.C) – <i>Macma</i> k Block (P.H.C) – <i>Macma</i> k District – – <i>Saugha</i> 50 – <i>Ramanal State</i> for the Year – <i>Saugha</i> 76 – <i>Name</i> – <i>Saugha</i> 76 – <i>Ram</i> – – – – – – <i>Ramanal State</i> for the Year – <i>Saugha</i> 76 – <i>Name</i> – <i>Saugha</i> 76 – <i>Name</i> – <i>Saugha</i> 76 – <i>Macma</i> k <i>Macma</i> k Dist <i>Saug</i> 76 – <i>Macma</i> k <i>Dist Saug</i> 76 – <i>Macma</i> k <i>Macma</i> k Dist <i>Saug</i> 76 – <i>Macma</i> k <i>Dist Saug</i> 76 – <i>Macma</i> k <i>Dist Saug</i> 76 – <i>Macma</i> k <i>Dist Saug</i> 76 – <i>Macma</i> 87 – <i>Saug</i> 72,50 – <i>Saug</i> 72,50 – <i>Macma</i> 87 – <i>Saug</i> 72,50 – <i>Saug</i> 72,50 – <i>Saug</i> 72,50 – <i>Macma</i> 76 – <i>Ma</i>	ата наата / Government of Punjab Гята з ибаета затеї fasta salth & Family Weltare Department चौढ वfнягата нам з йз, и́лта ef Registrar, Births & Deaths, Punjab scilfaar / Birth, Certificate	
- x - x ноча (ਪੀ. ਐਚ.मी.) - x<		
f нछ - - - - - च = <td></td> <td></td>		
This is to certify that the following information has been taken from the original I record which is registered in the birth register of Local Registrar, Births & Deaths, Munic Corporation / Council / Panchayat / Police Station / Block / Sub Centre. Block (P.H.C.). Maranak. District. Serve 22043. of Punjab State for the Year. Serve 4. District. Serve 22043. Serve 4. District. Serve 22043. Serve 4. District. Serve 22043. Serve 4. District. Serve 22043. Serve 4. District. Serve 22043. Serve 4. District. Serve 4. District. Ser	मो.)	·
record which is registered in the birth register of Local Registrar, Births & Deaths, Munic Corporation / Council / Panchayat / Police Station / Block / Sub Centre	,ਪੰਜਾਬ, ਦੇ ਸਾਲਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ ।	
ਦਾਏ ਦਾ ਨਾਮ / Grand Father's Name Telu Ram ਮਾਤਾ ਦਾ ਨਾਮ / Mother's Name Haz jindez k.au2 ਜਨਮ ਮਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth Andens ਹਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ/ Date of Registration 82-16-20/40ਜਿਸਟਰੇਸ਼ਨ ਨੰਬਰ/ Registration No. 7 ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child Null Ander 10 - 7el Nill-Anders Teh Morang k Moong k Dist Sangrow Feuerare (if any) A No - 14/10514 Date 16/14/19 - 51192 with 16/ ਸਰੀ ਕਰਨ ਦੀ ਸਿਤੀ / Date of issue 17-11-2014 ਸਰੀ ਕਰਨ ਦੀ ਸਿਤੀ / Date of of sue 17-11-2014 Name & Designation of Official who prepared certificate Signature Name & address of the issuing Autor	e birth register of Local Registrar, Births & Deaths, Munic Police Station / Block / Sub Centre	cipal
ਸਾਤਾ ਦਾ ਨਾਮ / Mother's Name Har jinder kaw? ਜਨਮ ਮਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth Andans ਰਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ / Date of Registration 22-16-26/4 ਰਜਿਸਟਰੇਸ਼ਨ ਨੰਬਰ/ Registration No? ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ-ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child Null - Andans - 7e A Mona k Dist Sangraw Feuer dat ਹੈ) Remarks (if any) A Ma-M10514 Date 16/9/4 Token Mp Shigh whe 16/ ਸਰੀ ਕਰਰ ਦੀ ਮਿਤੀ / Date of issue 17-11-2014 ਸਰਟੀਟਿਕਟ ਤਿਆਰ ਕਰਨ ਵਲੋਂ ਦਾ ਨਮ ਅਤੇ ਅਰੁਦਾ Name & Designation of Official who prepared certificate		
ਜਨਮ ਸਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth Andaus ਰਜਿਸਟਰੇਸ਼ਨ ਦੀ ਜਿਤੀ / Date of Registration 22-10-20/4 ਰਜਿਸਟਰੇਸ਼ਨ ਨੰਬਰ/ Registration No? ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child Wall-Andaus Teh Morary & Mana & Dist Sangzow Feuel (ਜਕਰ ਕੋਈ ਹੈ) Remarks (if any) A Ma-M 10514 Date 16/9/4 Tohun Stight Stight Aute 16/ ਸਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue 17-11-2014 ਸਰਟੀਵਿਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਮ ਅਤੇ ਅਰੁਦਾ Name & Designation of Official who prepared certificate		
ਰਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ / Date of Registration % - 10 - 2014 ਰਜਿਸਟਰੇਸ਼ਨ ਨੰਬਰ/ Registration No? ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇ ਮਾਤਾਪਿਤਾ ਦਾ ਪਤਾ Address of parents at the time of birth of the child Will - Anelg 15 - 701 Mile nag k Dist Sangrow? Tevel (ਜੇਕਰ ਕੋਈ ਹੈ) Remarks (if any) A Ma - 14 10514 Date 16 19 19 - 70 10 10 10 10 10 10 10 10 10 10 10 10 10		
at e Address of parents at the time of birth of the child Hist fust e var ust Permanent address of Parents Monag k Dist Soungsould Monag k Dist Soungsould Monag k Dist Soungsould Féuel national de la state Dist Soungsould Remarks (if any) A Alla - 14/10.514 Address of parents Dist Soungsould Féuel national de la state Dist Soungsould rational de la state Distate ratio	2-1992 ADH MARTO/ Place of Birth. Andang	
Subharen Darz MIMWER Harger Harger Harger	Highly Tolow of the issuing Author 2. Highly Tolow of Still - And Still - And Still - And Still - Morang 18 Mill - And Still - Tolow Market Still - Morang 18 Dist: Sangzow Song Zow Dist: Sangzow Signature, stang & address of the issuing Author Murenes, ogn Golles - Market 1 Hang Barga.	9.][2 ority
ਮਹਰ / Seal	ਮਹਰ / Seal	
ਿੰਟ, ਸ਼ਰਮ ਅਤੇ ਮੰਤੂ ਅੱਜ ਦਰੰਸ਼ਨ ਕੇਂਘਣ, 1969 ਦੀ ਧਾਰਾ 12/17 ਅਤੇ ਪੰਜਾਬ ਸ਼ਰਮ ਤੇ ਸ਼ੁੱਤ ਗੀਜਸਟਰੇਸ਼ਨ ਨਿਰਮ, 2004 ਦੇ ਨਿਰਮ 8/13 ਦੇ ਕਹਾਨ ਸਾਗੇ ਕੀਤਾ ਗਿਆ।		1985

4576/8-11-2011--30,00,000 ਪੋਜਾਬ ਸਰਕਾਰ ਪ੍ਰੈਸ ਪਟਿਆਬਾ

Simplified Proforma for Services under Punjab RTS Act [16.a(2)]

Part -1

1	Name of Service	Late Registration of Death and Issue of Certificate (after 30 days but within one year)
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of deceased	
	(Adhaar No. of deceased. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Sex (Male/Female)	
5	Father's Name of deceased	
6	Spouse (Husband/Wife's) Name of	
	deceased	
7	Mother's name of deceased	
8	Date of Death	
	a) Place of death (at home)-	
	• Write the name of village in case	
	of rural area.	
	• Write complete address in case of	
9	urban area.	
	b) Place of death (institutional death)	
	• Write complete Name of Hospital/	
	Nursing Home.	
10	No. of copies of certificate required	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self Declaration
2	Information Form No. 2 (in duplicate)
3	Report of Registrar that the relevant event is not registered in the registration record
4	Proof of date of death (hospital/ nursing home report in case of institutional death/ a copy of FIR and Post Mortem in case of accidental deaths and cremation/burial ground report or copy of report of Immersion of ashes in case of domiciliary deaths)
5	Copy of ID proof of the informant/ applicant
6	Receipt of requisite late fee of Rs 10/-

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

S.No	Area	Competent authority for issuing delayed registration order after 30 days but within 1 year
1	Rural area	Senior Medical Officer-cum-Additional District Registrar, Births & Deaths I/c of Community Health Centre/Primary Health Centre
2	Urban area	Civil Surgeon-cum- District Registrar, Births & Deaths

1.	Application Receipt No.	4.		Date by which Service to	
				be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6.	6.	Signature of authorised	
				official	

· ·	- FR		
a contraction of the second se	india dala		
ਸਿਹਤ ਤੋਂ ਪਰਿਵ	vernment of Punjab রার রস্রায় হিরারা		
Health & Family V	Welfare Department		
ਚਾਫ ਹੋ।ਜਸਟੋਰਾਰ	ਜਨਮ ਦੇ ਪੱਤਾ ਪੰਤਾਬਾ		
STEP FIF AND A	ths & Deaths, Punjab		
ਸਤ ਸਰਟੀਫਿਕਟ / [Death Certificate		
ਇਹ ਤਸ਼ਜੀਕ ਕੀਤਾ ਜਾਂਦਾ ਦੇ ਦਿ ਤੇ 6			
ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ਕੌਂਸਲ/ਗ੍ਰਾਮ ਬਲਾਕ/ਕਸਲ	ਪਿੰਚਾਇਤ/ਬਲਾਕ/ਪੁਲਿਸ ਸ਼ਾਣਾ/ਬਸ-ਬੇਂਡਤ		
	(ਪੀ ਐਚ ਸੀ.)		
ਤਰਸਾਲ ਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ।	(ਪੀ.ਅੱਚ.ਸੀ.)ਪੰਜਾਬ, ਦੇ ਸਾਲ		
This is to certify that the following inform	hation has been taken from the original death record		
which is registered in the death register of Local R Council / Gram Panchayat/Block/Police Statio	egistrar, Births & Deaths, Municipal, Corporation		
Council / Gram Panchayat/Block/Police Statio	n/Sub-Centre		
District			
District of Punjat ਮਿਤਕ ਦਾ ਨਾਮ / Name of Decenced	o State for the year		
ਸਿਤਕ ਦਾ ਨਾਮ / Name of Deceased ਪਿਤਾ ਦਾ ਨਾਮ / Name of Father	: ਲਿੰਗ / Sex		
ਮਿਤਕ ਦੀ ਮਾਤਾ ਦਾ ਨਾਮ / Name of Deceased's Mother ਮੌਤ ਦੀ ਮਿਤੀ / Date of Death			
ਮੌਤ ਦੀ ਮਿਤੀ / Date of Deathਮੌਤ ਅਸਥਾਟ ਰਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ/Date of Registration	5 / Place of Death		
ਰਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ/Date of Registration	र्गनमटनेमरु रूँ /Registration M		
ਮ੍ਰੇਤਕ ਦਾ ਮੌਤ ਸਮੇਂ ਪਤਾ	the gran and in No.		
Address of deceased at the time of death	ਮਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ		
and at the time of death	Permanent addressof the deceased		
ਟੱਪਣੀ (ਜੇਕਰ ਕਈ ਹੈ)			
emarks (if any)			
ਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue	and an and a second		
BUILDE TAND ATT ATT ATT ATT ATT			
ame & Designation of Official who prepared certificate	ਜਾਰੀ ਕਰਨ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸਖਤ, ਨਾਮ ਤੇ ਪਤਾ Simplure New 2		
	Signature. Name & address of the issuing Authority		
	The second		
	and the second s		
	ਸੋਹਰ / Seal		
ਸ਼ਿਸ਼ਨਸ਼ਸ਼ ਸ਼ੁਰੂ ਦੇ ਸੰਸਟ ਸਿੰਘ ਦੇ ਸੱਤ ਦਾ ਜੋ ਕਾਰਨ ਦੱਸਿਆ ਗਿਆ ਹੈ। ਇ			
Note . The cause of Death registered in Doub	ਸ ਬਾਰੇ ਕੋਈ ਸੂਚਨਾ ਸਰਟਾਫਿਕਟ ਵਿੱਚ ਨਹੀਂ ਦਿੱਤੀ ਜਾਵੇਗੇ।		
Note The cause of Death registered in Death register, will not be record given in the Death Certificate ਹੋਰਕ ਜਨਮ ਤੇ ਮੰਤ ਦੀ ਰੋਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ / Ensure registration of every birth and death			
ਹਰਕ ਜਨਮ ਤੋਂ ਮੱਤ ਦੀ ਰੋਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਇ / ਸ਼ੁਰੂ	are registration of every birth and death		
ਹਰਕ ਜਨਮ ਤੋਂ ਮੱਤੇ ਦੀ ਰੋਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ / Ens	salada and seala		
ਹਰਕ ਜਨਮ ਤੁੱਖਤ ਦੀ ਰਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ / Ens	82.32.70 × 20.14, 10.00 (२०), यांगा मर्वचांत येम भेवा ह भेव हतात		

Simplified Proforma for Services under Punjab RTS Act [16.b(1)]

1	Name of Service	Late Registration of Birth and Issue of Certificate (after one year) (Urban / Rural)
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)



Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Sex (Male/Female)	
5	Father's Name	
6	Grandfather's Name	
7	Child's Mother Name	
8	Date of Birth of child	
	a) Place of birth (at home)-	
	• Write the name of village in case	
	of rural area.	
	• Write complete address in case of	
	urban area.	
9	b) Place of Birth (institutional birth)	
	• Write complete Name of	
	Hospital/Nursing Home .	
10	No. of copies of certificate required	

1	Self Declaration	
2	Information form No.1 (in duplicate)	
3	Proof of date of birth (hospital/ nursing home report in case of institutional birth or a copy of school certificate or passport or driving license or Mother & Child Protection (MCP) card in case of domiciliary birth- (any two documents out of these may be submitted)	
4	Proof of residence of the applicant- A copy of voter card or valid passport or telephone bill or electricity bill or LIC cover note at least 6 months old or Employer Certificate issued by the competent authority in case of employee of State/Central Govt.	
5	Non Availability Certificate (NAC) for 3 years (1 year NAC may be attached if the birth had occurred in a medical institution)	
6	2 witnesses of credible persons (Sarpanch and Panch or Municipal Councilor or MLA or Gazetted Officer)	
7	Receipt of requisite late fee of Rs. 20/-	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Competent authority for issuing delayed	Area Magistrate/ Sub Divisional Magistrate
registration order after 1 year	(for both Rural & Urban areas)

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

A ਪੰਜਾਬ ਸਰਕਾਰ / Government of Puniab ਸਿਹਤ ਤੋਂ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ 1036849 Health & Family Welfare Department ਚੀਫ ਰਜਿਸਟਰਾਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ ਡੀ ਪੀ ਐਚ .D.P.H-368 5./No. 4180 ਫ਼ਾਰਮ/Form-6 Chief Registrar, Births & Deaths, Punjab ਜਨਮ ਸਰਟੀਫਿਕੋਟ / Birth Certificate ਇਹ ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੇਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ਜਨਮ ਰਿਕਾਰਡ ਵਿੱਚੋ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਕਿ ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ ਕੋਂਸਲ/ਪੰਚਾਇਤ/ਪੁਲਿਸ ਥਾਣਾ/ਬਲਾਕ/ਸਬ ਸੈਂਟਰ – x – × – × ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × ਤਹਿਸੀਲ – × – × ਜਿਲਾ _ < _ < _ < _ < _ < _ ਪੰਜਾਬ, ਦੇ ਸਾਲ _ < ਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ। This is to certify that the following information has been taken from the original birth record which is registered in the birth register of Local Registrar, Births & Deaths, Municipal Corporation / Council / Panchayat / Police Station / Block / Sub Centre Andang Block (P.H.C.) Moonak Tehsil Moonak District Sangezous of Punjab State for the Year 2014 ਨਾਮ / Name Amit Singh ਇੰਗ / Sex Make fur er ort / Father's Name Subhash Chand ਦਾਦੇ ਦਾ ਨਾਮ / Grand Father's Name Telu Ram ਸਤਾ ਦਾ ਨਾਮ / Mother's Name Har jinder kaur ਜਨਮ ਮਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth. Andang ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ-ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child, Vill - Anelg na - Teh Vill- Andans Teh Moong lo Mongk Dist Sangeous Dist. Sangrown ਟਿੱਪਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) Remarks (if any) A No-14/10514 Date 16/9/14 Totom No 56 Name & Designation of Official who prepared certificate Signature, Name & address of the issuing Authority พ.น.ส.(ฮ) อูกะ นิยาใช้ระการใก้ล.th1 subhren Dar HPMWR2 ਸਬ ਸੈਂਟਰ 20 282.151. (ਜਿਲ੍ਹਾ ਸੰਗਰਗ) ਮੋਹਰ / Seal ਨੋਟ, ਸ਼ਨਮ ਅਤੇ ਮੇਤ ਗਿਆਟਰੇਸ਼ਨ ਐਕਟ, 1969 ਦੀ ਧਾਰਾ 12/17 ਅਤੇ ਪੰਜਾਬ ਜਨਮ ਤੇ ਮੇਤ ਰਜਿਸਟਰੇਸ਼ਨ ਨਿਯਮ, 2004 ਦੇ ਨਿਯਮ 8/13 ਦੇ ਅਧੀਨ ਜਾਰੀ ਕੀਤਾ ਗਿਆ। Issued u/s12/17 of the registration of Birth & Deoth Act, 1929 & Rules 8/13 the Punjob Registration of Births & Deoths rules 2004 ਹਰੇਕ ਜਨਮ ਤੋਂ ਮੌਤ ਦੀ ਰਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ - Ensure registration of every birth and death ਮਿਨਮ ਮੌੜ ਦਾ ਘਟਨਾ 21 ਇਨਾ ਵਿਚ ਦਰਜ ਅਰਵਾਕੇ ਸਰਟੀਫਿਕੇਟ ਦੀ ਪਹਿਲੀ ਕਾਪੀ ਮੁਫ਼ਤ ਪ੍ਰਾਪਤ ਕਰੇ। Registered the Births/Deaths events within 21 days and get a free copy of certificate 4576/8-11-2011--30.00.000 ਪੰਜਾਬ ਸਰਕਾਰ ਪੈਸ ਪਟਿਆਲਾ ।

Simplified Proforma for Services under Punjab RTS Act [16.b(2)]

1	Name of Service	Late Registration of Death and Issue of Certificate (after one year) (Urban / Rural)
2	Name of Department/ Service	Health
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	



Information / Documents required specific to the service

Information

1		
1	Name of deceased	
	(Adhaar No. of deceased. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Sex (Male/Female)	
5	Father's Name of deceased	
6	Spouse (Husband/Wife's) Name of	
	deceased	
7	Mother's name of deceased	
8	Date of Death	
9	a) Place of death (at home)-	
	• Write the name of village in case	
	of rural area.	
	• Write complete address in case of	
	urban area.	
	b) Place of death (institutional death)	
	• Write complete Name of	
	Hospital/Nursing Home .	
10	No.of copies of certificate required	

Documents Required

1	Self declaration	
2	Information form No.2 (in duplicate)	
3	Proof of date of death (hospital/ nursing home report in case of institutional death/ a copy of FIR and Post Mortem in case of accidental deaths and cremation/ burial ground report or copy of report of immersion of ashes in case of domiciliary deaths)	
4	Proof of residence of the applicant- A copy of voter card or valid passport or telephone bill or electricity bill or LIC cover note at least 6 months old or Employer Certificate issued by the competent authority in case of employee of State/Central Govt.	
5	Non Availability Certificate (NAC) for 3 years (1 year NAC may be attached if the death is occurred in a medical institution)	
6	2 witnesses of credible persons (Sarpanch and Panch or Municipal Councilor or MLA or Gazetted Officer)	
7	Copy of ID proof of the informant/ applicant	
8	Receipt of requisite late Fee of Rs. 20/-	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Competent authority for issuing delayed	Area Magistrate/ Sub Divisional Magistrate
registration order after 1 year	(for both Rural & Urban areas)

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6	6.	Signature of authorised	
				official	

and the local of the	Trana Jana	
ਪੰਜਾਬ ਸਰਕਾਰ / G	overnment of Punjab ਰਵਾਰ ਭਲਾਈ ਵਿਭਾਗ	
· Health & Family	Welfore Department	
चाढ वानगटना	ਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ arths & Deaths, Punjab	
STEDIA CONTRACT	Death Certificate	
ਇਹ ਤਸਦੀਰ ਕੀਤਾ ਰਾਂਚ ਹੈ ਦਿ ਹੈ ।	Death Certificate	
ਲੱਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ ਨਗਰ ਨਿਰਾਮ ਕੀਤਾ ਕ	ਸੂਚਨਾ ਅਸਲ ਮੌਤ ਰਿਕਾਰਡ ਵਿੱਚੋਂ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਫਿ	
	न पर्छग्रहार्थर व/पारुम मन्हा/प्रध-प्रदित	
ਤਹਿਸੀਲ		
This is to certify that the following infor	mation has been taken from the original death recor	
Council / Gram Reschaust/P/	mation has been taken from the original death recor Registrar, Births & Deaths, Municipal Corporation	
Block/Block (PHC)	ion odb-oentre	
District	oh Chete d	
ਮੁਤਕ ਦੀ ਮਾਤਾ ਦਾ ਨਾਮ / Name of Deceased's Mothe	Г	
ਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ/Date of Registration	ਾਨ / Place of Death ਰਜਿਸਟਰੇਸ਼ਨ ਨੂੰ/Registration No	
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਖ਼ਤਾ	strates ab by Registration No	
ddress of deceased at the time of death	ਮਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ	
and an activity of activity	Permanent addressof the deceased	
ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ)	a second a second state of the second states	
emarks (if any)	·	
ਸੀ ਕਰਨ ਦੀ 6 ਦਰੋ ਹਨ		
'ਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਟਿਕੇਟ ਤਿਆਰ ਕਰਨ ਕਰੇ	ਜਾਰੀ ਕਰਨ ਤਾਲ ਆਇਆ ਦੇ ਦ	
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	ਾ ਨਾ ਕਰਨ ਵਾਲ ਸਾਹਕਾਰਾ ਦੇ ਦਸੰਖਤ, ਨਾਮ ਤੇ ਪਤਾ	
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	ਜਾਰੀ ਕਰਨ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸਖਤ, ਨਾਮ ਤੇ ਪਤਾ Signature, Name & adurass of the issuing Authority	
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	Signature, Name & aduress of the issuing Authority	
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	Signature, Name & aduress or the issuing Authority	
ਸ਼ਿਫ਼ਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate	Signature, Name & address of the issuing Authority	
ਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਫਿਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate ਨਿੰਨ ਪਿੰਡ ਦੇ ਰੀ-ਸਟਰ ਵਿੱਚ ਮੌਤ ਦਾ ਜੋ ਕਾਰਨ ਦੱਸਿਆ ਜਿਆ ਤੇ	H군국 / Seal	
ਸ਼ਿਫ਼ਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate	Signature, Name & address of the issuing Authority ਮਿੰਟਰ / Seoi ਉਸ ਬਾਰੇ ਕਈ ਸੂਚਨਾ ਸਰਟਾਫਿਕਟ ਵਿੱਚ ਨਹੀਂ ਦਿੱਤੀ ਜਾਵੇਗੀ।	

Simplified Proforma for Services under Punjab RTS Act (17)

Part -1

1	Name of Service	Birth Certificate (after addition of name of child)
2	Name of Department/ Service Provider (Pre-filled into the system)	Health

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Name of the child to be recorded	
5	Sex (Male/Female)	
6	Father's Name	
7	Grandfather's Name	
8	Child's Mother's Name	
9	Date of Birth of child	
10	Place of birth	
11	No. of Copies of certificate required	

Documents Required Yes

1	Self-declaration	
2	Birth Certificate or its copy	
3	Copy of supporting document for entering name of child like School Certificate or Passport or Voter Card or Driving License or Mother and Child Protection (MCP) Card or Insurance Policy. In case the child is infant then self declaration is sufficient for this purpose.	
4	Receipt of requisite fee of Rs. 10/- (No fee is required if the child's name is being recorded within 1 year from date of registration of birth)	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

S.No	Area	Name of Office
1	Rural area- For current year record.	Multi-Purpose Health Worker (F) of Sub- center having jurisdiction over the village.
2	Rural area- For previous year record.	Respective Civil Surgeon office.
3	Urban area -For current and previous year record	Local Registrar, Births & Deaths, of respective Municipal Corporation/Council.
4	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Current year record	Medical Officer of that medical institution.
5	Government medical institution like Civil Hospital/Community Health Centre/Primary Health Centre – Previous year record	*Respective Civil Surgeon office in case the medical institution is located in rural area. *Local Registrar, Births & Deaths, of respective Municipal Corporation/Council in case the medical institution is located in urban area.

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

A THURSDAY ਪੰਜਾਬ ਸਰਕਾਰ / Government of Puniab ਸਿਹਤ ਤੋਂ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ 1036849 Health & Family Welfare Department ਚੀਫ ਰਜਿਸਟਰਾਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ ਡੀ ਪੀ ਐਚ .D.P.H-368 5./No. 4180 ਫ਼ਾਰਮ/Form-6 Chief Registrar, Births & Deaths, Punjab ਜਨਮ ਸਰਟੀਫਿਕੋਟ / Birth Certificate ਇਹ ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੇਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ਜਨਮ ਰਿਕਾਰਡ ਵਿੱਚੋ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਕਿ ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ ਕੋਂਸਲ/ਪੰਚਾਇਤ/ਪੁਲਿਸ ਥਾਣਾ/ਬਲਾਕ/ਸਬ ਸੈਂਟਰ – x – × – × ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × ਤਹਿਸੀਲ – × – × ਜਿਲਾ _ < _ < _ < _ < _ < _ ਪੰਜਾਬ, ਦੇ ਸਾਲ _ < ਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ। This is to certify that the following information has been taken from the original birth record which is registered in the birth register of Local Registrar, Births & Deaths, Municipal Corporation / Council / Panchayat / Police Station / Block / Sub Centre Andang Block (P.H.C.) Moonak Tehsil Moonak District Sangezous of Punjab State for the Year 2014 ਨਾਮ / Name Amit Singh ਇੰਗ / Sex Make fur er ort / Father's Name Subhash Chand ਦਾਦੇ ਦਾ ਨਾਮ / Grand Father's Name Telu Ram ਸਤਾ ਦਾ ਨਾਮ / Mother's Name Har jinder kaur ਜਨਮ ਮਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth. Andang ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ-ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child, Vill - Anelg na - Teh Vill- Andans Teh Moong lo Mongk Dist Sangeous Dist. Sangtown ਟਿੱਪਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) Remarks (if any) A No-14/10514 Date 16/9/14 Totom No 56 ਸਰਟੀਫਿਕੇਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁੰਦਾ Name & Designation of Official who prepared certificate Signature, Name & address of the issuing Authority พ.น.ส.(ฮ) สุหม นิฮาโยระกา**หากว.1**h1 subhren Dar HPMWR2 ਸਬ ਸੈਂਟਰ 20 282.151. (ਜਿਲ੍ਹਾ ਸੰਗਰਗ) ਮੋਹਰ / Seal ਨੋਟ, ਸ਼ਨਮ ਅਤੇ ਮੇਤ ਗਿਆਟਰੇਸ਼ਨ ਐਕਟ, 1969 ਦੀ ਧਾਰਾ 12/17 ਅਤੇ ਪੰਜਾਬ ਜਨਮ ਤੇ ਮੇਤ ਰਜਿਸਟਰੇਸ਼ਨ ਨਿਯਮ, 2004 ਦੇ ਨਿਯਮ 8/13 ਦੇ ਅਧੀਨ ਜਾਰੀ ਕੀਤਾ ਗਿਆ। Issued u/s12/17 of the registration of Birth & Deoth Act, 1929 & Rules 8/13 the Punjob Registration of Births & Deoths rules 2004 ਹਰੇਕ ਜਨਮ ਤੋਂ ਮੌਤ ਦੀ ਰਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ - Ensure registration of every birth and death ਮਿਨਮ ਮੌੜ ਦਾ ਘਟਨਾ 21 ਇਨਾ ਵਿਚ ਦਰਜ ਅਰਵਾਕੇ ਸਰਟੀਫਿਕੇਟ ਦੀ ਪਹਿਲੀ ਕਾਪੀ ਮੁਫ਼ਤ ਪ੍ਰਾਪਤ ਕਰੇ। Registered the Births/Deaths events within 21 days and get a free copy of certificate 4576/8-11-2011--30.00.000 ਪੰਜਾਬ ਸਰਕਾਰ ਪੈਸ ਪਟਿਆਲਾ ।

Application No Simplified Proforma for Services under Punjab RTS Act (18)

	Part -1		
1	Name of Service	Correction of Entry in Birth Certificate	
2	Name of Department/ Service Provider (Pre-filled into the system)	Health	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service Information

1	Name of beneficiary, if not applicant. (Adhaar No. of
1	beneficiary. Attach Copy)
2	Relationship with applicant
3	Date of Application
4	Sex (Male/Female)
5	Father's Name
6	Grandfather's Name
7	Child's Mother Name
8	Date of Birth
9	Place of Birth
10	Address of Parents at the time of birth
11	Permanent Address of Parents
12	Give detail about correction to be made

Documents Required Yes

1	Self-declaration	
2	Existing Birth Certificate or its copy	
3	2 witnesses of credible persons (Sarpanch and Panch in case of rural	
	area and Municipal Councillor or MLA or Gazetted Officer in case of	
	urban area)	
4	Copy of school certificate or passport or driving licence or any other	
	document in which the complete detail pertaining to correction	
	required is mentioned (any two)	
5	Report of hospital or nursing home in case of institutional birth	
6	Proof of residence- copy of Voter Card or Passport or Electricity Bill or	
	Telephone Bill	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Servic <mark>e to</mark>
			be provided
2	Service asked for	5.	Fees/Facilitation Charges,
			if any
3.	Date of Application	6.	Signature of authorised
			official

A THURSDAY ----ਪੰਜਾਬ ਸਰਕਾਰ / Government of Puniab ਸਿਹਤ ਤੋਂ ਪਰਿਵਾਰ ਭਲਾਈ ਵਿਭਾਗ 1036849 Health & Family Welfare Department ਚੀਫ ਰਜਿਸਟਰਾਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ ਡੀ ਪੀ ਐਚ .D.P.H-368 5./No. 4180 ਫ਼ਾਰਮ/Form-6 Chief Registrar, Births & Deaths, Punjab ਜਨਮ ਸਰਟੀਫਿਕੋਟ / Birth Certificate ਇਹ ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ ਹੇਠ ਲਿਖੀ ਸੂਚਨਾ ਅਸਲ ਜਨਮ ਰਿਕਾਰਡ ਵਿੱਚੋ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਕਿ ਲੋਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ, ਨਗਰ ਨਿਗਮ/ ਕੋਂਸਲ/ਪੰਚਾਇਤ/ਪੁਲਿਸ ਥਾਣਾ/ਬਲਾਕ/ਸਬ ਸੈਂਟਰ – x – × – × ਬਲਾਕ (ਪੀ.ਐਚ.ਸੀ.) – × – × – × ਤਹਿਸੀਲ – × – × ਜਿਲਾ _ < _ < _ < _ < _ < _ ਪੰਜਾਬ, ਦੇ ਸਾਲ _ < ਦੇ ਰਜਿਸਟਰ ਵਿੱਚ ਦਰਜ ਹੈ। This is to certify that the following information has been taken from the original birth record which is registered in the birth register of Local Registrar, Births & Deaths, Municipal Corporation / Council / Panchayat / Police Station / Block / Sub Centre Andang Block (P.H.C.) Moonak Tehsil Moonak District Sangezous of Punjab State for the Year 2014 ਨਾਮ / Name Amit Singh ਇੰਗ / Sex Make นรา ฮา ธาห / Father's Name Subhash Chand ਦਾਦੇ ਦਾ ਨਾਮ / Grand Father's Name Telu Ram ਸਤਾ ਦਾ ਨਾਮ / Mother's Name Har jinder kaur ਜਨਮ ਮਿਤੀ/ Date of Birth 25-12-1992 ਜਨਮ ਅਸਥਾਨ/ Place of Birth. Andang ਬੱਚੇ ਦੇ ਜਨਮ ਸਮੇਂ ਮਾਤਾ ਪਿਤਾ ਦਾ ਪਤਾ ਮਾਤਾ-ਪਿਤਾ ਦਾ ਪੱਕਾ ਪਤਾ Address of parents at the time of Permanent address of Parents birth of the child, Vill - Anelg na - Teh Vill- Andans Teh Moong lo Mongk Dist Sangeous Dist. Sangtown ਟਿੱਪਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ) Remarks (if any) A No-14/10514 Date 16/9/14 Totom No 56 Name & Designation of Official who prepared certificate Signature, Name & address of the issuing Authority พ.น.ส.(ฮ) สุหม นิฮาโยระกา**หากว.1**h1 subhren Dar HPMWR2 ਸਬ ਸੈਂਟਰ 20 282.151. (ਜਿਲ੍ਹਾ ਸੰਗਰਗ) ਮੋਹਰ / Seal ਨੋਟ, ਸ਼ਨਮ ਅਤੇ ਮੇਤ ਗਿਆਟਰੇਸ਼ਨ ਐਕਟ, 1969 ਦੀ ਧਾਰਾ 12/17 ਅਤੇ ਪੰਜਾਬ ਜਨਮ ਤੇ ਮੇਤ ਰਜਿਸਟਰੇਸ਼ਨ ਨਿਯਮ, 2004 ਦੇ ਨਿਯਮ 8/13 ਦੇ ਅਧੀਨ ਜਾਰੀ ਕੀਤਾ ਗਿਆ। Issued u/s12/17 of the registration of Birth & Deoth Act, 1929 & Rules 8/13 the Punjob Registration of Births & Deoths rules 2004 ਹਰੇਕ ਜਨਮ ਤੋਂ ਮੌਤ ਦੀ ਰਜਿਸਟਰੇਸ਼ਨ ਯਕੀਨੀ ਬਣਾਓ - Ensure registration of every birth and death ਮਿਨਮ ਮੌੜ ਦਾ ਘਟਨਾ 21 ਇਨਾ ਵਿਚ ਦਰਜ ਅਰਵਾਕੇ ਸਰਟੀਫਿਕੇਟ ਦੀ ਪਹਿਲੀ ਕਾਪੀ ਮੁਫ਼ਤ ਪ੍ਰਾਪਤ ਕਰੇ। Registered the Births/Deaths events within 21 days and get a free copy of certificate 4576/8-11-2011--30.00.000 ਪੰਜਾਬ ਸਰਕਾਰ ਪੈਸ ਪਟਿਆਲਾ ।

Simplified Proforma for Services under Punjab RTS Act (18)

Part -1

1	Name of Service	Correction of Entry in Death Certificate
2	Name of Department/ Service Provider (Pre-filled into the system)	Health

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of deceased, if not applicant.	
	(Adhaar No. of Deceased. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Sex (Male/Female)	
5	Father's Name of deceased	
6	Husband/ Wife's Name of deceased	
7	Mother's name of deceased	
8	Date of Death	
9	Place of Death	
10	Address of deceased at the time of death	
11	Permanent Address of deceased	
12	Give detail about correction to be made	

Documents Required

Yes

1	Self declaration	
2	Death certificate or its copy	
3	2 witnesses of credible persons (Sarpanch and Panch in case of rural area and Municipal Councillor or MLA or Gazetted Officer in case of urban area)	
4	Proof of residence- copy of Voter Card or Passport or Electricity Bill or Telephone Bill	
5	Copy of school certificate or passport or driving license or insurance policy or any other document in which the complete detail pertaining to the correction required is mentioned (any 2)	
6	Hospital/ nursing home report in case of institutional death and cremation ground report or report of immersion of ashes in case of domiciliary deaths)	
7	A copy of FIR and Post Mortem report in case of accidental deaths.	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

and the local of the	Trana Jana
ਪੰਜਾਬ ਸਰਕਾਰ / G	overnment of Punjab ਰਵਾਰ ਭਲਾਈ ਵਿਭਾਗ
· Health & Family	Welfore Department
चाढ वानगटना	ਰ ਜਨਮ ਤੇ ਮੌਤ, ਪੰਜਾਬ arths & Deaths, Punjab
STEDIA CONTRACT	Death Certificate
ਇਹ ਤਸਦੀਰ ਕੀਤਾ ਰਾਂਚ ਹੈ ਦਿ ਹੈ ।	Death Certificate
ਲੱਕਲ ਰਜਿਸਟਰਾਰ, ਜਨਮ ਤੇ ਮੌਤ ਨਗਰ ਨਿਰਾਮ ਕੀਤਾ ਕ	ਸੂਚਨਾ ਅਸਲ ਮੌਤ ਰਿਕਾਰਡ ਵਿੱਚੋਂ ਲਈ ਗਈ ਹੈ ਜਿਹੜੀ ਫਿ
	न पर्छग्रहार्थर व/पारुम मन्हा/प्रध-प्रदित
ਤਹਿਸੀਲ	
This is to certify that the following infor	mation has been taken from the original death recor
Council / Gram Reschaust/P/	mation has been taken from the original death recor Registrar, Births & Deaths, Municipal Corporation
Block/Block (PHC)	ion odb-oentre
District	oh Chete d
ਮੁਤਕ ਦੀ ਮਾਤਾ ਦਾ ਨਾਮ / Name of Deceased's Mothe	Г
ਜਿਸਟਰੇਸ਼ਨ ਦੀ ਮਿਤੀ/Date of Registration	ਾਨ / Place of Death ਰਜਿਸਟਰੇਸ਼ਨ ਨੂੰ/Registration No
ਤਿਕ ਦਾ ਮੌਤ ਸਮੇਂ ਖ਼ਤਾ	strates ab by Registration No
ddress of deceased at the time of death	ਮਿਤਕ ਦਾ ਪੱਕਾ ਪਤਾ
and an activity of activity	Permanent addressof the deceased
ਪਿਣੀ (ਜੇਕਰ ਕੋਈ ਹੈ)	a second a second state of the second states
emarks (if any)	·
ਸੀ ਕਰਨ ਦੀ 6 ਦਰੋ ਹਨ	
ਯੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਟਿਕੇਟ ਰਿਆਰ ਕਰ ਕਰੇ	ਜਾਰੀ ਕਰਨ ਤਾਲ ਆਇਆ ਦੇ ਦ
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	ਾ ਨਾ ਕਰਨ ਵਾਲ ਸਾਹਕਾਰਾ ਦੇ ਦਸੰਖਤ, ਨਾਮ ਤੇ ਪਤਾ
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	ਜਾਰੀ ਕਰਨ ਵਾਲ ਅਧਿਕਾਰੀ ਦੇ ਦਸਖਤ, ਨਾਮ ਤੇ ਪਤਾ Signature, Name & adurass of the issuing Authority
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	Signature, Name & aduress of the issuing Authority
ਗਿਫਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲ ਦਾ ਨਾਮ ਅਤੇ ਆਇਸ	Signature, Name & aduress or the issuing Authority
ਸ਼ਿਫ਼ਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate	Signature, Name & address of the issuing Authority
ਰੀ ਕਰਨ ਦੀ ਮਿਤੀ / Date of issue ਟੀਫਿਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate ਨਿਆਰਸਕੁਸ ਵਾਸਤਵਾਸ ਕਰਨ ਕਰਨ ਦੱਸਿਆ ਗਿਆ ਹੈ ਨਿਟਾ ਮੰਤ ਦੇ ਗੀ-ਸਟਰ ਵਿੱਚ ਮੰਤ ਦਾ ਜੋ ਕਾਰਨ ਦੱਸਿਆ ਗਿਆ ਹੈ	H군국 / Seal
ਸ਼ਿਫ਼ਕਟ ਤਿਆਰ ਕਰਨ ਵਾਲੇ ਦਾ ਨਾਮ ਅਤੇ ਅਹੁਦਾ me & Designation of Official who prepared certificate	Signature, Name & address of the issuing Authority ਮਿੰਟਰ / Seoi ਉਸ ਬਾਰੇ ਕਈ ਸੂਚਨਾ ਸਰਟਾਫਿਕਟ ਵਿੱਚ ਨਹੀਂ ਦਿੱਤੀ ਜਾਵੇਗੀ।

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF SOCIAL SECURITY AND WOMEN & CHILD DEVELOPMENT

5. DEPARTMENT OF SOCIAL SECURITY AND WOMEN & CHILD DEVELOPMENT

Application No

Simplified Proforma for Services under Punjab RTS Act (96.a.b)

Photo of Applicant

Part -1

1	Name of the Service	Old Age Pension (OAP) Rural / Urban Areas
2	Name of Department/ Service Provider (Pre-filled into the system)	Social Security and Women & Child Development.

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	CorrespondencePhone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No. of
	beneficiary. Attach Copy)
2	Relationship with applicant
3	Male/ Female
4	BPL No.
5	SC/BC
6	Husband/Wife alive or not
7	Age of applicant
8	Income of husband and wife (Including other pension)
9	Agricultue land (Chahi/baraani)

Sr.	Documents Required	Submitted
No.		
1	Voter Card or Voter List	
2	Self Declaration by Applicant	
3	Recommendation for Rural areas MLA or Two Member Panchayat & Sarpanch or Three Member Panchayat or Two Member Panchayat & one Numberdar	
	In case of Urban Area- Recommendation of MLA or Municipal Commissioner (MC)	
4	Report of Revenue Department (Patwari) for land	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to
			be provided
2	Service asked for	5.	Fees/Facilitation Charges,
			if any
3.	Date of Application	6.	Signature of authorised
			official

-1-924 1/1 2 100% 2 Whole Report Save 14 Page 1 of 1 2 Stimulsoft Reports - Demo Version ਸਮਾਜਿਕ ਸੁਰੱਖਿਆ ਅਤੇ ਇਸਤਰੀ ਤੇ ਬਾਲ ਵਿਕਾਸ ਵਿਭਾਗ, ਪੰਜਾਬ Department of Social Security and Development of Women and Children, Punjab ਬੁਢਾਪਾ ਪੈਸ਼ਨ ਮੰਜੂਰੀ ਪੱਤਰ ਅਤੇ ਆਈ ਡੀ ਕਾਰਡ Document Sr. No : 264 Old Age Pension Sanction Letter cum Identity Card VT. PUNJA ਦਫਤਰ ਬਾਲ ਵਿਕਾਸ ਪ੍ਰੋਜੇਕਟ ਅਫਸਰ / Office of CDPO ਬਲਾਕ / Block: ਸੀ. ਡੀ. ਪੀ. ਓ. ਨਵਾਂਸ਼ਹਿਰ / CDPO Nawanshahr ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ / Shahid Bhagat Singh Nagar ਜਿਲਾ / District ਵੱਲ / To , ਦਵਿੰਦਰ ਕੁਮਾਰ / DAVINDER KUMAR S/o. ਗੰਗਾ ਬਿਸ਼ਨ / GANGA BISHAN ਰਵੀਦਾਸ ਨਗਰ ਨਵਾਸ਼ਹਿਰ, ਨਵਾਸ਼ਹਿਰ, ਨਵਾਸ਼ਹਿਰ, (ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ), ਪੰਜਾਬ / Ravidass Nagar Nawanshahr, Nawanshahr, Nawanshahr, (Shahid Bhagat Singh Nagar), Punjab 💱 / Subject: ਬੁਢਾਪਾ ਪੈਨਸਨ ਮੰਨਜੁਰ ਕਰਨ ਬਾਰੇ / Old Age Pension approval related. ਆਪ ਦਾ ਪੈਨਸਨ ਕਾਰਮ ,ਜੋ ਇਸ ਦਫਤਰ ਵਿਚ ਨੌਬਰ 1197 ਮਿਤੀ 25 Jul 2012 ਤੇ ਦਰਜ ਹੈ ,ਦੇ ਹਵਾਲੇ ਵਿਚ ਆਉਂਨਿ. Your Pension Form Which was submitted in this Department with No. 1197 dated 25 Jul 2012. ਆਪ ਨੂੰ ਮਿਤੀ 25 Jul 2012 ਨੂੰ ਪੈਨਸ਼ਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਮਨਜ਼ੁਰ ਕੀਤੀ ਗਈ ਹੈ, ਜਿਸ ਦਾ ਪੀ.ਐਲ.ਏ. ਨੰਬਰ SBS//2012/U/OAP/0000028 ਹੈ, ਬੁਢਾਪਾ ਪੈਨਸ਼ਨ ਦੀ ਅਦਾਇਗੀ ਆਪ ਨੂੰ ਮਿਤੀ 01 Oct 2012 ਤੋਂ ਸ਼ੁਰੂ ਹੋਵੇਗੀ। ਇਹ ਵਿਤੀ ਸਹਾਇਤਾ ਤੁਹਾਡੇ ਵਲੋਂ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਆਧਾਰ ਤੇ ਖਾਤਾ ਨੰਬਰ 128458, ਬੈਂਕ ਦਾ ਨਾਂ ਏਸ ਬੀ ਆਈ, ਬ੍ਰਾਂਚ ਨਵਾਸ਼ਬਰ, ਬ੍ਰਾਂਚ ਕੋਡ 1231 ਵਿੱਚ ਜਮਾਂ ਹੋ ਜਾਵੇਗੀ। Your application with No. 1197 dated 25 Jul 2012 is approved with PLA No. SBS//2012/U/OAP/0000028. Financial assistance is approved for you on 25 Jul 2012 and will start from 01 Oct 2012. This final assistance will be credited in your Bank Account no 128458 of Bank Name SBI, Branch Nawansahar, Branch Code 1231 as per deta[:]'s furnished by you. ਇਹ ਪੈਨਸਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਆਪ ਵੱਲੋਂ ਅਰਜੀ ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਅਧਾਰ ਤੇ ਮਨਜੁਰ ਕੀਤੀ ਗਈ ਹੈ । ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੂਚਨਾ ਕਿਸੇ ਸਮੇਂ ਵੀ ਗਲਤ ਪਾਏ ਜਾਣ ਤੇ ਨਾ ਕੇਵਲ ਆਪ ਨੂੰ ਕੀਤੀ ਅਦਾਇਗੀ ਦੀ ਵਸੂਲੀ ਸਮੇਤ ਵਿਆਜ ਕੀਤੀ ਜਾਵੇਗੀ,ਬਲਕਿ ਗਲਤ ਸੂਚਨਾ ਦੇ ਕੇ ਲਾਭ ਲੈਣ ਲਈ ਆਪ ਖਿਲਾਫ਼ ਕਾਨੂਨੀ ਕਾਰਵਾਈ ਵੀ ਜਾਣ ਤੋਂ ਨਾ ਕੋਵਲ ਆਪ ਨੂੰ ਕੀਤੀ ਅਦਾਵਕਾ ਦਾ ਦੁਰੂਨਾ ਜਾਣ ਦੇ ਸ਼ੁਰੂਨਾ ਜਾਣ ਹੈ। ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ। This Pension/Financial Assistance has been approved based on the information provided by you in the application form. In the situation of any discrepancy found in the information provided in the application form all the payments made to you would be recovered with interest and legal action can be taken against for taking benefit by providing wrong information. ਨੌਟ:- ਕੋਈ ਅਲਗ ਤੋਂ ਆਈ.ਡੀ ਕਾਰਡ ਜਾਰੀ ਨਹੀ ਹੋਵੇਗਾ ਕਿਰਪਾ ਕਰਕੇ ਰਿਕਾਰਡ ਵਜੋਂ ਇਸ ਪੱਤਰ ਨੂੰ ਸੰਭਾਲ ਕੇ ਰੱਖੋਂ । Note: - No Separate ID card will be issued. You are requested to keep this sanction letter for your record. Mate Of Sanction : Signature of the Issuing Authority: 25 Jul 2012 Digitaly Signed by: Neeru Katyal Gupta SDM Designation : Date : 25 Jul 2012 CDPO Nawanshahr ,Shahid Bhagat Singh Nagar (Stamp and Sign of Issuing Authority) Location : "This is a digitally Signed Certificate and does not require hand written signatures. The responsibility of verification of this document, before accepting the same for any legal purpose, would rest with the institu or Organization or Company or any other entity where this document is produced." Disclaimer -The Content of this document could be verified using the document serial number at the following web link http://edistrict.punjabgovt.gov.in/EDA 22 3 2 3 2 3

Simplified Proforma for Services under Punjab RTS Act (96.a.b.)

Photo of Applicant

Part -1

1	Name of the Service	Financial Assistance Widow and Destitute Women <i>Rural /Urban Areas</i>
2	Name of Department/ Service Provider (Pre-filled into the system)	Social Security and Women & Child Development.

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

1	Name of beneficiary, if not applicant. (Aadhar No. of
	beneficiary. Attach Copy)
2	Relationship with applicant
3	BPL No.
4	SC/BC
5	Husband/Wife alive or not
6	Age of Applicant
7	Widow/ Destitute
8	Percentage of disability of husband in case of destitute due to
	husband's disability
9	Date of missing of husband in case of destitute due to missing
	of husband
10	Income of husband and wife (Including other pension)
11	Agriculture land

Yes

Sr.	Documents Required	Submitted
No.		
1	Voter Card or Voter List, Certificate from Registrar Birth & Death – As Age	
	Proof	
2	Death certificate of husband in case of widow or Disability certificate of	
	husband in case of destitute	
3	Self Declaration by Applicant	
4	Recommendation for Rural areas MLA or Two Member Panchayat & Sarpanch or	
	Three Member Panchayat or Two Member Panchayat & one Numberdar	
	In case of Urban Area- Recommendation of MLA or Municipal Commissioner (MC)	
5	Report of Revenue Department (Patwari) for land	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	!	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application		6.	Signature of authorised	
				official	

FADC	http://10.10.5.4/	eda/Reports/Certificate Generation With
ਸਮਾਜਿਕ ਸੁਰੱਖਿਆ ਅਤੇ ਇਸ Department of Social Security and De	ਜਤਰੀ ਤੋਂ ਬਾਲ ਵਿਕਾਸ ਵਿਭਾ evelopment of Wome	ਾ ਪੰਜਾਬ r and Children, Punjab
<u>ਨਿਆਸ਼ਰਿਤ ਤੇ ਵਿਧਵਾਂ ਔਰਤਾਂ ਲਈ ਲ</u> Widow and Destitute Woman S	ਪੈਂਸ਼ਨ ਮੰਜੂਰੀ ਪੱਤਰ ਅਤੇ ਆਬ Sanction Letter Cum I	<u>ੇ ਗੋ ਕਾਰਡ</u> Document Sr. No : 47325 <u>contity Card</u>
TCOVT PUNIAD		
ਦਫਤਰ ਬਾਲ ਵਿਕਾਸ ਪ੍ਰੋਜੇਕਟ ਅਫਸਰ / Office of CDPO ਬਲਾਕ / Block: /		
ਜਿਲਾ / District: ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ / Shahid B	Bhagat Singh Nagar	
ਵੱਲ / То ,		17 1 1
ਮਹਿੰਦਰ ਕੈਂਰ / Mahinder Kaur W/o. ਦਿਆਲ ਸਿੰਘ / Dl ਵਾਰਡ ਨਂ,09,ਬਲਾਚੌਰ, ਬਲਾਚੌਰ, ਬਲਾਚੌਰ, (ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ Balachaur, Balachaur, (Shahid Bhagat Singh Nagar), I	J), ਪੰਜਾਬ / Ward No.09,Ba	lecinaur,
ਵਿਸ਼ਾ / Subject: ਵਿਧਵਾ ਅਤੇ ਆਸ਼ਰਿਤ ਔਰਤਾ ਨੂੰ ਵਿੱਤੀ ਸਹਾ Pension approval related.	ਇਤਾ ਮੰਨਜੁਰ ਕਰਨ ਬਾਰੇ /	ে এow and Destitute Woman
2013 ਨੂੰ ਪੈਨਸ਼ਨ/ ਵਿੱਤੀ ਸਹਾਇਤਾ ਮੰਨਜੁਰ ਕੀਤੀ ਗਈ ਹੈ, ਜਿਸ ਦਾ ਪੈਨਸ਼ਨ ਦੀ ਅਦਾਇਗੀ ਆਪ ਨੂੰ ਮਿਤੀ 01 Jul 2013 ਤੋਂ ਸ਼ੁਰੂ ਹੋਵੇਰ 50145837837, ਬੈਂਕ ਦਾ ਨਾਂ ਅਲਾਹਾਬਾਦ ਬੈਂਕ, ਬਰਾਂਚ ਬਲਾਚੇਰ As per your Pension Form which was submitted in this application is approved with PLA No. SBS/2013/U/FA Jun 2013 and will start from 01 Jul 2013. This final a 50145837837 of Bank Name ALLAHABAD BANK, B furnished by you.	ਸੀ। ਇਹ ਵਿਤੀ ਸਹਾਇਤਾ ਤੁਹਾਨ , ਬ੍ਰਾਂਚ ਕੇਂਡ 212743 ਵਿੱਚ Department with No. 54 AWD/0000604. Financia ssistance will be credite	ਡੇ ਹੁਤੇ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਆਧਾਰ ਤੇ ਖਾਤਾ ਨੰਬਰ ਵਿੱੱ ਹੋ ਜਾਵੇਗੀ। 62 t dated 30 May 2013 . Your at assistance is approved for you on 18 d in your Bank Account no
ਇਹ ਪੈਨਸਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਆਪ ਵੱਲੋਂ ਅਰਜੀ ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੂ ਵੀ ਗਲਤ ਪਾਏ ਜਾਣ ਤੇ ਨਾ ਕੇਵਲ ਆਪ ਨੂੰ ਕੀਤੀ ਅਦਾਇਗੀ ਦੀ ਵਸੂਲੀ ਖਿਲਾਫ਼ ਕਨੂੰਨੀ ਕਾਰਵਾਈ ਵੀ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ । This Pension/ Financial Assistance has been approver form. In the situation of any discrepancy found in the ir made to you would be recovered with interest and lega wrong information.	ਸਮੇਤ ਵਿਆਜ ਕੀਤੀ ਜਾਵੇਗੀ,ਬ d based on the informati nformation provided in th	ਲਾਂਭ ਗਲਤ ਸੂਚਨਾ ਦੇ ਕੇ ਲਾਭ ਲੈੱਣ ਲਈ ਆਪ ਨਾਂ ੁੰrovided by you in the application e application form all the payments
ਨੈਟ:- ਕੋਈ ਅਲਗ ਤੋਂ ਆਈ.ਡੀ ਕਾਰਡ ਜਾਰੀ ਨਹੀ ਹੈਵੇਗਾ ਕਿਰਪਾ ਕਰਕ Note: - No Separate ID card will be issued. You are re		
Date Of Sanction : 18 Jun 2013	Signature of the la	ssuing Authority:
	Digitally Signed b	y≑ Vijay Kumar Syal
	Designation :	Sub Divisional Magistrate
	Date :	18 Jun 2013
(Stamp and Sign of Issuing Authority)	Location :	Shahid Bhagat Singh Nagar
Disclaimer - "This is a digitally Signed Certificate and do this document, before accepting the same f Company or any other entity where this doc	for any legal purpose, would	Aures. The responsibility of verification of Aures. The responsibility of verification of Aures. Aures. The responsibility of verification of Aures. Aures. The responsibility of verification of Aures. Aures. The responsibility of verification of Aures. Aures. A
The contents of this document could be http://	verified using the document /edistrict.punjabgovt.gov.in/E	al number at the following web link
K-	स्ट्रीय ८ अनीम जीवना	

. .

45,02

Simplified Proforma for Services under Punjab RTS Act (96.a.b)

Photo of Applicant

Part -1

1	Name of the Service	Financial Assistance to Disabled Person (<i>Rural</i> / <i>Urban Areas</i>)
2	Name of Department/ Service Provider (Pre-filled into the system)	Social Security and Women & Child Development.

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	CorrespondencePhone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

1	Name of beneficiary, if not applicant. (Aadhar No. of
	beneficiary. Attach Copy)
2	Relationship with applicant
3	BPL No.
4	SC/BC
5	Male/ Female
6	Age of disabled Person
7	Nature and Percentage of disability
8	Family income (Including other Pension)
9	Agriculture land

Sr.	Documents Required	Submitted
No.		
1	Disability Certificate	
2	Self Declaration by Applicant	
3	In case of Rural Area:- Recommendation of MLA or Two Member Panchayat & Sarpanch or Three Member Panchayat or Two Member Panchayat & one Numberdar	
	In case of Urban Area:- Recommendation of MLA or Municipal Commissioner (MC)	
4	Report of Revenue Department (Patwari) for land	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

ਸਮਾਜਿਕ ਸਰੱਖਿਆ ਅਤੇ ਇਸਤਰੀ ਤੋਂ ਬਾਲ ਵਿਕਾਸ ਵਿਭਾਗ, ਪੰਜਾਬ Department of Social Security and Development of Women and Children, Punjab ਅਪੰਗ ਵਿਅਕਤੀਆਂ ਲਈ ਪੇਂਸਨ ਮੰਜਰੀ ਪੱਤਰ ਅਤੇ ਆਈ ਡੀ ਕਾਰਡ Document Sr. No : 328750 Disabled Person Pension Sanction Letter Cum Identity Card ਦਫਤਰ ਬਾਲ ਵਿਕਾਸ ਪਰੋਜੇਕਟ ਅਫਸਰੇ / Office of CDPO ਬਲਾਕ / Block: ਸੀ.ਡੀ.ਪੀ.ਓ ਸਰੀਆ/CDPO Saroya ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ/Shahid Bhagat Singh Nagar ਜਿਲਾ / District ਵੱਲ/ Το ਸੰਤੋਖ ਸਿੰਘ / Santokh Singh S/o. ਹਰਤਜਨ ਸਿੰਘ / HARBHAJAN SINGH ਛਦੌੜੀ, ਬਲਾਚੌਰ, (ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ), ਪੰਜਾਬ/CHHIDAURI, Balachaur. (Shahid Bhagat Singh Nagar), Punjab ਵਿਸ਼ਾ / Subject: ਅਪੰਗ ਵਿਅਕਤੀਆਂ ਨੂੰ ਵਿੱਤੀ ਸਹਾਇਤਾ ਮੰਨਜੁਰ ਕਰਨ ਬਾਰੇ / Disabled Person Pension approval ਆਪ ਦਾ ਪੈਨਸਨ ਫਾਰਮ , ਜੋ ਇਸ ਦਫਤਰ ਵਿਚ ਨੰਬਰ 320228 ਮਿਤੀ 10 Jul 2015 ਤੇ ਦਰਜ ਹੈ , ਦੇ ਹਵਾਲੇ ਵਿਚ ਆਪ ਨੂੰ ਮਿਤੀ 07 Aug 2015 ਨੂੰ ਪੈਨਸਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਮੰਨਜੁਰ ਕੀਤੀ ਗਈ ਹੈ, ਜਿਸ ਦਾ ਪੀ.ਐਲ.ਏ.ਨੰਬਰ SBS/2015/R/FADP/0000643 ਹੈ, ਅਪੰਗ ਵਿਅਕਤੀਆਂ ਨੂੰ ਵਿੱਤੀ ਸਹਾਇਤਾ ਦੀ ਅਦਾਇਗੀ ਆਪ ਨੂੰ ਮਿਤੀ 01 Oct 2015 ਤੇ ਸ਼ੁਰੂ ਹੋਵੇਗੀ।ਇਹ ਵਿਤੀ ਸਹਾਇਤਾ ਤੁਹਾਡੇ ਵਲੋਂ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਆਧਾਰ ਤੇ ਖਾਤਾ ਨੰਬਰ NA, ਬੇਂਕ ਦਾ ਨਾਂ NA, ਬਰਾਂਚ NA, ਬਰਾਂਚ ਕੋਡ NA ਵਿੱਚ ਜਮਾਂ ਹੋ ਜਾਵੇਗੀ। As per your Pension Form which was submitted in this Department with No. 320228 dated 10 Jul 2015. Your As per your Pension Form which was submitted in this Department with No. 320226 dated 15 out 2013, roun application is approved with PLA No. SBS/2015/R/FADP/0000643. Financial assistance is approved for you on 07 Aug 2015 and will start from 01 Oct 2015. This final assistance will be credited in your Bank Account no NA of Bank Name NA, Branch NA, Branch Code NA as per details furnished by you. ਇਹ ਪੈਨਸਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਆਪ ਵੱਲੋਂ ਅਰਜੀ ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਅਧਾਰ ਤੇ ਮੰਨਜੁਰ ਕੀਤੀ ਗਈ ਹੈ । ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੂਚਨਾ ਕਿਮੇ ਸਮੇਂ ਵੀ ਗੱਲਤ ਪਾਏ ਜਾਣ ਤੇ ਨਾ ਕੇਵਲ ਆਪ ਨੂੰ ਕੀਤੀ ਅਵਾਇਗੀ ਦੀ ਵਸੂਲੀ ਸਮੇਤ ਵਿਆਜ ਕੀਤੀ ਜਾਵੇਗੀ ਬਲਕਿ ਗੱਲਤ ਸੂਚਨਾ ਦੇ ਕੇ ਲਾਭ ਲੈਣ ਲਈ ਆਪ ਖਿਲਾਫ਼ ਕਾਨੂੰਨੀ ਕਾਰਵਾਈ ਵੀ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ । This Pension/Financial Assistance has been approved based on the information provided by you in the application form. In the situation of any discrepancy found in the information provided in the application form all the payments made to you would be recovered with interest and legal action can be taken against for taking benefit by providing ਨੈਟ:- ਕੋਈ ਅਲਗ ਤੋਂ ਆਈ.ਡੀ ਕਾਰਡ ਜਾਰੀ ਨਹੀਂ ਹੱਵੇਗਾ ਕਿਰਪਾ ਕਰਕੇ ਰਿਕਾਰਡ ਵਜੋਂ ਇਸ ਪੱਤਰ ਨੂੰ ਸੰਭਾਲ ਕੇ ਹੱਖੇ । Note: - No Separate ID card will be issued. You are requested to keep this sanction letter for your record. Date of Sanction 07 Aug 2015 Signature of the Issuing Authority Digitally Signed by : Harmesh Singh Designation : District Social Security Officer Date 07 Aug 2015 (Stamp and Ship Location : Shahid Shagat Singh Nagar Suwidha Operator Disclaimer -"This is a digitally Signed Certificate and does not require hand written signatures. The responsibility of verification of this document, before accepting the same for any legal purpose, would rest with the institution or Organization or Company or any other entity where this document is produced. The contents of this document could be verified using the document sorial number at the following web link http://edistrict.punjabgovt.gov.in/FDA

sentily card/ Disability certificate

APPENDIX-III (ਅੰਤਿਕਾ-111) ਅਪੰਗ ਵਿਅਕਤੀਆਂ ਲਈ ਪਹਿਚਾਣ ਪੱਤਰ

भागार Code. Name of the District. Disability Code. Identity Card No. For example, UP, Dehradun. MR. 155) मन सेन्न, सिन्ने हा हाभ, अधेवाज खेंग, धोंउचाल प्रेंडन ठेवन :

hATT OF ISSUE (ਸਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ):

VALID UPTO (ਕਉਂ' ਡੱਕ ਜਾਇਜ਼ ਹੈ) :

(only for children below 18 years of age)

(ਸਿਰਫ 18 ਸਾਫ ਤੋਂ ਘੱਟ ਮੱਚਿਆਂ ਲਈ)

Date of Birth (ਜਨਮ ਮਿਡੀ)

Nature of Disability (ਅਪੰਗਤਾ ਦੀ ਕਿਸਮ).....

(Signature/Thumb impression of card holder) (Name & Signature of Issuing Authority) (ਪਹਿਚਾਣ ਪੈਂਡਰ ਰੱਖਣ ਵਾਲੇ ਦੇ ਹਸਤਾਖਰ/ਅੰਗੂਠੇ ਦਾ ਨਿਸ਼ਾਨ) (ਜਾਰੀ ਕਰਨ ਵਾਲੇ ਅਧਿਕਾਰੀ ਦਾ ਨਾਮ ਅਤੇ ਹਸਤਾਖਰ)

BACK PAGE OF ID CARD (ਪਹਿਚਾਣ ਪੱਤਰ ਦਾ ਪਿਛਲਾ ਪੰਨਾ)

Blood Group (ਖੂਨ ਦਾ ਗਰੁਪ) : Tele. No. (ਟੈਲੀਵੋਨ ਨੋਬਰ) :

Identification Marks (ਪਹਿਚਾਣ ਚਿੰਨ੍ਹ):

Address (ਪਤਾ) :

INSTRUCTIONS (ਹਦਾਇਤਾਂ)

The holder of the Identity Card for person with disabilities is eligible to claim concessions/ henefits provided by Central Government, State Government, Statutory Bodies and Other local authorities in accordance with the Act/Rules/instructions issued by these authorities from time to time.

ਇਸ ਪਹਿਚਾਣ ਪੱਤਰ ਵਾਲੇ ਅਪੰਗ ਵਿਅਕਤੀ ਨੂੰ ਕੇਂਦਰ ਸਰਕਾਰ, ਰਾਜ ਸਰਕਾਰ ਅਤੇ ਹੋਰ ਸਥਾਨਿਕ ਅਧਿਕਾਰੀਆਂ ਵੱਲੋਂ ਸ**ਮੇ 'ਤੇ ਸਮੇਂ ਜਾਰੇ ਕੀਤੀਆਂ** ਗਈਆਂ ਕਾਨੂੰਨ/ਹਦਾਇਤਾਂ ਅਨੁਸਾਰ ਦਿੱਤੀਆਂ ਜਾਣ ਵਾਲੀਆਂ ਛੋਟਾਂ/ਲਾਭ ਲੈਣ ਦੇ ਹੱਕਦਾਰ ਪੈਂਟਰੀ ।

Whoever, fraudulently avails or attempts to avail, any benefit meant for persons with disabilities, shall be punishable with imprisonment for a term with may extend to two years or with fine which may extend to twenty thosuand rupees or with both.

ਸਿਹੜਾ ਵਿਅਕਤੀ ਅਪੰਗ ਵਿਅਕਤੀਆਂ ਨੂੰ ਮਿਲਣ ਵਾਲੀਆਂ ਸਹੂਲਤਾਂ ਦਾ ਧੋਖੇ ਨਾਲ ਫਾਇਦਾ ਲੈਣ ਦੀ ਕੋਸ਼ਿਸ਼ ਪਰਦਾ ਹੈ।ਉਸਨੂੰ ਦੋ ਸਾਲ ਤੱਕ ਦੀ ਸਜ਼ਾ ਜਾਂ ਵੀਹ ਹਜ਼ਾਰ ਤੱਕ ਦਾ ਜ਼ੁਰਮਾਨਾ ਜਾਂ ਦੋਵੇਂ ਹੋ ਸਕਦੇ ਹਨ ।

3

Application No

Simplified Proforma for Services under Punjab RTS Act (99)

photo of applicant

Part -1

1	Name of the Service	Senior Citizen's I. Card of Punjab
2	Name of Department/Service Provider (Pre-filled into the system)	Social Security

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

1	Name of beneficiary, if not
	applicant. (Adhaar No. of
	beneficiary. Attach Copy)
2	Relationship with applicant
3	Age of beneficiary

Documents Required

Yes

1Residence Proof - Ration Card/ Voter Card/ Passport (any one)2Date of Birth Proof – Voter Card/ Birth Certificate3Two photographs of beneficiary (Not more than 3 months old)

Signature of Applicant

Submitted Tick ($\sqrt{}$) /

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6	6.	Signature of authorised	
				official	

SELF DECLARATION

 I_______son/wife of Sh. ______solemnly affirm and declare that I am resident of (complete address)

 ________and domicile of Punjab State. If any fact/information given by me is found false and wrong I will be held responsible for the same.

It is verified that my above statement is true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Deponent

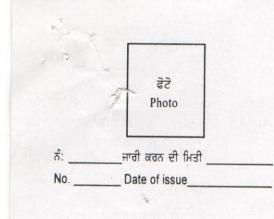
CERTIFICATE

This is to certify that I have read/got read the information given above as well as in the application form and found correct to my knowledge. If any fact/information is found false or wrong, I shall be punishable as per law.

Concerned Municipal Councillor/

Sarpanch

(Seal and date)



ਪਿਤਾ/ਪਤੀ ਦਾ ਨਾਮ	
Father/Husband :	
ਉਮਰ	
Age :	
ਉਚਾਈ (ਕੱਦ)	
Height :	
ਪਤਾ	
Address :	
ਦਿਸਣ ਵਾਲਾ ਸ਼ਨਾਖਤੀ ਨਿਸ਼ਾਨ	
Visible Distinguishing	
Marks :	

ਨਾਮ

ਜਾਰੀ ਕਰਤਾ ਅਧਿਕਾਰੀ Issuing Authority

ਕਾਰਡ ਪ੍ਰਾਪਤ ਕਰਤਾ ਨੂੰ ਮਿਲਣ ਵਾਲੀਆਂ ਸਹੂਲਤਾਂ। Concessions admissible to the card holder.

ਕਾਰਡ ਪ੍ਰਾਪਤ ਕਰਤਾ ਦੇ ਹਸਤਾਖਰ/ਅੰਗੂਠਾ ਨਿਸ਼ਾਨ Signature of the Card

holder/Thumb Impression

- ੳ ਪੰਜਾਬ ਰੋਡਵੇਜ/ਪੀ.ਆਰ.ਟੀ.ਸੀ. ਦੀਆਂ ਬੱਸਾਂ ਵਿੱਚ ਤਿੰਨ ਸੀਟਾਂ ਪ੍ਰਤੀ ਬੱਸ ਰਾਖਵੀਆਂ ਰੱਖਣਾ।
- A Three seats per bus will be reserved in Punjab Roadways/P.R.T.C. buses.
- ਅ ਹਸਪਤਾਲਾਂ, ਡਿਸਪੈਂ'ਸਰੀਆਂ, ਬੱਸ ਅੱਡਿਆਂ, ਲਾਇਬਰੇਰੀਆਂ ਵਿੱਚ ਵੱਖਰੀਆਂ ਲਾਈਨਾਂ ਤਾਂ ਜੋ ਸੀ. ਨਾਗਰਿਕਾਂ ਨੂੰ ਕਈ-2 ਘੰਟੇ ਉਡੀਕ ਨਾ ਕਰਨੀ ਪਵੇ।
- B Separate ques for Sr. Citizen in all the O.P.D's in Civil Hospitals, Dispensaries, Bus Stands, Libraries, to avoid standing for long hours.
- ੲ ਸੀ. ਨਾਗਰਿਕਾਂ ਲਈ ਬਿਜਲੀ/ਪਾਣੀ ਆਦਿ ਦੇ ਬਿਲਾਂ ਦੀ ਅਦਾਇਗੀ ਲਈ ਵੱਖਰੀਆਂ ਲਾਇਨਾਂ।
- C Separate ques for Sr. Citizen for payment of Electricity/Water bills etc.
- ਸ ਪੰਜਾਬ ਸਰਕਾਰ ਵੱਲੋਂ ਸੀ. ਨਾਗਰਿਕਾਂ ਨੂੰ ਸਮੇਂ-ਸਮੇਂ ਤੇ ਦਿੱਤੀਆਂ ਜਾਣ ਵਾਲੀਆਂ ਹੋਰ ਸਹੂਲਤਾਂ।
- D Any other benefits extending to Sr. Citizen by the Punjab Government from time to time. PGP, Mohali/6502/12-08

ਪੰਜਾਬ ਸਰਕਾਰ

ਸਮਾਜਿਕ ਸੁਰੱਖਿਆ ਵਿਭਾਗ

GOVERNMENT OF PUNJAB Social Security Deptt.



ਸੀਨੀਅਰ ਨਾਗਰਿਕ ਲਈ ਸ਼ਨਾਖਤੀ ਕਾਰਡ Identity Card for Senior Citizen

60 | Page

ਸਮਾਜਿਕ ਸਰੱਖਿਆ ਅਤੇ ਇਸਤਰੀ ਤੇ ਬਾਲ ਵਿਕਾਸ ਵਿਭਾਗ, ਪੰਜਾਬ Department of Social Security and Development of Women and Children, Punjab ਬੁਢਾਪਾ ਪੈਸ਼ਨ ਮੰਜੂਰੀ ਪੱਤਰ ਅਤੇ ਆਈ ਡੀ ਕਾਰਡ Document Sr. No : 339336 Old Age Pension Sanction Letter cum Identity Card OAP. COVT. PUNJAB ਦਫਤਰ ਬਾਲ ਵਿਕਾਸ ਪ੍ਰੋਜੇਕਟ ਅਫਸਰ / Office of CDPO ਸੀ.ਡੀ.ਪੀ.ਓ ਨਵਾਂਸ਼ਹਿਰ / CDPO Nawanshahr ਬਲਾਕ / Block ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ / Shahid Bhagat Singh Nagar ਜਿਲਾ / District: ਵੱਲ / To . ਗੁਰਮੀਤ ਕੈਰ / Gurmeet Kaur W/o. ਜੁਗਿੰਦਰ ਸਿੰਘ / JUGINDER SINGH ਮੁਜੱਫਰਪੁਰ, ਨਵਾਂਸ਼ਹਿਰ, (ਸ਼ਹੀਦ ਭਗਤ ਸਿੰਘ ਨਗਰ), ਪੰਜਾਬ / MUZAFFAR PUR, Nawanshahr, (Shahid Bhagat Singh Nagar), Punjab ਵਿਸ਼ਾ / Subject: ਬਢਾਪਾ ਪੈਨਸਨ ਮੰਨਜਰ ਕਰਨ ਬਾਰੇ / Old Age Pension approval related. ਆਪ ਦਾ ਪੈਨਸਨ ਫਾਰਮ , ਜੋ ਇਸ ਦਫਤਰ ਵਿਚ ਨੰਬਰ 332816 ਮਿਤੀ 29 Jul 2015 ਤੇ ਦਰਜ ਹੈ , ਦੇ ਹਵਾਲੇ ਵਿਚ ਆਪ ਨੂੰ ਮਿਤੀ 24 Aug 2015 ਨੂੰ ਪੈਨਸ਼ਨ/ ਵਿੱਤੀ ਸਹਾਇਤਾ ਮੰਨਜੁਰ ਕੀਤੀ ਗਈ ਹੈ, ਜਿਸ ਦਾ ਪੀ.ਐਲ.ਏ. ਨੰਬਰ SBS/2015/R/OAP/0005942 ਹੈ, ਬੁਢਾਪਾ ਪੈਨਸ਼ਨ ਦੀ ਅਦਾਇਗੀ ਆਪ ਨੂੰ ਮਿਤੀ 01 Oct 2015 ਤੋਂ ਸ਼ੁਰੂ ਹੋਵੇਗੀ । ਇਹ ਵਿਤੀ ਸਹਾਇਤਾ ਤੁਹਾਡੇ ਵਲੋਂ ਦਿੱਤੀ ਸੂਚਨਾ ਦੇ ਆਧਾਰ ਤੇ ਖਾਤਾ ਨੰਬਰ NA, ਬੈਂਕ ਦਾ ਨਾਂ NA, ਬ੍ਰਾਂਚ NA , ਬ੍ਰਾਂਚ ਕੋਡ NA ਵਿੱਚ ਜਮਾਂ ਹੋ ਜਾਵੇਗੀ। As per your Pension Form which was submitted in this Department with No. 332816 dated 29 Jul 2015 , your application is approved with PLA No. SBS/2015/R/OAP/0005942. Financial assistance is approved for you on 24 Aug 2015 and will start from 01 Oct 2015. This final assistance will be credited in your Bank Account no NA of Bank Name NA, Branch NA, Branch Code NA as per details furnished by you. ਇਹ ਪੈਨਸਨ/ਵਿੱਤੀ ਸਹਾਇਤਾ ਆਪ ਵੱਲੋਂ ਅਰਜੀ ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸੁਚਨਾ ਦੇ ਅਧਾਰ ਤੇ ਮੰਨਜਰ ਕੀਤੀ ਗਈ ਹੈ । ਫਾਰਮ ਵਿਚ ਦਿੱਤੀ ਸਚਨਾ ਕਿਸੇ ਸਮੇਂ ਵੀ ਗਲਤ ਪਾਏ ਜਾਣ ਤੇ ਨਾ ਕੇਵਲ ਆਪ ਨੂੰ ਕੀਤੀ ਅਦਾਇਗੀ ਦੀ ਵਸੂਲੀ ਸਮੇਤ ਵਿਆਜ ਕੀਤੀ ਜਾਵੇਗੀ,ਬਲਕਿ ਗਲਤ ਸੂਚਨਾ ਦੇ ਕੇ ਲਾਭ ਲੈਣ ਲਈ ਆਪ ਖਿਲਾਫ਼ ਕਾਨੂੰਨੀ ਕਾਰਵਾਈ ਵੀ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ। This Pension/ Financial Assistance has been approved based on the information provided by you in the application form. In the situation of any discrepancy found in the information provided in the application form all the payments made to you would be recovered with interest and legal action can be taken against for taking benefit by providing wrong information. ਨੈਟ:- ਕੋਈ ਅਲਗ ਤੇ ਆਈ.ਡੀ ਕਾਰਡ ਜਾਰੀ ਨਹੀ ਹੋਵੇਗਾ ਕਿਰਪਾ ਕਰਕੇ ਰਿਕਾਰਡ ਵਜੇ ਇਸ ਪੱਤਰ ਨੰ ਸੰਭਾਲ ਕੇ ਰੱਖੇ । Note: - No Separate ID card will be issued. You are requested to keep this sanction letter for your record. Date Of Sanction : Signature of the Issuing Authority: 24 Aug 2015 Digitally Signed by : Harmesh Singh Signed By Mo Designation : **District Social Security Officer** n Date : 24 Aug 2015 (Stamp and Sign of Issuing Authority) Location : Shahid Bhagat Singh Nagar Disclaimer -"This is a digitally Signed Certificate and does not require hand written signatures. The responsibility of verification of this document, before accepting the same for any legal purpose, would rest with the Institution or Organization or Company or any other entity where this document is produced." The contents of this document could be verified using the document serial number at the following web link, http://edistrict.punjabgovt.gov.in/EDA गदीव इनावनैंस योजना onal e Governance Plan Public services denser home

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF WELFARE OF SCS AND BCS

6. DEPARTMENT OF WELFARE OF SCs/BCs

Simplified Proforma for Services under Punjab RTS Act (105) Part-1

1.	. Name of Service	Issue of Scheduled Caste (SC) Certificate
2.	 Name of Department/ Service Provider (Pre-filled into the system) 	Welfare of Scheduled Castes and Backward Classes, Punjab

Part-2

Personal Details

1.	Name of Applicant	
2.	Husband/Father's/Mother's Name	
3.	Permanent Address	
4.	Correspondence Address with Mobile Number/	
	e-mail	
5.	Aadhaar Card No. (Attach copy)	

Part-3

Information/documents required specific to the service

Information

1.	Name of beneficiary, if not applicant (Aadhar No. of
	beneficiary, attach copy)
2.	Relation with applicant
3.	Religion (mandatory)
4.	Whether caste certificate has been issued to father. If yes,
	Attach copy.
5	State of origin (Attach copy)

Documents required

submitted Tick ()/Yes

	umentes required	
1.	Prescribed application form with Report from Sarpanch	
	/M.C./Nambardar Patwari concerned.	
2.	Self – declaration by the applicant regarding caste by birth	
3.	Attested copy of caste certificate of father	
4.	Attested copy of State of origin	

Signature of Applicant

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

Office of the Tehsildar, Teh. GURDASPUR, GURDASPUR (Punjab) **Certificate of Scheduled Caste**

Sr.No. 683155



75424

Certified that Shri

KUMARI REKHA / ਕੁਮਾਰੀ ਰੇਖਾ

S/o Shri.

BACHAN SINGH / ਬਚਨ ਸਿੰਘ of DEV NAGAR COLONY, **TIBRI ROAD VILL GHURALA**

Village / Town

GHURALA (GSP) / ਘੁਰਾਲਾ of

District / Division

GURDASPUR / ਗਰਦਾਸਪਰ

State of Punjab belongs to RAMDASIA / DDDDDDDDC Caste which has been recognized as Scheduled Caste as per "The Constitution (Scheduled Castes). Order 1950". Shri KUMARI REKHA / ਕੁਮਾਰੀ ਰੇਖਾ and his family lives in village / town GHURALA (GSP) / ਘੁਰਾਲਾ of District/Division ਗੁਰਦਾਸਪੁਰ /GURDASPUR of Punjab State.

Date Of Issuance: 2212 3-9-2015

Signature g Authority: Designation : Tehsildar

Application No

Simplified Proforma for Services under Punjab RTS Act (111)

Part-1

ſ	1.	Name of Service	Shagun Scheme		
	2.	Name of Department (Pre-filled into the system)	Welfare of Scheduled Castes and Backward Classes, Punjab		

Part-2

Personal Details

1.	Name of Applicant	
2.	Husband/Father's/Mother's Name	
3.	Permanent Address	
4.	Correspondence Address	
5.	Correspondence Phone No.	
6.	Correspondence e-mail	
7.	Aadhaar Card No. (Attach copy)	

Part-3

Information/documents required specific to the service

1	Name of girl beneficiary, if not	
	applicant (Aadhaar No. of	
	beneficiary attach copy)	
2	Relationship with applicant	
3	Category	
4	Occupation of applicant	
5.	Date of birth of girl beneficiary	
6.	Date of marriage	
7.	Total annual income	
8.	If benefit under this scheme is take	
	before, then name of Girl	
	beneficiary and date of marriage	
9.	In case of divorcee or widow, date	
	of previous marriage and	
	Name/Address of husband.	
10.	Particulars of bridegroom (name	
	father's name and address)	
D	and Details of smaller at	

Bank Details of applicant

1.	Account No.	
2.	Name of Bank	
3.	Baranch Address	
4.	IFSC Code	

Documents required

1.	Income proof : BPL Card/Self	
	Declaration in given proforma duly	
	attested by Sarpanch/Nambardaar/	
	concerned Ward Councillor	
2.	Attestation declaration by	
	Sarpanch/Nambardaar/concerned	
	Ward Councillor (in self	
	declaration)	
3.	Proof of age	
	(Birth certificate, Voter ID).	
4.	Marriage certificate/card from	
	bridegroom	
5.	Copy of bank passbook	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

SELF DECLARATION

I son/wife of Sh. solemnly affirm and declare Ι (complete address) that am resident of I belong and domicile of Punjab State. to______caste which has been declared as Scheduled Castes/Backward Classes by the Punjab Govt. Marriage of my daughter Miss has been fixed for . I am a holder of Blue Card/BPLCard No._____. My family annual income from all sources is Rs._____. If any fact/information given by me is found false and wrong I will be held responsible for the same and I will also liable to re-pay the financial assistance received under Shagun Scheme, with interest.

It is verified that my above statement is true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Deponent

CERTIFICATE

This is to certify that I have read/got read the information given above as well as in the application form and found correct to my knowledge. The applicant fulfils all the conditions of Shagun Scheme. If any fact/information is found false or wrong, I will get re-pay the financial assistance received by the beneficiary under Shagun Scheme, with interest.

Sarpanch/Nambardaar/concerned Ward cillor.

Councillor.

DIRECTORATE WELFARE OF SCHEDULED CASTES AND BACKWARD CLASSES PUNIAB, SCO NO. 128-129, SECTOR 34-A, CHANDIGARH

To

The Chief Manager, ICICI Bank, Sector 34-A, Chandigarh

Memo No A-9/ 17129 Dated Chandigarh: 11811

REGARDING PAYMENT TO BENEFICIARIES THROUGH ON-LINE Subject: SYSTEM MANAGEMENT (B.C.)

It is stated that Saving Bank Account No. 134101000265 of this department is maintained with your bank A list of 310 beneficiaries for the month of July, 2015 of Districts as per detail given below alongwith Bank Account Number and IFSC Code of benificiaries is enclosed herewith. You are requested to transfer Rs.15,000/- each to their bank account through On-Line System Management and debiting the account No. 134101000265 for Rs.46,50,000/- (Rs. Forty Six Lac Fifty Thousand only). List of successful transactions and rejected transactions may be sent to this office in soft and hard copy with-in two days positively.

Sr. No.	Name of District	No. of Beneficiary	Net Amount
1	Amritsar	54	8,10,000
2	Bathinda	13	1,95,000
3	Barnala	80	1,20,000
4	Fazilka	64	9,60,000
5	Jalandhar	18	2,70,000
6	Kapurthala	10	1,50,000
7	Ludhiana	21	3,15,000
0	Moga	85	76,999
9	Muktsar	18	2,70,000
10	Mansa	32	4,80,000
11	Tarntaran	67	10,05,000
	Total	310	46,50,000

Deputy Controller (F&A)

Deputy Controller (F&/

Dated Chandigarh: Endst. No A-9/ 10-A copy of the above is forwarded to the following for information and necessary action please:-

- Deputy Director (P), Head Office Chandigarh with reference letter 1 No A-16/17044 dated 11-08-2015.
- District Welfare Officer, Amritsar, Bathinda, Barnala, Fazilka, 2 Jalandhar, Kapurthala, Ludhiana, Moga, Muktsar, Mansa, Tarntaran. Sepalar Auglis

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF PERSONNEL

7. DEPARTMENT OF PERSONNEL

Application No

Simplified Proforma for Services under Punjab RTS Act (52)

Part -1

1	Name of Service	Residence - domicile		
2	Name of Department/ Service Provider (Pre-filled into the system)	Personnel/ Tehsildar		

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	

Documents Required

Yes

1

2

3

Self-declaration Verification by Sarpanch/Nambardar/MC Report by Patwari

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Submitted Tick ($\sqrt{}$) /

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Simplified Proforma for Services under Punjab RTS Act (52)

		Part -1
1	Name of Service	Residence - by birth
2	Name of Department/ Service	Personnel/ Tehsildar
	Provider (Pre-filled into the system)	

Part -2	2
---------	---

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Place of birth of beneficiary	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes Birth certificate of beneficiary. 1

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Self-declaration regarding Residence Certificate

	I,	(Name),
resident of		(Full Address),
am father/	nother/guardian of Sh./Smt/Ms	
and declar	as under :-	

12)

(1) That I am a Citizen of India.

(2) Neither the declarant nor the child/ward of the declarant have availed of the benefit of residence certificate in any other State.

	Signature
Date :	Name of the declarant
Place :	- Full Address

Verification

Verified that the contents of the above declaration are true and correct to the best of my knowledge and belief and nothing has been concealed therein. I am aware of the fact that if the information provided by me is proved to be false, I will be liable for punishment prescribed under law.

Date : Place :

Signature	
Name	

Verification Regarding Residence Certificate

It is certified that Sh./Smt/Ms
son/daughter of Sh./Smt,
resident ofVillage/Mohalla/City/Ward No-
District,
/his/her father/mother is personally known to me. He/she/his/her father/mother is a
permanent resident of this place and has/have been living at the above-mentioned
place foryears.

It is recommended that Residence Certificate of the State of Punjab may be issued to Sh/Smt/Miss------(Father's/Mother's name).

Date : Place :

Signature(Nambardar/Sarpanch/M.C.)----Name-----

Patwari's Report

Or

	Signature
Date :	Patwari's Name
Place :	Name of the Patwar Circle

73 | Page

Office of Tehsildar-----

16

Residence Certificate

Certified that Sh/Smt/Ms,
S/o/ D/o/W/o Sh,
resident ofDistrictDistrict
has been resident in the State of Punjab for at least five years.

No.

Tehsildar

Date :

'D'

Office of Tehsildar-----

'E'

Tehsildar

18

Residence Certificate

Certified that	Sh/Smt/Miss,
S/o/ D/o/W/o Sh	,
resident of	,Tehsil,
was born in the State of Punjab	as per Birth Certificate.

No.

Date :

Office of Tehsildar-----

Residence Certificate

(20)

Certified that Sh/	Smt/Ms	,
S/o/ D/o/W/o Sh		,
resident of		
holds immovable property in	the State of Punjab.	

No.

Date :

Tehsildar

·F'

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF INDUSTRY

8. DEPARTMENT OF INDUSTRY

Application No

Simplified Proforma for Services under Punjab RTS Act (168)

Part-1

1.	Name of the Service	Sanction of Water Supply Connection
2.	Name of Department (Pre-filled into the system)	Punjab Small Industries & Export Corporation Limited (PSIEC)

Part-2

1.	Name of Applicant
2	Husband/Father's/Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attached copy)

Part-3

Information/Documents required specific to the Service

1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	i) Wheather a new connection or revival of old connection?	New / Old Connection
	ii) If revival of old connection, reason for disconnection	
	iii) Reference of old connection and date of disconnection	
4	Purpose of Connection (Please Tick (v))	Construction / Industrial / Residential
5	Property Details:	

i) Industrial Plot No./ SCO No. /Booth No. /Residential Plot No/ Others (Please specify/	
ii) Plot Size	
iii) IFP	

Documents Required

Submitted Tick (v)/Yes

1	Self decleration in attached format
2	Copy of allotment letter/transfer letter
3	Copy of possession letter
4	Copy of Building Plan Approval letter from Punjab Small Industries & Export Corporation Limited (from Local Authorities in case of non industrial plots)
5	Approved building plan
6	Certificate from Licenced Plumber

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official

Note : This performa will be final subject to the approval of worthy M.D, PSIEC.

Application/Self Declaration form for Water Connection

- 1. That I/We have been allotted Industrial Plot No. measuring at by PSIEC vide allotment letter No. dated
- 2. That I/We am applying for water connection for construction/non construction purpose.
- 4. That the water connection shall be for one year and I will apply for regular water connection after the expiry of one year or after the completion of construction whichever is earlier.
- 5. That I/We am ready to pay the penalty as charged by PSIEC if the water is used for the purpose other than the construction or the construction is made more than area mentioned above.
- 6. That I/We agree to act in respect of the said supply in conformity with the bye-laws and regulations made by the Managing Director, PSIEC, Chandigarh and also with such amended bye-laws and regulations as may be made from time to time.
- 7. That the work for the water connection from the service pipe upto the premises including the fixing of water meter along with the service box, making ferrule etc. will be got done by me/us but under the supervision of PSIEC.
- 8. I/We agree to deposit with the Sub-Divisional Engineer, PSIEC Ltd., a sum of Rs. ______, as security (The amount prescribed for different size ferrule connections as given on Page No. 3. Amount shall be kept intact and no money from this amount shall be returned until the connection is closed by the PSIEC. In case of non-payment of water charges regularly by the Factory Owners, the said amount will be adjusted against his security and the connection will be disconnected immediately).
- 9. I/We agree to arrange and use water meter from my/our sources and the same shall conform to ISI specifications.
- 10. I/We will pay the charges for Road Repair per sq. feet as per the actual Road cutting involved at the site. The amount will be deposited along with the security before its execution.

DEPONENT

VERIFICATION:

Verified that the contents of my above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein and no part thereof.

DEPONENT

١

CERTIFICATE FOR LICENCED PLUMBER.

Premises no.situated in....size of Ferrule......

I/WeLicensed Plumbers have agreed to carry out the plumbing work on Ithe above.

Name of Plumber.....Signature of Licensed Plumber.

License no.....

Detail of Ferrule Connections

1. One kanal to One Acre	-	½″ 1/d
2. Above up to three Acres	-	¾″ 1/d
3. Above up to five Acres	-	1" 1/d

Detail of Charges

Sr no	Size of Ferrule	Service Charges	Water Meter Testing Charges	Security	Connection Charges
1.	For ½" 1/d	Rs. 150	Rs. 30/-	Rs. 300/-	Rs. 1000/-
2.	For ¾" 1/d	Rs. 150	Rs. 40/-	Rs. 600/-	Rs. 1000/-
3.	For 1" 1/d	Rs. 150	Rs. 50/-	Rs. 1200/-	Rs. 1000/-
4.	For 2" 1/d	Rs. 150	Rs. 60/-	Rs. 2400/-	Rs. 1000/-
5.	For 3" 1/d	Rs. 150	Rs. 70/-	Rs. 3600/-	Rs. 1000/-
6.	For construction purpose	i) Rs. 2.50 per sq.ft. for RCC structure type construction.ii) Rs. 1.50 per sq.ft for sheds.			

Signature of Applicant and Owner /or

his recognized Agent of the premises.

Simplified Proforma for Services under Punjab RTS Act (168)

Part-1

1.	Name of the Service	Sanction of Sewerage Connection
2.	Name of Department (Pre-filled into the system)	Punjab Small Industries & Export Corporation Limited

Part-2

1.	Name of Applicant	
2	Husband/Father's/Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attached copy)	

Part-3

Information/Documents required specific to the Service

1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	i) Wheather a new connection or revival of old connection?	New / Old Connection
	ii) If revival of old connection, reason for disconnection	
	iii) Reference of old connection and date of disconnection	
4	Property Details:	
	i) Industrial Plot No./ SCO No. /Booth No. /Resedential Plot No/ Others (Please specify/	
	ii) Plot Size	
	iii) IFP	

Documents Required

Submitted Tick (√)/Yes

1	Self decleration in attached format
2	Copy of allotment letter/transfer letter
3	Copy of possession letter
4	Copy of Building Plan Approval letter from Punjab Small Industries & Export Corporation Limited (from Local Authorities in case of non industrial plots)
5	Approved building plan
6.	Certificate from Licenced Plumber (Performa attached)
7	NOC from Punjab Pollution Control Board
8	Certificate from Registered Architect (Performa attached)
9	Copy of Regular water connection

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official

Note : This performa will be final subject to the approval of worthy M.D, PSIEC.

Application/Self Declaration form for sewerage Connection

- 1. That I/We have been allotted Industrial Plot No. measuring at by PSIEC vide allotment letter No. dated
- 2. That I/We have applied for sewerage connection first time. I undertake not to misuse and said connection will be used only for toilet waste and I shall not discharge any Industrial influent into the sewerage connection.
- 3. That I/We hereby agree to abide by all the terms and conditions applicable as per notifications of Punjab Pollution Control Board from time to time.
- 4. That I/We declare that our unit is non polluting and is covered at Sr. no _____ of notification no ______ of Punjab Pollution Control Board.
- 5. That I/We have constructed the building over the said Plot as per the building bye-laws of the Corporation and that if any violation is required to be dismantled w.r.t. building bye-laws of the Corporation. I shall dismantle/remove the same as per the instructions of the PSIEC, as and when directed.
- 6. That I/We am ready to pay any penalty or compounding fee in case it is asked by PSIEC.
- 7. That I/We hereby accept and abide by all the terms and conditions as per the allotment letter of the said plot and will accept and abide by rules and Orders made or issued by Punjab Small industries & Export Corporation, Chandigarh from time to time.
- 8. That I/We have removed all the malba and construction material from roads/road berms and also removed the temporary construction made for the storage of construction material in PSIEC land.
- 9. That I/We have got my temporary water connection regularized

DEPONENT

VERIFICATION:

Verified that the contents of my above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein and no part thereof.

DEPONENT

CERTIFICATE OF LICENCED PLUMBER

This is to certify that the internal fittings of water and sanitary installations in the Industrial Residential plot no .______ IFP Phase ______ has been done by me/under my supervision as per PWD Public Health specifications and according to the PSIEC Bye Laws and sanctioned plans.

Signature of licensed Plumber'

Full name and address.

Dated:-

License no._____

CERTIFICATE OF ARCHITECT

This is to certify that we are supervising the construction of Factory/plot no. Phase____Industrial focal point ______ and the building on the above said plot has been constructed as per the IS codes/specifications and according to the building bye laws and sanctioned building plan______ and the covered area of building is _______sft.

Signature of Architect.

Full name and address.

Registration no,

SIGNATURE OF THE APPLICANT.

PUNJAB SMALL INDUSTRY 7 EXPORT CORPORATION LIMITED, CHANDIGARH

INTER OFFICE MEMO

FROM

то

Eexecutive Engineer-I I

Sub Divisional Engineer-I)

Subject:- Sewer connection to plot no 86 IFP Naya Nangal.

On your recommendations, the approval to release the Main Sewer connection to plot no. R-86, IFP Naya Nangal, for toilet use only is hereby accorded subject to the condition that the allotee shall abide by the instructions of PPCB.

EXECUTIVE ENGINEE

No:PSIEC/EEII/ 85 Dated:- 27-4-15

Application No

Simplified Proforma for Services under Punjab RTS Act (169)

Part-1

1	Name of Service	Permission to Mortgage 1st Charge for

		setting up /running unit
2	Name of Department/ Service Provider	Punjab Small Industries & Export
	(Pre-filled into the system)	Corporation Limited

Part-2

1	Name of Applicant	
2	Husband/Father's /Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No.		
	of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Industrial focal point		
4	Plot No.		

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self declaration Form for obtaining permission to
	mortgage.
2	Consent Letter of lease deed to concerned financial
	institution/bank against 1 st charge
3	Self attested copy of latest No due certificate/Plot is
	fully paid. (Including enhanced land cost if any and
	payment of upto date extension fee or submission of
	proof of production issued by GM(DIC) as
	applicable).
4	Request letter from concerned bank/financial
	institution addressed to PSIEC seeking permission
	to mortgage the plot as 1 st Charge and sending of
	lease deed to their institution alongwith following
	undertaking:-
	a. Lease deed under no circumstances
	would be handed over by bank /
	Financial Institution to the allottee.
	b. Bank would directly return the lease
	deed to PSIEC on liquidation of credit
	facilities or at any time temporarily as
	& when demanded by PSIEC.
5	Indemnity Bond
-	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

Self Declaration

I/we are the owner(s) of the plot/shed as mentioned above and wish to seek permission to mortgage the same in favor of ______ (Name of Bank). All the requisites documents are enclosed. It is further declared that I/we are legally empowered to mortgage the above said property, which is free from any mortgage. The plot is fully paid up and nothing is outstanding against the above plot. I/we shall abide by all other conditions imposed in the said permission along with the terms and conditions of allotment letter. It is further certified that neither there is any litigation pending in any court of law nor any injunction issued by any court of law restraining the transfer/sale/mortgagee of the said property. I/we do hereby certify that the above information is true and correct and nothing has been mis-stated or concealed therein.

It is requested that our original lease deed/supplementary lease deed may be sent to ______ (name of the bank with address) and necessary permission to mortgage of the aforesaid property may be given to me/us.

Date:_____

Signature ______ (Name & Address of Owner (s) (Consent to be given by the Bank/Financial Institution from which loan is being raised)

То

	The Managin PSIEC Ltd. 18, Himalya I	•	ector				
Udyog Bhawan Sector 17-A Chandigarh							
Subject:	Permission Phase	to	Mortgage Focal P	Industrial Point/Growth	Plot/Shed Centre	No	,

Sh./Smt./M/s		R/o
		has applied for loan
against plot/shed No	Phase	, Focal Point/Growth
Centre	for availing	credit facilities from
	(Name of	Bank/Financer) . We have
agreed to sanction/release loar	n/credit facilities to the	applicant for setting up/run

unit on the allotted plot only against 1st charge. You are requested to send the original lease deed/supplementary lease deed to us and we hereby undertake as under:

- a. Lease deed under no circumstances would be handed over by bank / Financial Institution to the allottee.
- b. Bank would directly return lease deed to PSIEC on liquidation of credit facilities or at any time temporarily as & when demanded by PSIEC.

(Authorized Signatory) Name of the Bank/ Financial Institution

INDEMNITY BOND

	of	This indemnity bond is executed at		-
		by Sh./Smt		
NO		Whereas the executeant has submitted a copy of dated issued by the GM, DIC, show		
		in phase n	-	-
Point		allotted/ transferred in	his/ her/ their favour	r by PSIEC vide letter
No		dated		

And whereas the PSIEC, Chandigarh has asked the executant to furnish indemnity bond confirming the date of commencement of production shown in the PMT certificate submitted by him/ them.

Now this indemnity bond witnessth as under:-

- 1. That I/WE, am/are the allottee of Plot No.
 Phase______ Measuring

 ______Sq. Yds. In the Industrial Focal Point_______ allotted to me by the

 Punjab Small Industries & Export Corporation Ltd., Chandigarh vide allotment/transfer letter

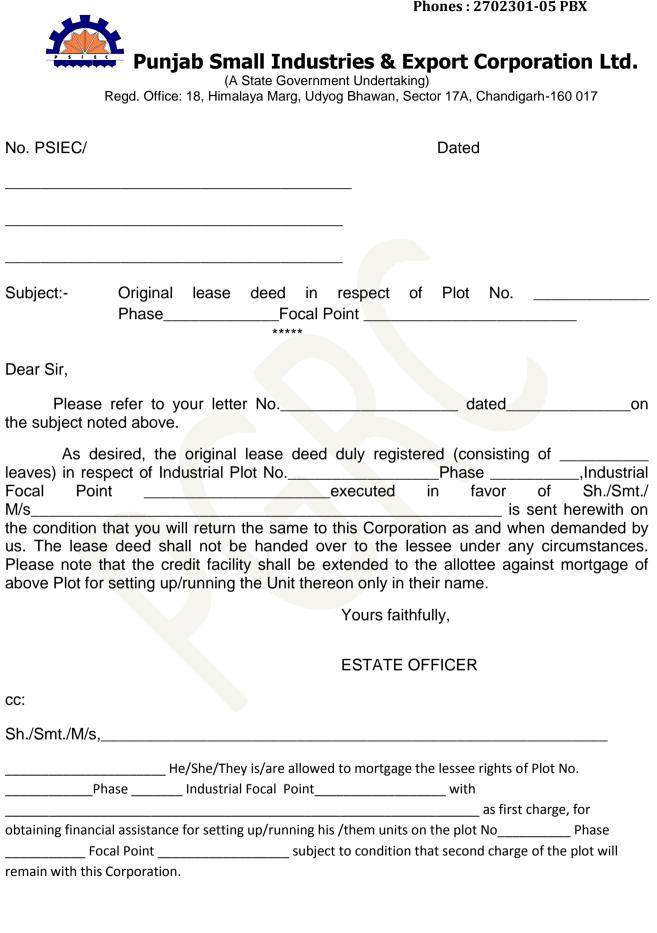
 No.
 Dated
- 2. That as per clause No._____ of the terms & Conditions of allotment, I/ we_____ was/ were required to bring the unit under production on the allotted plot No._____ Phase____ Focal point______ after raising construction with in a period of ______ years from the date of allotment and to submit the copy of PMT certificate duly issued and attested by General Manager, Distt. Industries Centre_____ as a proof of having brought the unit into production on the allotted plot failing which extension fee as per the terms of allotment/ decision taken by the Govt./PSIEC from time to time and BODs of the PSIEC is leviable.
- 3. That I/ we have brought the unit into production on ______ after raising construction of factory building on plot No.______ IFP______
- 4. That I/ we have been issued PMT certificate No._____ dated____ by the General Manager, Distt. Industries Centre______ evidencing the date of commencement of production on the plot as______.
- 5. That I have now submitted a photo copy of the above mentioned PMT certificate duly attested by GM,DIC,_____ in the office of PSIEC.
- 6. That in case it is found that the date of commencement of production mentioned in the PMT or any other particulars mentioned in the copy of the PMT are wrong/ false & PSIEC who is the absolute owner of the property in question would suffer any financial loss on account of false/ wrong PMT certificate, the executant, his/their property, legal heirs and persons shall be liable to make good the loss of any sort which may be sustained by the PSIEC at a later stage even after the transfer of plot in favour of any other person(s)/ party.
- 7. That the legal heirs./successors of the deponent shall also be liable to make good the financial loss, if any, suffered by the PSIEC due to submission of wrong & false documents depicting the date of commencement of production .

EXECUTANT

Witness:

1._____

Phones: 2702301-05 PBX



Simplified Proforma for Services under Punjab RTS Act (169)

Part-1

1	Name of Service	Permission to Mortgage 1st Charge in favor of 3 rd party
2	Name of Department/ Service Provider (Pre-filled into the system)	Punjab Small Industries & Export Corporation Limited

Part-2

1	Name of Applicant	
2	Husband/Father's /Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No.
	of beneficiary. Attach Copy)
2	Relationship with applicant
3	Industrial Focal Point
4	Plot No.

1		
1	Self declaration Form for obtaining permission to mortgage	
	and sending of lease deed to concerned financial	
	institution/bank against 1 st charge in favour of 3 rd	
	party/entity.	
2	An affidavit to pay any dues whatsoever becoming due in	
	future on account of cost enhancement and other charges	
	against the plot and the allottee has an interest in shape of	
	being a proprietor/partner/shareholder of the 3 rd party or 3 rd	
	party happens to be family member(s) of the allottee i.e.	
	spouse, children, parents, brothers and sisters.	
3	Self attested copy of latest NDC (Plot is fully paid including	
	enhanced land cost if any & Payment of upto date extension	
	fee and lease deed stand executed).	
4	Request letter from concerned bank/financial institution	
	addressed to PSIEC seeking permission to mortgage as 1 st	
	Charge and sending of lease deed to their institution for	
	availing credit facilities by	
	The bank is required to give following undertaking:-	
	a. Lease deed under no circumstances would be handed	
	over by bank / Financial Institution to the allottee.	
	b. Bank would directly return the lease deed to PSIEC on	
	liquidation of credit facilities or at any time	
	temporarily as & when demanded by PSIEC.	
5	Indemnity Bond	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Self Declaration

Permission to Mortgage in favour of 3rd party of Industrial Plot/Shed No._____, Phase_____ Focal Point/Growth Centre_____.

I/we are the owner(s) of the plot/shed as mentioned above and wish to

seek permission to mortgage the same in favor of _______ (Name of Bank). All the requisites documents are enclosed. It is further declared that I/we are legally empowered to mortgage the above said property. The plot is fully paid up and nothing is outstanding against the above plot. I/we shall abide by all other conditions imposed in the said permission along with the terms and conditions of allotment letter. It is further certified that neither there is any litigation pending in any court of law nor any injunction issued by any court of law restraining the transfer/sale/mortgagee of the said property. I/we do hereby certify that the above information is true and correct and nothing has been mis-stated or concealed therein. It is certified that allottee has interest in the 3rd party i.e. M/s ______ being ______ A certificate to this effect is enclosed.

It is requested that our original lease deed/supplementary lease deed may be sent to ______ (name of the bank with address) and necessary permission to mortgage the aforesaid property in favour of M/s______ as 3rd party /entity may be given.

Date:_____

Signature		
0		

(Name & Address of Owner (s)

Affidavit(From allottee) for obtaining 3rd party mortgage

(On Rs. 15/- Stamp Paper to be executed by allottee including all partners in case of Firm or authorized signatory Director in case of Company and attested by NOTRY PUBLIC).

I ______ S/o Sh. _____ aged ____ Resident of _____, Prop/Partner of M/s _____ do hereby solemnly affirm and declare as under:-

- 1. That industrial plot No____ Ph____ Focal Point, _____ was allotted to M/s _____ vide allotment letter No ____ Dt ____ on the terms and conditions contained therein.
- 2. That the deponent is a sole prop of the above said firm OR

That the deponent is a prop /**partner**/Share holder in the above said firm holding ____% share in the partnership/company

- 3. That the upto date full dues against the above said plot have since been paid to PSIEC.
- That Sh. _____ S/o Sh. _____ (Prop/partner/shareholder) of M/s _____ is a family member (s) i.e. _____ (spouse/son/daughter/brother/sister) of the deponent who intends to raise credit facilities from ______ OR

That the deponents are prop/partner/shareholder of M/s ______ and intend to raise credit facilities from ______

- 5. That the deponent undertakes to pay all the dues what so ever that may become recoverable in future on account of cost enhancement or otherwise in respect of plot No Ph- Focal Point,
- 6. That in case the deponent fails to clear the dues within the stipulated period, the permission for mortgage of the said plot granted in favor of M/s ______ shall be deemed to have been withdrawal/cancelled/terminated for all intents and purposes without any further notice whatsoever and the corporation shall be free to pro0ceed further against the deponent in accordance with law

Deponent

Verification

Verified that the above contents of this affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein and no part of it is false

Deponent

(Consent to be given by the Bank/Financial Institution from which loan is being raised in case of 3rd party mortgage)

То

The Managing Director, PSIEC Ltd. 18, Himalya Marg Udyog Bhawan Sector 17-A, Chandigarh

Sh./Smt./M/s	R/o
	has applied for loan
against plot/shed No	Phase, Focal Point/Growth
Centre	for availing credit facilities from
	(Name of Bank/Financer) in favour of M/s
being 3 rd party .	We have agreed to sanction/release loan/credit
facilities to the applicant agains	t 1 st charge of above property. You are requested to
send the original lease deed,	supplementary lease deed to us and we hereby
undertake as under:	

- a. Lease deed under no circumstances would be handed over by bank / Financial Institution to the allottee.
- b. Bank would directly return lease deed to PSIEC on liquidation of credit facilities or at any time temporarily as & when demanded by PSIEC.

(Authorized Signatory) Name of the Bank/ Financial Institution

(On non-judicial stamp papers of Rs.15/- to be attested from NOTARY PUBLIC)

INDEMNITY BOND

	This inde	emnity bond is e	xecuted at		on this	day of	
	by Sh./Smt				S/o.D/o.W/o.		
	Sh		Ag	ed	resident of		
	Whereas	the executeant	has submitted a cop	by of the Pl	MT certificate	No	/ letter
NO	dated	issued by the	ne GM, DIC,	showing t	the commencent	nent of produc	tion on the
Plot No		in phase		measu	iring	Sq.	Yd., Focal
Point			allotted/ transferre	ed in his/ l	ner/ their favou	r by PSIEC	vide letter
No	dated						

And whereas the PSIEC, Chandigarh has asked the executant to furnish indemnity bond confirming the date of commencement of production shown in the PMT certificate submitted by him/ them.

Now this indemnity bond witnessth as under:-

- 1. That I/WE, am/are the allottee of Plot No.
 Phase
 Measuring
 Sq.

 Yds. In the Industrial Focal Point
 allotted to me by the Punjab Small Industries & Export Corporation Ltd., Chandigarh vide allotment/transfer
 letter No.

 Dated
 Dated
 Dated
 Dated
- 2. That as per clause No._____ of the terms & Conditions of allotment, I/ we_____ was/ were required to bring the unit under production on the allotted plot No._____ Phase____ Focal point______ after raising construction with in a period of ______ years from the date of allotment and to submit the copy of PMT certificate duly issued and attested by General Manager, Distt. Industries Centre______ as a proof of having brought the unit into production on the allotted plot failing which extension fee as per the terms of allotment/ decision taken by the Govt./PSIEC from time to time and BODs of the PSIEC is leviable.
- 3. That I/ we have brought the unit into production on_____ after raising construction of factory building on plot No.______ IFP______
- 4. That I/ we have been issued PMT certificate No._____ dated____ by the General Manager, Distt. Industries Centre______ evidencing the date of commencement of production on the plot as______.
- 5. That I have now submitted a photo copy of the above mentioned PMT certificate duly attested by GM,DIC,_____ in the office of PSIEC.
- 6. That in case it is found that the date of commencement of production mentioned in the PMT or any other particulars mentioned in the copy of the PMT are wrong/ false & PSIEC who is the absolute owner of the property in question would suffer any financial loss on account of false/ wrong PMT certificate, the executant, his/their property, legal heirs and persons shall be liable to make good the loss of any sort which may be sustained by the PSIEC at a later stage even after the transfer of plot in favour of any other person(s)/ party.
- 7. That the legal heirs./successors of the deponent shall also be liable to make good the financial loss, if any, suffered by the PSIEC due to submission of wrong & false documents depicting the date of commencement of production .

EXECUTANT

Witness:

1._____



No. PSIEC/	Regd. Office:	(A S	state Gover	ISTRIES nment Unde dyog Bhaw	ertaking)		-			t d.
Subject:-	Original Phase									
Dear Sir,	Thase		1 00a						_(5 p	arty)
Please the subject n	e refer to yo oted above. esired, the			ed duly r	egistere		ated	n of		on
leaves) in res Focal Poi M/s	spect of Ind	ustrial Plo	ot No		ed i	_Phase	e avor	of	_,Indu Sh./\$	strial Smt./
the condition us. The lease permission fo	e deed shall	l return t not be h of above	he same anded ov plot is gi	to this Co er to the anted for	orporation lessee raising	on as a under a credit	and wh any cir faciliti	nen de cumst es by 3	mande ances. 3 rd par	ed by The ty i.e
shall remain	with PSIEC.		· ·					Ū		•
						Yours	faithfu	ılly,		
					ESTA	TE OF	FICER			
cc:										
Sh./Smt./M/s	,									
	Н	e/She/The	y is/are a	llowed to	mortga	ge the	lessee	rights	of Plo	t No.
	Phase		ndustrial	Focal		oint	as	first	 charge,	
obtaining finand that second cha								subjec	t to con	dition

Application No

Simplified Proforma for Services under Punjab RTS Act (169)

Part-1

1	Name of Service	Permission to Mortgage 1st Charge free
		hold plot
2	Name of Department/ Service Provider	Punjab Small Industries & Export
	(Pre-filled into the system)	Corporation Limited

Part-2

1	Name of Applicant	
2	Husband/Father's /Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No.		
	of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Industrial focal point		
4	Plot No.		

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self declaration Form for obtaining permission to mortgage in favour of financial institution/bank against 1 st charge	
2	Self attested copy of latest NDC /Plot is fully paid including enhanced land cost if any & Payment of upto date extension fee.	
3	Permission to mortgage is allowed in favour of financial institution /bank to the allottee of Corporation for availing credit facilities for setting up/running unit on the allotted plot only.	
4	Request letter from concerned financial institution/bank addressed to PSIEC for obtaining permission to mortgage.	
5	Conveyance deed stands executed and got registered.	
6	Indemnity Bond	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	

Self Declaration

Permission for NOC to Mortgage Industrial/residential Plot/Shed No._____, Phase_____ Focal Point/Growth Centre_____.

I/we are the owner(s) of the plot/shed as mentioned above and wish to seek permission to mortgage the same in favor of _______ (Name of Bank). All the requisites documents are enclosed. It is further declared that I/we are legally empowered to mortgage the above said property, which is free from any mortgage. The plot is fully paid up and nothing is outstanding against the above plot. I/we shall abide by all other conditions imposed in the said permission along with the terms and conditions of allotment letter. It is further certified that neither there is any litigation pending in any court of law nor any injunction issued by any court of law restraining the transfer/sale/mortgagee of the said property. I/we do hereby certify that the above information is true and correct and nothing has been mis-stated or concealed therein.

It is requested that necessary permission for NOC to mortgage the aforesaid property may be given to me/us.

Date:_____

Signature ______ (Name & Address of Owner (s)

Service No. 169 (On non-judicial stamp papers of Rs.15/- to be attested from NOTARY PUBLIC)

INDEMNITY BOND

	This indemnity bond is executed at by Sh./Smt						•			
		-								
	Whereas the	executeant	has submitted	a copy	of the P	MT certifica	te No		/ 1	letter
NO	dated	issued by t	he GM, DIC,_		showing	the commend	cement of	f product	ion or	1 the
Plot No		in phase			meas	uring		Sq.Y	′d., F	Focal
Point			allotted/ tra	ansferred	in his/	her/ their far	vour by	PSIEC	vide l	letter

No._____ dated_____

And whereas the PSIEC, Chandigarh has asked the executant to furnish indemnity bond confirming the date of commencement of production shown in the PMT certificate submitted by him/ them.

Now this indemnity bond witnessth as under:-

- 1. That I/WE, am/are the allottee of Plot No.
 Phase
 Measuring
 Sq. Yds. In the Industrial Focal Point

 allotted to me by the Punjab Small Industries & Export Corporation Ltd., Chandigarh vide allotment/transfer
 letter No.
 Dated
- 2. That as per clause No._____ of the terms & Conditions of allotment, I/ we_____ was/ were required to bring the unit under production on the allotted plot No._____ Phase_____ Focal point______ after raising construction with in a period of ______ years from the date of allotment and to submit the copy of PMT certificate duly issued and attested by General Manager, Distt. Industries Centre______ as a proof of having brought the unit into production on the allotted plot failing which extension fee as per the terms of allotment/ decision taken by the Govt./PSIEC from time to time and BODs of the PSIEC is leviable.
- 3. That I/ we have brought the unit into production on _____ after raising construction of factory building on plot No. ______ IFP_____
- 4. That I/ we have been issued PMT certificate No.____ dated____ by the General Manager, Distt. Industries Centre_____ evidencing the date of commencement of production on the plot as_____.
- 5. That I have now submitted a photo copy of the above mentioned PMT certificate duly attested by GM,DIC,_____ in the office of PSIEC.
- 6. That in case it is found that the date of commencement of production mentioned in the PMT or any other particulars mentioned in the copy of the PMT are wrong/ false & PSIEC who is the absolute owner of the property in question would suffer any financial loss on account of false/ wrong PMT certificate, the executant, his/their property, legal heirs and persons shall be liable to make good the loss of any sort which may be sustained by the PSIEC at a later stage even after the transfer of plot in favour of any other person(s)/ party.
- 7. That the legal heirs./successors of the deponent shall also be liable to make good the financial loss, if any, suffered by the PSIEC due to submission of wrong & false documents depicting the date of commencement of production.

EXECUTANT

Witness:	
1	
2	

Outcome of Service No. 169



Phones : 702301-05 PBX/700411 PUNJAB SMALL INDUSTRIES & EXPORT CORPORATION LIMITED (A State Government Undertaking) 'UDYOG BHAWAN',18-HIMALAYA MARG, SECTOR 17-A, CHANDIGARH

No. PSIEC/Estate/

_____,

SUBJECT:- N.O.C. FOR MORTGAGE OF PLOT/SHED ______ PHASE ______ FOCAL POINT _____

Dear Sir,

Please refer to your letter dated ______ on the above

subject.

This Corporation has no objection in your mortgaging the above freehold allotted / converted plot/shed in favour of ______ for securing financial assistance for setting up/running your unit on the said plot only.

Yours faithfully,

ESTATE OFFICER

CC:

Simplified Proforma for Services under Punjab RTS Act (170)

Part-1

1	Name of Service	Permission for registration of Lease/Conveyance deed
2	Name of Department/ Service Provider (Pre- filled into the system)	Punjab Small Industries & Export Corporation Limited

Part-2

1	Name of Applicant	
2	Husband/Father's /Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No. of
	beneficiary. Attach Copy)
2	Relationship with applicant
3	Industrial Focal Point
4	Plot No.
-	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self declaration form for registration of lease/conveyance deed	
	duly typed on the prescribed format on non judicial stamp	
	papers prescribed by the revenue authorities and self	
	declaration regarding no mis-utilisation of plot exists.	
2	Proof of deposit of 30% down payment/upto date payment	
	stand received in case of registration of lease deed and fully	
	paid in case of conveyance deed including enhanced land cost	
	if any and payment of upto date extension fee or submission of	
	proof of production issued by GM(DIC) as applicable	
	alongwith Indemnity bond as per prescribed format and lease	
	deed stand executed	
3	Three copies of Lease/conveyance deed including one on	
	stamp paper. The amount of the stamp duty would be as	
	applicable on the date of execution of lease /conveyance deed	
	prescribed by the office of concerned Sub Registrar. Non	
	judicial stamp papers to be purchased in the name of PSIEC	
	through allottee.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	e	6.	Signature of authorised official	

Self Declaration

Registration of	lease	deed/conveyance	e deed	of	Industrial/residential
Plot/Shed No		, Pha <mark>se</mark>			Focal Point/Growth
Centre		·			

I/we are the owner(s) of the plot/shed as mentioned above and wish to seek registration of lease deed/conveyance deed. All the requisites documents are enclosed. It is further certified that neither there is any litigation pending in any court of law nor any injunction issued by any court of law restraining the transfer/sale/mortgagee of the said property and the allotment of plot is regular. I/we do hereby certify that the above information is true and correct and nothing has been mis-stated or concealed therein. All the requisite documents, as per checklist, are enclosed.

It is requested that lease deed/conveyance deed of above plot may be got executed and registered.

Date:_____

Signature _____

(Name & Address of Owner (s)

Enclosures

1. 3 sets of lease deed/conveyance deed

2. Self declaration

On non-judicial stamp papers of Rs.15/- to be attested from NOTARY PUBLIC)

INDEMNITY BOND

This indemnity bond is executed at	on this	day of
by Sh./Smt	S/o.D/	/o.W/o.
Sh	Aged	resident of
Whereas the executant has submitted a copy of	of the PMT certificate	No/ letter
NO dated issued by the GM, DIC, s	showing the commence	ment of production on the
Plot Noin phase	measuring	Sq.Yd., Focal
Point allotted/ transferred i	in his/ her/ their favo	our by PSIEC vide letter
No dated		

And whereas the PSIEC, Chandigarh has asked the executant to furnish indemnity bond confirming the date of commencement of production shown in the PMT certificate submitted by him/ them.

Now this indemnity bond witnessth as under:-

- 1. That I/WE, am/are the allottee of Plot No.
 Phase
 Measuring
 Sq. Yds.

 In the Industrial Focal Point
 allotted to me by the Punjab Small Industries & Export

 Corporation Ltd., Chandigarh vide allotment/transfer
 letter
 No.
 Dated
- 2. That as per clause No._____ of the terms & Conditions of allotment, I/ we____ was/ were required to bring the unit under production on the allotted plot No._____ Phase____ Focal point_____ after raising construction with in a period of _____ years from the date of allotment and to submit the copy of PMT certificate duly issued and attested by General Manager, Distt. Industries Centre_____ as a proof of having brought the unit into production on the allotted plot failing which extension fee as per the terms of allotment/ decision taken by the Govt./PSIEC from time to time and BODs of the PSIEC is leviable.
- 3. That I/ we have brought the unit into production on _____ after raising construction of factory building on plot No. _____ IFP_____
- 4. That I/ we have been issued PMT certificate No.____ dated___ by the General Manager, Distt. Industries Centre_____ evidencing the date of commencement of production on the plot as_____.
- 5. That I have now submitted a photo copy of the above mentioned PMT certificate duly attested by GM,DIC,_____ in the office of PSIEC.
- 6. That in case it is found that the date of commencement of production mentioned in the PMT or any other particulars mentioned in the copy of the PMT are wrong/ false & PSIEC who is the absolute owner of the property in question would suffer any financial loss on account of false/ wrong PMT certificate, the executant, his/their property, legal heirs and persons shall be liable to make good the loss of any sort which may be sustained by the PSIEC at a later stage even after the transfer of plot in favour of any other person(s)/ party.
- 7. That the legal heirs./successors of the deponent shall also be liable to make good the financial loss, if any, suffered by the PSIEC due to submission of wrong & false documents depicting the date of commencement of production.

EXECUTANT

Witness:

1._____

Simplified Proforma for Services under Punjab RTS Act (171)

1	Name of Service	Permission to conversion from lease to free hold
2	Name of Department/ Service Provider (Pre-filled into the system)	Punjab Small Industries & Export Corporation Limited

Part-2

1	Name of Applicant
2	Husband/Father's /Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part-3

Information/Documents required specific to the service

1	Name of beneficiary, if not applicant. (Adhaar No.
	of beneficiary. Attach Copy)
2	Relationship with applicant
3	Industrial Focal Point
4	Plot No.

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Self declaration form alongwith required	
	conversion charges @ Rs. 20/- Per Sq.Yds. bank	
	draft No dt Amount Rs.	
	and Self declaration that no-mis-	
	utilisation exist on plot	
2	Affidavit on the prescribed format	
3	Self attested copy of latest NDC /Proof of plot is	
	fully paid	
4		
5		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	

Self Declaration

Permission for conversion of lease hold allotment into free hold in respect of industrial / residential Plot / Shed No._____, Phase_____, Focal Point/Growth Centre_____.

I/we are the owner(s) of the plot/shed as mentioned above and wish to Convert the lease hold allotment into free hold. All the requisites documents are enclosed. Plot is free from any sort of encumbrance. It is further certified that neither there is any litigation pending in any court of law nor any injunction issued by any court of law restraining the transfer/sale/mortgage of the said property. I/we do hereby certify that the above information is true and correct and nothing has been mis-stated or concealed therein.

It is requested that necessary permission for conversion of lease hold allotment to free hold the aforesaid property may be given to me/us.

Date:_

Signature _____ (Name & Address of Owner (s)

AFFIDAVIT

(On Rs. 10/- Stamp Paper to be executed by allottee including all partners in case of Firm or authorised signatory Director in case of Company and attested by NOTRY PUBLIC).

١	S/O Shri				
aged	Resident of				
Prop.,/Partner/authorise	ed signatory Director of M/S				
allotte	e of Plot/Shed No	Phase			
Focal Point	do hereby	solemnly affirm			

- 1. That there is no change in name, style and constitution of the allottee of above plot/shed since original / last allotment / transfer / change communicated vide letter dated _____ by PSIEC.
- 2. That the above plot/Shed is not already mortgaged with any financial institution/bank and the same is free from all sorts of encumbrances etc.

DEPONENT

DATE :

PLACE :

VERIFICATION

Verified that the above contents are true and correct to the best of my knowledge and belief and nothing has been concealed therein from.

DEPONENT

(On non-judicial stamp papers of Rs.15/- to be attested from NOTARY PUBLIC)

INDEMNITY BOND

This indemnity bond is executed at	on this day of
by Sh./Smt	S/o.D/o.W/o.
Sh	Agedresident of

		Whereas	the	executant	has	submitte	ed a	copy	of	the	PMT	certific	ate No	•		/	letter
NO		dated		issued by	the	GM, DI	C,		sho	wing	g the	comme	ncemen	t of	produc	tion o	on the
Plot	No		in	phase					1	meas	suring				_ Sq.Y	′d.,	Focal
Point_						allotted/	tran	sferred	in	his	/ her/	their f	avour	by	PSIEC	vide	letter
No.		dated															

And whereas the PSIEC, Chandigarh has asked the executant to furnish indemnity bond confirming the date of commencement of production shown in the PMT certificate submitted by him/ them.

Now this indemnity bond witnessth as under:-

- 1. That I/WE, am/are the allottee of Plot No.
 Phase______Phase______Neasuring ______Sq. Yds.

 In the Industrial Focal Point_______allotted to me by the Punjab Small Industries & Export Corporation Ltd., Chandigarh vide allotment/transfer
 letter No.______Dated
- 2. That as per clause No._____ of the terms & Conditions of allotment, I/ we____ was/ were required to bring the unit under production on the allotted plot No._____ Phase____ Focal point_____ after raising construction with in a period of _____ years from the date of allotment and to submit the copy of PMT certificate duly issued and attested by General Manager, Distt. Industries Centre_____ as a proof of having brought the unit into production on the allotted plot failing which extension fee as per the terms of allotment/ decision taken by the Govt./PSIEC from time to time and BODs of the PSIEC is leviable.
- 3. That I/ we have brought the unit into production on _____ after raising construction of factory building on plot No. _____ IFP_____
- 4. That I/ we have been issued PMT certificate No._____ dated____ by the General Manager, Distt. Industries Centre______ evidencing the date of commencement of production on the plot as______.
- 5. That I have now submitted a photo copy of the above mentioned PMT certificate duly attested by GM,DIC,_____ in the office of PSIEC.
- 6. That in case it is found that the date of commencement of production mentioned in the PMT or any other particulars mentioned in the copy of the PMT are wrong/ false & PSIEC who is the absolute owner of the property in question would suffer any financial loss on account of false/ wrong PMT certificate, the executant, his/their property, legal heirs and persons shall be liable to make good the loss of any sort which may be sustained by the PSIEC at a later stage even after the transfer of plot in favour of any other person(s)/ party.
- 7. That the legal heirs./successors of the deponent shall also be liable to make good the financial loss, if any, suffered by the PSIEC due to submission of wrong & false documents depicting the date of commencement of production.

EXECUTANT

Witness:

1._____

Phones : 2702301-05 PBX



(A State Government Undertaking)

Regd. Office: 18, Himalaya Marg, Udyog Bhawan, Sector 17A, Chandigarh-160 017

No.PSIEC/ESTATE/

Dated:

SUBJECT :- CONVERSION OF LEASE-HOLD PLOT No. _____ at FOCAL POINT

Dear Sir,

Please refer to your letter dated ______ on the above noted subject. The allotment of Plot No. ______ in Phase ______ at Industrial Focal Point ______ is hereby converted from LEASE-HOLD into FREE-HOLD. The other terms and conditions of allotment shall remain un-changed. However, the transfer of Plot can only be considered as per the Transfer Policy of the Corporation.

Yours faithfully,

Estate Officer

Simplified Proforma for Services under Punjab RTS Act (195)

Part -1

1	Name of Service	(a) Registration of Societies under the Society Registration Act ,XXI of 1860 at District Level
2	Name of Department/ Service Provider (Pre-filled into the system)	Industry Department

Part -2

1	Name of Applicant /Contact Person	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	

Documents Required

Yes

1	The Memorandum of Association as required under section 1 & 2 of	
	the act may be filed giving therein the following particulars. A)	
	Name of the Society. B) Location of Registered Office & Area of	
	Operation. C) Aims and objects of the Society. D) Name, address,	
	occupation & designation of governing body should be given strictly	
	according to copy of Rules & Regulation of the Society. E) The	
	Memorandum of Association should be filed duly signed by at least	
	seven members of the society. F) The signature of the subscribers to	
	the memorandum of Association should be witnessed by a person	
	other than the signatories. Witness should be given his full address	
2	The copy of the rules and regulation should be filled in details duly	
	certified to be true copy by atleast three (3) members of the	
	governing body in the end./	
3	A copy of the proceeding of the General meeting in which the	
	registration of the society was resolved on should be filed duly	
	attested by responsible office bearer of the society (Attested by	
	Notary)	
4	Receipt of Rs.500/- (Rs. Five hundred toward registration fee may	
	please be deposited into the treasury under "head 1475 other general	
	Economic Service 200 Regulation Act 1860")	

Submitted Tick ($\sqrt{}$) /

5	Self attested photographs, name, Address/Tel. no. Occupation,	
	Designation and Signature of members of Governing body.	
6	Witness (Advocate or Gazetted Officer or Notary)	
7	Proof of residence of all members of Governing body	
8	Self declaration as per format.	Format of self-
	declaration	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

CERTIFICATE OF REGIST	RATION OF SOCIETIES
I hereby certify that has this day been registered under the Societies Registr Amendment Act. 1957 — Given under my hand at Chandigarh this	ation Act. (XXI of 1860) and as amended by Punjab
Given under my hand al Chanaigarn inis day of Two thousand	
Fee Rs. 500/-	REGISTRAR OF FIRMS & SOCIETIES PUNJAB CHANDIGARH

Simplified Proforma for Services under Punjab RTS Act (196)

Part -1

1	Name of Service	Registration of Societies under the Society Registration Act- XXI of 1860 at Head Quarter Level
2	Name of Department/ Service	Industry Department
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant /Contact Person	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3		
4		
Docu	iments Required	Submitted Tick ($$) /

Yes

1		
	The Memorandum of Association as required under section 1 & 2 of the	
	act may be filed giving therein the following particulars: A) Name of the	
	Society. B) Location of Registered Office & Area of operation. C) Aims	
	and objects of the Society. D) Name, address, occupation & designation of	
	governing body should be given strictly according to copy of Rules &	
	Regulation of the Society. E) The Memorandum of Association should be	
	filed duly signed by at least seven members of the society. F) The	
	signature of the subscribers to the Memorandum of Association should be	
	witnessed by a person other than the signatories. Witness should be given	
	his full address.	
2	The copy of the rules and regulation should be filled in details duly	
	certified to be true copy by atleast three (3) members of the governing	
	body in the end.	
3	A copy of the proceeding of the General meeting in which the registration	
	of the society was resolved on should be filed duly attested by responsible	
	office bearer of the society (Attested by Notary)	
4	Receipt of Rs.500/- (Rs. Five hundred toward registration fee may please	
	be deposited into the treasury under "head 1475 other general Economic	
	Service 200 Regulation Act 1860")	

5	Self attested photographs, name, Address/Tel. no. Occupation, Designation and Signature of members of Governing body.	
6	Witness (Advocate or Gazetted Officer or Notary) check	
7	Proof of residence of all members of Governing body.	
8	Self declaration in format	Format of self declaration

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	

EXAMPLE ATE OF REGISTRATION OF SOCIETIES	
No of	
has this day been registered under the Societies Registratio Amendment Act. 1957 — Given under my hand at Chandigarh this	
day of	
Fee Rs. 500/-	REGISTRAR OF FIRMS & SOCIETIES PUNJAB CHANDIGARH

SimplifiedProformaforServices under Punjab RTS Act (197)

Part -1

		Par	ι-1
1	Name of Service		ance of Registration Certificate of New Firms under the ian Partnership Act, 1932 at Head Quarter Level
2	Name of Department/ Service Provider	Ind	ustry Department
	(Pre-filled into the system)		
		Par	t -2
1	Name of Applicant/Contact Person		
2	Husband / Father's / Mother's Name		
3	Permanent Address		
4	Correspondence Address		
5	Correspondence Phone No.		
6	Correspondence e-mail		
5	Adhaar Card No. (Attach Copy)		

Information / Documents required specific to the service Information

1	Name of beneficiary, if not applicant.
	(Adhaar No. of beneficiary. Attach Copy)
2	Relationship with applicant
3	
4	

Part -3

Docu	Documents Required Submitted Tie		
1	Model forms of partnership deed contain in part-V of the Indian Partnership		
	Act,1932, Application for registration of firm, in Form No.1(Rule-3).		
2	Copy of partnership deed with Rs.1000/- on Non-Judicial Stamp Paper, duly		
	attested by the Notary Public		
3	Passport size photo of each partner.		
4	Partner's I.D. Proof, (Self Attested)		
5	A sum of Rs.3/- (Rs. Three) toward (registration fee may please be deposited into		
	the treasury under head "1475 other general Economic Service 200 Regulation of		
	other business undertaking 02 receipt under the partnership Act.1932")(Receipt		
	of Registration fee of Rs. 3/-)		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

FORM 'C'

{ Rule (9) }

No. _____ of _____

ACKNOWLEDGEMENT OF REGISTRATION OF FIRMS

The Registrar of Firms, Punjab acknowledges the receipt of the statement prescribed by section 58 (1) of Indian Partnership Act, 1932, The statement has been filed and the name of the firms

M/S

has been entered in the Registrar of Firms.

Place:Chandigarh. Dated: Registrar of Firms Punjab

FORM 'A'

[RULE (5)]

REGISTER OF FIRMS & SOCIETIES

(Maintained under section 59 of the Indian Partnership Act, 1932)

1. Serial Number of Firm	of
2. Name of Firm :	
3. Date of Registration	
4. Duration of the firm	
5. Principal place of business :	

Date of Change	Remarks	

6. Partners :-

Name of the Partners	Address	Date	Remarks
		Joining ceasing	

Name of Firm

Sr. No. of Doc.	Description of Document	Date of filing	Sign. of Registrar	

Application for registration under

Sd/-

Indian Partnership Act, 1932

Registrar of Firms & societies, Pb.

9. SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF TOWN AND COUNTRY PLANNING

9. DEPARTMENT OF TOWN AND COUNTRY PLANNING

Application No

Simplified proforma for services under Punjab RTS Act (186)

Part -	- 1
--------	-----

1.	Name of Service	Change of land use / NOC in case of Petrol Pump, Rice Sheller, Brick Kiln (Service Notification No. 186)
2.	Name of Department/ Service Provider (prefilled into the system)	Department of Town and Country Planning, Punjab

Part – 2

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

1.	Name of the project		
2.	Land Area in standard acres (4840 Sq Yds)		
3.	Details of land	Village (with Hadbast No)	
		Tehsil	District
4.	Service applied for (Petrol Pump/ Rice		
	Sheller/ Brick Kiln)		

Documents to be attached

1.	Type of Documents	Remarks	Y/N	
a.	Location/site Plan	Location plan drawn from a permanent feature on ground duly signed by a registered Town Planner/ Architect/Civil Engineer and owner.		
b.	Ownership Documents	Self ownership/ registered lease deed for a period of minimum 15 years		
c.	Aks Shajra Plan	Original Aks Shajra showing the site clearly demarcated and dimensioned along boundary of site in Karams and width of approach road/ rasta, if any, duly attested by concerned Patwari/Tehsildar.		
d.	Jamabandi	Latest jamabandi of the land in original not older than 15 days from date of application.		
e.	Revenue list	Revenue list comprising details of Village name (HB No.), Khasra No. and area to be considered.		
f.	 C.R.O. report a) Self certified Khatta/ Khatoni No., Khasra No., if area is less than 5 acres. b) Verified by concerned CRO/ Tehsildar Khatta/ Khatoni No., Khasra No., if area is more than 5 acres. 	 Circle Revenue Officer (Tehsildar) report should be clear as per following details: a) Title of the land b) Khatta/Khatoni No., Khasra No. c) Area of the site d) Whether the land is encumbrance free or not e) Specific report about revenue rasta's if any f) Specific report regarding the wakf board land, shamlat, patti, custodian land, forest land under PLPA., govt. land g) Natural drain if any passing through the site. h) Ownership of Mustarka Khata with verification of a possession if any. 		

		i) Verification of Khasra numbers.			
		j) Gas pipeline passing through the site, if any.			
g.	Self Declaration	Self declaration by the	Self declaration by the promoter regarding widening of		
-		existing road, for reg	existing road, for regularization of building etc. and payment of		
		charges (CLU, EDC, LF/ PF, SIF, labour cess) etc. or any other			
		fee levied by the govt. from time to time, if required.			
h.	Processing Fee:	Amount	Bank Draft No	Drawee Bank	
	Attach Bank Draft @ Rs. 5000 for the 1st				
	acre and Rs. 1000 for every additional acre				
	or part thereof				

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official

Simplified proforma for services under Punjab RTS Act (187)

	Part – 1				
1.	1. Name of Service Change of Land Use: Where Master Plans are notified and where Local Plans				
	Areas are not notified. Residential, Industrial, Institutional up to 25 acres				
		Commercial (excluding multiplex and shopping mall) up to 2 acres. (Service			
		Notification No. 187)			
2.	2. Name of Department/ Service Provider Department of Town and Country Planning, Punjab				
	(prefilled into the system)				

Part – 2

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
4.		District:	Pincode:
5.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
6.	Correspondence Phone No.		
8.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

Type of Documents	Remarks Location plan drawn from a permanent feature on ground duly signed by a registered Town Planner/ Architect/Civil Engineer and owner.		
Location/site Plan			
Ownership Documents	 In case of <u>PAPRA</u> <u>Projects</u> Self Minimum Maximum Maximum<th></th>		
Aks Shajra Plan	Original Aks Shajra showing the site clearly demarcated and dimensioned along boundary of site in Karams and width of approach road/ rasta, if any, duly attested by concerned Patwari/Tehsildar.		
Jamabandi	Latest jamabandi of the land in original not older than 15 days from date of application.		
Revenue list	Revenue list comprising details of Village name (H.B. No.), Khasra No. and area to be considered.		
 C.R.O. report a)Self certified Khatta/ Khatoni No., Khasra No., if area is less than 5 acres. b)Verified by concerned CRO/ Tehsildar Khatta/ Khatoni No., Khasra No., If area is more than 5 acres. 	 Circle Revenue Officer (Tehsildar) report should be clear as per following details: a) Title of the land b) Khatta/Khatoni No., Khasra No. c) Area of the site d) Whether the land is encumbrance free or not e) Specific report about revenue rasta's if any f) Specific report regarding the wakf board land, shamlat, patti, custodian land, forest land under PLPA., Govt. land g) Natural drain if any passing through the site. h) Ownership of Mustarka Khata with verification of a possession if any. i) Verification of Khasra numbers. 		
	Type of Documents Location/site Plan Ownership Documents Ownership Documents Aks Shajra Plan Aks Shajra Plan Jamabandi Revenue list C.R.O. report a)Self certified Khatta/ Khatoni No., Khasra No., if area is less than 5 acres. b)Verified by concerned CRO/ Tehsildar Khatta/ Khatoni No., Khasra No., If area is	Location/site Plan Location plan drawn from a permanent feature on ground duly signed by a registered Town Planner/ Architect/Civil Engineer and owner. Ownership Documents • In case of <u>PAPRA</u> Projects Self • Minimum development agreement of owners/ owners/ oowners/ oowners/ oowners/ oowners/ colony. • Maximum development agreement 25% • In case of MEGA Projects Aks Shajra Plan Original Aks Shajra showing the site clearly demarcated and dimensioned along boundary of site in Karams and width of approach road/ rasta, if any, duly attested by concerned Patwari/Tehsildar. Jamabandi Latest jamabandi of the land in original not older than 15 days from date of application. Revenue list Circle Revenue Officer (Tehsildar) report should be clear as per following details: a) Title of the land no, if area is less than 5 acres. • Title of the land no, if area is less than 5 acres. • Title of the land b)Verified by concerned CRO/ Tehsildar Circle Revenue Officer (Tehsildar) report should be clear as per following details: a) Title of the land a) Subtra for area is less than 5 acres. • Maximu Andra area to be considered. c) Area of the site • Whether the land is encumbrance free or not g) Natural drain if any passing through the site. • Area of the site no, maxima drain in any passing through the site. • Nownership for dustarka Khataw with verification of a posesesint in any	

g.	Self Declaration	Self declaration by the promoter regarding widening of existing road, for regularization of building etc and payment of charges (CLU, EDC, LF/PF,SIF, labour cess) etc. or any other fee levied by the Govt. from time to time, if required.			
h.	Processing Fee: Attach Bank Draft @ Rs. 5000 for the 1 st acre and Rs. 1000 for every additional acre or part thereof	Amount	Bank Draft No	Drawee Bank	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

DEPARTMENT OF TOWN AND COUNTRY PLANNING PUNJAB

Senior Town Planner. PUDA Bhawan, Sector-62, S.A.S. Nagar.

Sh. Tirtah Singh, S/o Shri Gurdev Singh, M/s. S.D. Resorts, Vill. Nand Pur Kalour, Tehsil Bassi Pathana, Distt. Fatehgarh Sahib.

Memo No. 2909 -STP(S)SP-36(F) 26/09/2013 Dated, Chandigarh, the

Subject:

Regarding Change of Land Use for M/s. S.D. Resorts Marriage Palace, Vill. Nand Pur & Kalour (HB No. 181 & 182) Tehsil Bassi Pathana, District Fatehgarh Sahib.

Chief Administrator GMADA letter No. GMADA/CA-2012/90, dated

04.01.2013.

Your application dated 06.09.2013.

Letters under reference regarding Change of Land Use for land measuring 3.01 acres located at Village Nand Pur & Kalour (HB No. 181 & 182) Tehsil Bassi Pathana, District Fatehgarh Sahib is considered in this office. The permission for Change of Land Use from Agricultural to Marriage Palace is granted in view of instructions issued vide Pb. Govt. memo. 12/8/2012-5HGII/5094, dated 16.11.12 & 12/8/2012-5HGII/105, dated 07.01.2013. The detail of area as verified by Tehsildar Bassi Pathana vide his letter dated 20.03.13 is attached at annexure "A".

The permission is granted subject to the following terms and conditions:-

The change of land use shall be in the hands of Sh. Tirtah Singh, S/o Shri Gurdev Singh, M/s. S.D. Resorts, Vill. Nand Pur Kalour, Tchsil Bassi Pathana, Distt. Fatehgarh Sahib and they shall deposit EDC/Licence/ Permission Fee and all other charges levied or to be levied by the Housing and Urban Development Department .

The permission for change of land use shall be valid for two years from the date of grant of such permission and should the permission be not availed for the purpose for which, it is granted within the aforesaid period, the permission shall be deemed to have

The permission of C.L.U. shall not be considered as regularization of existing structure within the site, unless the building plans of the existing structures are got approved by the applicant from the Competent Authority within six month period after the grant of the change of land use of the site.

The applicant shall be responsible for any litigation if any regarding land ownership/owners in any court of law.

The issue of ownership of land is independent and exclusive of permission of Change of Land Use. Therefore this permission of CLU doesn't in any manner grant or effect ownership right of this land, which have to be determined by Competent Authority. The applicant in whose hand this Change of Land use lies shall be bound by the decision of such Competent Authority.

The construction shall be done in 3.01 Acres land only on the site/Khasra Nos. 442/2 & 443 of village Kalour H.B. No. 182 & Khasra No. 6//6/2, 7//9/2/2 & 10/2 of village Nand Pur H:B No. 181 as verified by the Tehsildar Bassi Pathana.

Applicant shall not undertake/continue any development work/ construction until final layout plan / zoning plan / the Competent Authority approves building plans.

Through revenue rastas, if any, passing through the site shall be kept unobstructed. Applicant shall obtain NOC from P.P.C.B. under the Water Prevention and control of Pollution Act, 1970, Municipal Sclid Waste Management and Handling Rules, 2000 or any other relevant Act before undertaking any development at site. ix)

Applicant shall not make any construction under H.T./L.T. transmission electric lines passing through the site or shall get these lines shifted by applying to the concerned authority This permission shall not provide any immunity from any other Act/ Rules/ Regulations/

Instructions Directions of any court or authority applicable to the land in question.

Applicant shall make provision for the disposal of rain/storm water of the proposed project and shall not obstruct the natural flow of rain/storm water of the surrounding area.

The applicant shall make appropriate provisions for collecting roof top rain water which shall be used for re-charging the ground water by providing bore well. The applicant shall be abide by the order dated 20th Jan/6th Feb,2006 issued by Govt. of

- xii) The applicant shall be abide by the order dated 20th Jan/6th Feb,2006 issued by Govt. of Punjab, Deptt. of Science, Technology, Environment and Non Conventional Energy taken from the extract from Punjab Govt. Gazette dated 17.03.2006.
- xiii) The applicant shall make his own suitable arrangements for drinking water supply, disposal of sewage, solid waste management, etc.
- xiv) The application shall make provisions for water harvesting and plantation in the premises as per building bye laws or instructions from the Govt. issued from time to time.
- xv) The applicant shall obtain NOC from PPCB and comply with all the conditions imposed in NOC or other notifications issued by the department of Forest and Environment.
- The applicant shall obtain the permission from Forest department, if he derives the access to his site through forest land as well as applicant shall obtain NOC from the Forest Department under FCA 1980, before undertaking development at site.
- The applicant shall be liable to obtain all the statutory clearances/NOC form different agencies under any act or instructions at his own level.
- sviii) Since the site falls within LPA Bassi Pathana, the applicant will be liable to develop the site as per proposals of LPA Bassi Pathana.
- xix) The applicant shall not object to the acquisition of land for proposed roads if any passing through or adjoin the site, according to the any future planning.
- XX) Your site falls on Other District Road, which can be upgraded in future, so you would be bound to leave the needful land form front of your site at that time .
- xxi) Applicant shall be liable to get lease documents renewed, if required, otherwise the C.L.U. approval letter will automatically lapse after the expiry of the lease documents.
- xxii) The applicant shall take permission of Competent Authority u/s 143(2) of "The Punjab Regional & Town Planning & Development Act (Amended) 2006" before taking up development works at site.
- xxiii) In case of any controversy amongst the parties/directors of the firm or any litigation in any court of law, this office shall in no manner be responsible party to it.
- xxiv) The applicant shall be liable to pay the differences of amount, if any, found at any point of time by the concerned development authority as and when demanded.
- As per memo No. PUDA/CA/20131713-16 dated 27.02.2013 Restrictions in the area are imposed on construction and installation of any new structure for extraction of ground water resources without prior specific approval of the Authorized Office (Deputy Commissioner) of the District and subject to the guide lines /safeguards envisaged from time to time in this connection by Authority for ground water extraction and rain water harvesting recharges etc.

Receipt of Rs. 1,50,500/- (Rs. One Lac Fifty Thousand & Five Hundred only) received through DD No. 327020 dt. 13.08.2013 towards CLU charges (Ist installment) i.e. 25% of the total CLU charges is hereby enclosed. The balance 75% amount Rs. 4,57,500/-(Rs. Four Lac Fifty Seven Thousand & Five Hundred Only) of the CLU charges shall be payable in three equal six monthly installments with rate of interest 12% to this office.

STP(S)/SP-26(F)

Endst. No. 2910

xi)

Senior Town Planner, S.A.S. Nagar. Dated: 26 09 2013

A copy is forwarded to Chief Administrator, GMADA with reference to letter No. GMADA/CA-2012/90, dt. 04.01.2013 along with Bank Draft No. 327019 dt. 13.08.2013 of EDC Ist Installment (25%) amounting to Rs. 1,12,875/- (Rupees One Lac Twelve Thousand Eight Hundred & Seventy Five only) & along with Bank Draft No 327017 dt. 14.08.2013 of Permission Fee 1st installment 25% amounting to Rs. 15,050/- (Rs. Fifteen Thousand & Fifty only) The balance E.D.C. amouating to Rs. 3.38.625/-(Rs. Three Lac Thirty Eight Thousand Six Hundred & Twenty Eight only) and Permission Fee amounting to Rs. 45,150/- (Rupees Forty Five Thousand One Hundred & fifty only) payable in three equal six monthly installments with rate of interest 12% may kindly be collected from the applicant at your own level.

9 Senior Town Planner, S.A.S. Nagar.

Endst. No. 2911 STP(S)/SP-26(F) Dated: 26 913

A copy is forwarded to Chief Administrator, PUDA along with Bank Draft No. 327018 dt. 13.08.2013 as Ist Installment (25%) SIF amounting to Rs. 22,575/- (Rs. Twenty Two Thousand Five Hundred & Seventy Five only) The balance 75% of SIF charges amounting to Rs. 67,725/- (Rs. Sixty Seven Thousand Seven Hundred & Twenty Five only) payable in three equal six monthly installments with 12% rate of interest may kindly be collected at your own level.

Semor Town Planner; S.A.S. Nagar.

Endst. No. 2912-16 STP(S)/SP-36 (F)

Dated: 26/09/2013

Copy forwarded to the following for information and necessary action:-

- 1. Chief Town Planner, Punjab, Sec. 62, PUDA Bhawan, SAS Nagar.
- 2. Chief Conservator, Forest Deptt. Punjab, Chandigarh.
- 3. Chairman, Punjab Pollution control Board, Patiala
- 4. District Town Planner, Fatehgarh Sahib.
- 5. Commissioner, Excise & Taxation Deptt. 13 Bays Building, Sector-17, Chandigarh.

Senior Town Planner, S.A.S. Nagar.

Simplified proforma for services under Punjab RTS Act (188.a)

Part – 1

1.	Name of Service	Sanction of Building Plans (upto 500 square meters) Service Notification	
		No. 188.a .	
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab	
	(prefilled into the system)		

Part –	2
--------	---

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be attached

1.	Type of Documents		Remarks		Y/N
a.	Building Plan	2 sets of all floor plans, all elevations and minimum 2 sections (one through staircase and the other through toilet) along with their drawing numbers on a scale mentioned in PUDA building rules 2013 or as amended from time to time.			
b.	Layout Plan	2 sets of layout plan along with its drawing number on a scale mentioned in PUDA building rules 2013 or as amended from time to time.			
с.	Zoning Plan	2 sets of zoning plan superimposed on Aks Shajra along with its drawing number and also showing the Khasra numbers on a scale mentioned in PUDA building rules 2013 or as amended from time to time.			
d.	Copy of approval of CLU	Copy of approval of CLU granted by competent authority with Khasra wise area detail.			
e.	 Scrutiny Fees: Residential Project @ Rs. 2.50/Sq. feet of total covered area of the project + Rs. 2.50 /Running feet of the total length of the boundary wall Other than residential project @ Rs. 5.00/Sq. feet of total covered area of the project + Rs. 2.50 /Running feet of the total length of the boundary wall 	Amount	Bank Draft No.	Drawee Bank	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges,
			if any
3.	Date of Application	6.	Signature of authorised official



Simplified proforma for services under Punjab RTS Act (188.b)

Part – 1

1.	Name of Service	Sanction of Building Plans (above500sq.m to 5000 sq.m)
		Service Notification No. 188.b.
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab
	(prefilled into the system)	

Part – 2

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Information/ documents required

Part – 3

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be Attached

1.	Type of Documents	Remarks			Y/N	
a.	Building Plan		lans, all elevations a			
			ase and the other th			
			numbers on a scale			
		-	PUDA building rules 2013 or as amended from time to			
		time.				
b.	Layout Plan		in along with its dra			
		scale mentioned in				
		amended from tim				
c.	Zoning Plan	2 sets of zoning plan superimposed on Aks Shajra along				
		with its drawing number and also showing the Khasra				
		numbers on a scale				
		2013 or as amended from time to time.				
d.	Copy of approval of CLU		of CLU granted by c			
	a		sra wise area detail.			
e.	Scrutiny Fees:	Amount	Bank Draft No.	Drawee Bank		
	• Residential Project @ Rs. 2.50/Sq.					
	feet of total covered area of the					
	project + Rs. 2.50 /Running feet of					
	the total length of the boundary wall					
	• Other than residential project @ Rs.					
	5.00/Sq. feet of total covered area					
	of the project + Rs. 2.50 /Running					
	feet of the total length of the					
	boundary wall					

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Simplified proforma for services under Punjab RTS Act (188.c)

Part – 1

1.	Name of Service	Sanction of Building Plan (above 5000 square meters)
		Service Notification No. 188.c.
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab
	(prefilled into the system)	

Part – 2

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part - 3

Information/ documents required

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be Attached

1	Type of Documents		Remarks		Y/N
a.	Building Plan	2 sets of all floor plans, all elevations and minimum 2 sections (one through staircase and the other through toilet) along with their drawing numbers on a scale mentioned in PUDA building rules 2013 or as amended from time to time.			
b.	Layout Plan	scale mentioned in	2 sets of layout plan along with its drawing number on a scale mentioned in PUDA building rules 2013 or as amended from time to time.		
c.	Zoning Plan	2 sets of zoning plan superimposed on Aks Shajra along with its drawing number and also showing the Khasra numbers on a scale mentioned in PUDA building rules 2013 or as amended from time to time.			
d.	Copy of approval of CLU	Copy of approval of with Khasra wise a	of CLU granted by c area detail.	ompetent authority	
e.	 Scrutiny Fees: Residential Project @ Rs. 2.50/Sq. feet of total covered area of the project + Rs. 2.50 /Running feet of the total length of the boundary wall Other than residential project @ Rs. 5.00/Sq. feet of total covered area of the project + Rs. 2.50 /Running 	Amount	Bank Draft No.	Drawee Bank	

feet of the total length of the		
boundary wall		

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official

Simplified proforma for services under Punjab RTS Act (189.a)

Part – 1

1.	Name of Service	Issue of Completion/ partial Completion Certificate (upto 500 square meters) Service Notification No. 189.a	
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab	
	(prefilled into the system)		

Part	_	2
------	---	---

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be attached

1.	Type of Documents	Remarks	Y/ N
a.	Copy of approval of CLU	Copy of approval of CLU granted by Competent Authority With Khasra wise area detail	
b.	Complete set of approved building plans	Copy of approved layout or site/zoning/floor plans/ Sections/ elevations etc. approved by Competent Authority	
c.	Structural Safety Certificate	Certificate from a qualified Structural Engineer stating that the part or complete building for which completion is sought has been constructed under his/her supervision	
d.	Fire safety Certificate	Issued by the concerned Fire Department	
e.	Certificate regarding provision of Rain water Harvesting system and Solar water heating	Self certification by the applicant	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	4.	Date by which Service to be provided
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	6.	Signature of authorised official

Simplified proforma for services under Punjab RTS Act (189.b)

Part – 1

1.	1. Name of Service Issue of Completion/ partial Completion Certificate (Above 500 to		
		square meters) Service Notification No. 189.b	
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab	
	(prefilled into the system)		

Part	- 2	
------	-----	--

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be attached

1	Type of Documents	Remarks	Y/N
a.	Copy of approval of CLU	Copy of approval of CLU granted by Competent Authority With Khasra wise area detail	
b.	Complete set of approved building plans	Copy of approved layout or site/zoning/floor plans/ Sections/ elevations etc. approved by Competent Authority	
c.	Structural Safety Certificate	Certificate from a qualified Structural Engineer stating that the part or complete building for which completion is sought has been constructed under his/her supervision	
d.	Fire safety Certificate	Issued by the concerned Fire Department	
e.	Certificate regarding provision of Rain water Harvesting system and Solar water heating	Self certification by the applicant	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	

Simplified proforma for services under Punjab RTS Act (189.c)

Part – 1

1.	Name of Service	Issue of Completion/ partial Completion Certificate (More than 5000 square meters) Service Notification No. 189.c	
2.	Name of Department/ Service Provider (prefilled into the system)	Department of Town and Country Planning, Punjab	

Part	- 2	
------	-----	--

1.	Name of Applicant		
2.	Husband/ Father's / Mother's Name		
3.	Permanent Address	Village/Town/City:	Tehsil:
		District:	Pincode:
4.	Correspondence Address	Village/Town/City:	Tehsil:
		District:	Pincode:
5.	Correspondence Phone No.		
6.	Correspondence e-mail		
7.	Adhar Card No. (attach Copy)		

Part – 3

Information/ documents required

1.	Name of the project		
2.	Plot Area in Square Meters		
3.	Address of the Project	Plot No.:	Sector/Locality:
		Village/Town/City:	Tehsil:
		District:	Pin code:
4.	Details of Type of Project		
	(i.e. Residential, Commercial, Industrial,		
	Institutional, Others)		

Documents to be attached

1.	Type of Documents	cuments Remarks	
a.	Copy of approval of CLU	Copy of approval of CLU granted by Competent Authority With Khasra wise area detail	
b.	Complete set of approved building plans	Copy of approved layout or site/zoning/floor plans/ Sections/ elevations etc. approved by Competent Authority	
c.	Structural Safety Certificate	Certificate from a qualified Structural Engineer stating that the part or complete building for which completion is sought has been constructed under his/her supervision	
d.	Fire safety Certificate	Issued by the concerned Fire Department	
e.	Certificate regarding provision of Rain water Harvesting system and Solar water heating	Self certification by the applicant	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	 5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

out come

DEPARTMENT OF TOWN & COUNTRY PLANNING PUNJAB PUDA BHAWAN, SECTOR-62, SAS NAGAR

From

The Chief Town Planner, Punjab, Chandigarh.

То

M/s Hamir Real Estate Pvt. Ltd. Plot No.61, 4th Floor, Chimes Building, Sector-44, Gurgaon-122003.

Memo No. 3133 -CTP (Pb)/ MPR -117 Dated: 11-6-2413.

Subject:-

Grant of Occupation Certificate for North Country Mall (Mallcum-Multiplex) situated at village Ballomajra on NH-21, SAS Nagar.

Ref:-

Your application dated 30th May, 2013.

With reference to your application dated 30.05.2013 regarding issuance of Occupation Certificate, the building under subject has been inspected and Occupation Certificate in respect of Commercial Project (Mall-cum- Multiplex) namely "North Country Mall" situated at village Ballomajra on NH-21, SAS Nagar is hereby issued under rule 10 (2) of Punjab Urban Planning & Development Authority (Building) Rules 1996 as per the building plans approved by this office on the following conditions :-

- i) That the building shall be used for the purpose for which occupation certificate is being granted.
- ii) That the applicant shall abide by the provisions of Punjab Regional and Town Planning and Development Act, 1995 and Rules framed there under.

iii) That the applicant shall obtain approval/NOC from Competent Authority to fulfill the requirement of notification dated 14.09.2006 of Ministry of Environment and Forests Department, Government of India, if required.

- iv) That the applicant shall maintain the internal services to the satisfaction of the Competent Authority.
- That the applicant shall be solely responsible for disposal of sewerage and storm water of your site till such time these services are made available by concerned authority.
- vi) That the applicant shall obtain NOC from PPCB if required under the Water (Prevention and Control of Pollution) Act, 1974, Municipal Solid Waste Management and handling Rules, 2000.
- vii) This permission will not provide any immunity from any other Act/ Rules/ Regulations applicable to the land in question.
- viii) That the applicant shall obtain NOC from the Forest Department, Punjab, if required.
- ix) That the applicant shall make provision for the disposal of rain/ storm water of the project and shall not obstruct the flow of rain/storm water of the surrounding area.
- x) That the applicant shall make rain water harvesting operation within the project area at its own cost.
- That the applicant would make its own suitable provision for drinking water supply and disposal of sewage/ solid waste management.
- xii) That the applicant shall obtain any other permission required under any other act at his own level.
- xiii) The basement of the building shall be used as per provisions of approved Zoning Plan and Building Plans.
- xiv) That the applicant shall abide by the conditions imposed by Fire Department vide letter No. ADFO/ 329 dated 06.08.2012.
- xv) That the outer façade of the building shall not be used for the purposes of advertisements and placement of hoardings.
- xvi) That the applicant shall neither erect nor allow the erection of the communication and transmission tower on the top of the building block.

xvii) That the applicant shall be liable to take the permission for running Cinemas in his building from the Competent Authority under the Punjab Cinema's (Regulation) Act, 1952 and Rule made under thereof.

-3-

xviii) That the applicant shall abide by the conditions of NHAI/ MORTH regarding access from the NH-21 as per letter No.NH-12017/1076/ 2011/Pb./NH-1 dated 07.10.2011.

Description of Building:

Site: Location Road Distt. Total area North Country Mall Vill: Ballomajra N.H.21 SAS Nagar. 21.385 acres

> Senior Town Planner (HQ) O/o Chief Town Planner, Punjab, Chandigarh.

> > Dated:

Endst. No. 3134-36

ì

Copy of above is forwarded to the following for information and necessary action :-

- 1 Chief Administrator, GMADA, SAS Nagar.
- 2. Senior Town Planner, SAS Nagar.
- 3. District Town Planner, SAS Nagar.

Senior Town Planner (HQ) O/o Chief Town Planner, Punjab, Chandigarh.

Simplified proforma for services under Punjab RTS Act (190)

Part – 1

1.	Name of Service	Land use Classification Certificate Service Notification No. 190
2.	Name of Department/ Service Provider	Department of Town and Country Planning, Punjab
	(prefilled into the system)	

Part – 2

1.	Name of Applicant			
2.	Husband/ Father's / Mother's Name			
3.	Permanent Address	Village/Town/City:	Tehsil:	
		District:	Pincode:	
4.	Correspondence Address	Village/Town/City:	Tehsil:	
		District:	Pincode:	
5.	Correspondence Phone No.			
6.	Correspondence e-mail			
7.	Adhar Card No. (attach Copy)			

Part – 3

Information/ documents required

1.	Land Area in standard acres	(4840 Sq		
	Yds)			
2.	Location of the site		Plot No.:	Sector/Locality:
			Village/Town/City:	Tehsil:
			District:	Pin code:

Documents to be attached

1.	Type of Documents	Remarks			Y/N
a.	Location/Site Plan		Location plan drawn from a permanent feature on ground duly Signed By a registered Town Planner/ Architect/Civil Engineer and owner		
b.	Aks Shajra Plan	Original Aks Shajra showing the site clearly demarcated and dimensioned along boundary of site in karams and width of approach road/rasta, if any duly attested by concerned Patwari/Tehsildar.			
с.	Jamabandi	Latest Jamabandi of land	in original		
d.	Processing Fee: Attach Bank Draft @ Rs. 5000 for the 1 st acre and Rs. 1000 for every additional acre or part thereof	Amount	Bank Draft No.	Drawee Bank	

I, hereby declare that all the information given above is true to the best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

10. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Application No

Simplified Performa for Services under Punjab RTS Act (54A)

Part -1

1	Name of Service	Sanction of building plans/Revised Building Plans (Residential)
2	Name of Department/ Service Provider (Pre-	Housing and Urban Development
	filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

Under Self Certification

1	Proof of Ownership	(Allotment Letter/ Re-allotment letter/Letter of change of
		ownership)
2	Submission of Building plans duly stampled	2 copies if plot size is <300 Sq. Yds
	"Sanctioned" and signed by an Architect	3 copies if plot size is >300
	empanelled by GMADA.	(Certified by Architect as per PUDA byelaws)
3	Attested copy of GPA/ Sub Attorney (in case of	
	GPA/SPA)	
4	Security/Scrutiny fee in the form of Bank Draft in	
	favour of E.O, GMADA	
5	Copy of Receipt of payment made towards Labour	
	cess.	

To be sanctioned by GMADA

		ownership)
2	Submission of Building plans (Certified by Architect as per PUDA byelaws)	2 copies if plot size is <300 Sq. Yds 3 copies if plot size is >300
3	Attested copy of GPA/ Sub Attorney (in case of GPA/SPA)	
4	Security/Scrutiny fee in the form of Bank Draft in favour of E.O, GMADA	
5	Copy of Receipt of payment made towards Labour cess.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be
			provided
2	Service asked for	5.	Fees/Facilitation Charges, if
			any
3.	Date of Application	6.	Signature of authorised
			official

Simplified Performa for Services under Punjab RTS Act (54.b)

Part -1

1	Name of Service	Sanction of building plans/Revised Building Plans (Commercial)
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	



Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Proof of Ownership	(Allotment Letter/ Re-allotment
		letter/Letter of change of ownership)
2	Submission of Building plans	3 copies
	(Certified by Architect as per PUDA byelaws)	
3	Attested copy of GPA/ Sub Attorney (in case of	
	GPA/SPA)	
4	Security/Scrutiny fee in the form of Bank Draft in	
	favour of E.O, GMADA	
5	Copy of Receipt of payment made towards	
	Labour cess.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	4.	Date by which Service to be provided	
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

Simplified Performa for Services under Punjab RTS Act (55)

Part -1

1	Name of Service	Issue of Completion / Occupation Certificate for	
		Buildings	
2	Name of Department/ Service	Housing and Urban Development	
	Provider (Pre-filled into the system)		

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
5	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick $(\sqrt{)}$]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Submitted Tick ($\sqrt{}$) /

Yes

1	Notice of completion and permission to occupy in Form B as prescribed	
	under Rule $10(1)$ of the building rules.	
2	Certificate of completion issued by an Empanelled Architect.	
3	Affidavit of the applicant or of GPA.	
4	Photographs of Completed building duly attested by the Architect.	
5	Copy of DPC/Plinth level certificate	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	



Application No

Simplified Performa for Services under Punjab RTS Act (56)

Part -1

1	Name of Service	Issue of No Objection Certificate / Duplicate Allotment / Re-Allotment Letter
2	Name of Department/ Service Provider (Pre-filled into the system)	Housing and Urban Development

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

1 Permission to transfer letter in original Application Form of the transferee in the prescribed form. 2 3 Hire purchase agreement in case of built up houses

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Submitted Tick ($\sqrt{}$) /

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.		Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	

Simplified Performa for Services under Punjab RTS Act (57)

Part -1

1	Name of Service	Issue of Conveyance Deed
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	



Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick $(\sqrt{)}$]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

1	Photocopy of Allotment/Re-allotment letter.	
2	Photocopy of No Due Certificate or statement of deposits made by the	
	allottee in the authorized Bank.	
3	Affidavit (in prescribed Performa)	
4	Certified copy of GPA/ Sub GPA if Applicable	
5	Draft Conveyance Deed in Triplicate.	
6	Number Plan (Housing)	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Submitted Tick ($\sqrt{}$) /

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	2	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	



GREATER MOHALI AREA DEVELOPMENT AUTHORITY PUDA BHAWAN, SECTOR 62, SAS NAGAR

www.gmada.gov.in

To,

Sub-Registrar, S.A.S. Nagar

Memo No: GMADA/E.O(P)/2015/ Dated:

Sub:- Registry of Plot No...... Sec......

In reference to the application submitted by the allottee of the above mentioned plot and after considering the documents, registry documents pertaining to the plot are being dispatched in original after making necessary corrections.

Estate Officer

Memo No: GMADA/E.O(P)/2015/

Dated:

A Copy of the same in duplicate is being sent to get registered in the O/o Sub-Registrar, S.A.S Nagar and attested copy of the same may kindly be submitted in this office.

Estate Officer

Simplified Performa for Services under Punjab RTS Act (58)

Part -1

1	Name of Service	Issue of No Due Certificate
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Submitted Tick ($\sqrt{}$) /

Yes

1	Application form on prescribed format	
2	Certified copy of GPA/Sub Attorney (if Applicable)	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

GREATER MOHALI AREA DEVELOPMENT AUTHORITY PUDA BHAWAN, SECTOR 62, SAS NAGAR

www.gmada.gov.in

To,

.....

Memo No: GMADA/E.O(P)/2015/ Dated:

Sub:- No Due Certificate in respect of Plot No...... Sq. Yds...... S.A.S Nagar Urban Estate.

Ref:- Your letter No. dated..... on the subject cited above.

It is certified that amount of Rs..... has been received from the allottee as tentative cost of the plot.

- 1. As per condition of allotment letter, enhanced amount of plot shall be deposited within 30 days as and when demanded by this office.
- 2. This office will have the right to recover the amount, if any, found pending or outstanding during audit.
- 3. If the allotee violates the condition of unauthorised construction/ Commercial use of residential property he/she will deposit the penalty separately on immediate basis, otherwise this certificate shall be deemed cancelled. Apart from this, non construction fee will be deposited separately from time of time.
- 4. Conveyance of deed will have to be executed as per the conditions mentioned in the allotment letter.

Accounts Officer

Simplified Performa for Services under Punjab RTS Act (59)

Part -1

1	Name of Service	Transfer of Property in case of sale
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3 Information / Documents required specific to the service Information

1	Name of beneficiary , if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail please Tick ($$)	SCF/SCO/SSS/Booth/Ind. Site/House No.
5	Plot No	
6	Sanction Order No.	
7	Sector/Location	
8	City	
9	Processing Fee Amount	
10	Demand Draft No. with Date	
11	Drawn Bank	
12	Detail of Intending	1S/o D/o W/o
	Purchaser(s)/Donner(s)/Transferee(s)	
		Resident of
		2S/o D/o W/o
		Resident of

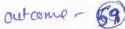
Submitted Tick ($\sqrt{}$) /

1	Affidavit of transferor/seller (allottee) or transferor/seller (GPA/Sub GPA)	
2	Liability Affidavit of transferee/purchaser	
3	Certified copy of GPA/Sub GPA (in case of GPA)	
4	Copy of NOC, if taken	
5	Certified copy of conveyance deed	
6	NOC from Bank/Fin. Institution, if property mortgaged.	
7	Copy of OC, if already constructed	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	



GREATER MOHALI AREA DEVELOPMENT AUTHORITY SAS NAGAR

www.gmada.gov.in

(TRANSFER OF LETTER OF INTENT)

То

1

2

Harpreet Kaur D/o Surinder Singh Teji R/o # 19, Sector 70, SAS Nagar

Memo No.35983 Dated 26-Aug-2015

Subject:- Transfer of Intent Letter for the allotment of Residential plot RD No. 88/89-0073 LOI No. 600 Date 20-Nov-2013 measuring 200.00 Sq. Yard . Category Land Pooling Sector 88/89- Land pooling Scheme.

Whereas MOHAN SINGH S/o SURJEET SINGH Resident of VILL. MANAKMAJRA, TEHSIL & DISTT. SAS NAGAR, PB. has submitted application in this office for transfer of letter of intent for allotment of plot in your name :-

> The application for transfer of letter of intent and other documents prescribed along with the transfer form have also been examined and found correct and hence transfer of letter of intent No. 600 Dated 20-Nov-2013 Size 200.00 Sq. Yard Category Land Pooling in your name is hereby allowed.

This transfer shall be governed by the conditions contained in original letter of intent as well as the provision of Punjab Regional and town planning and development act, 1995 and all instructions/guidelines issued thereafter as well as the Sector 88/89- Land pooling Allotment Scheme.

Estate Officer

Application No

Simplified Performa for Services under Punjab RTS Act (60)

Part -1

1	Name of Service	Transfer of Property in case of Death (uncontested)
2	Name of Department/ Service Provider	Housing and Urban Development
	(Pre-filled into the system)	

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
5	Adhaar Card No. (Attach Copy)



Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.			
	(Adhaar card of beneficiary. Attach Copy)			
2	Relationship with applicant			
3	Date of Application			
4	Property Detail please Tick ($$)	SCF	F/SCO/SSS/Booth/In	d. Site/House/Plot/Others
5	Plot No			
6	Sanction Order No			
7	Sector/Location			
8	City			
9	Processing Fee Amount			
10	Date of Death:			
11	Date of Registered/Un-Registered Will			
12	% age of share in Property:			
13	Detail of beneficiaries with respect to the said	Sr.	Name	Relationship
	property :	No		

Documents Required

Submitted Tick ($\sqrt{}$) / Yes

1	Death Certificate (Original).	
2	Legal Heirs Certificate (Issued by competent authority)/Affidavit of one of	

	the applicant supported by an Affidavit of remaining legal heirs and Affidavit of some public person i.e. Village Lambardar, First Class Gazetted Officer, Municipal Counselor or Sarpanch as the case may be, who can identify all legal heirs.	
3	Certified copy of Registered Will and attested copy of Unregistered will.	
4	Liability Affidavit in attached prescribed form from the beneficiary (ies).	
5	Photocopy of Conveyance Deed or any Document related to this property.	
6	Identity Proof (copy).	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.		4.	Date by which Service to	
				be provided	
2	Service asked for		5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	(6.	Signature of authorised	
				official	

Simplified Performa for Services under Punjab RTS Act (61)

Part -	1
--------	---

1	Name of Service	Issue of permission for Mortgage
2	Name of Department/ Service	Housing and Urban development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick $()$]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Submitted Tick ($\sqrt{}$) /

Yes

1	Attested Copy of Allotment/ Re-allotment change of ownership	
	letter, etc.	
2	Consent of bank from which loan is being raised in the prescribed	
	format.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	2	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	





Greater Mohali Area Development Authority

www.gmada.gov.in

PUDA Bhawan, Sector-62, S.A.S Nagar

То

Jagjit Singh S/o Dayal Singh R/o H.No. 618, Phase 3A, SAS Nagar

Memo No.GMADA-EO/2015/ Dated : 26-Aug-2015

Subject :- Permission To Mortgage Plot No. 618, Sector 53 SAS Nagar.

This is in reference of your application no. 8070 date 26-Aug-2015.

You are permitted to mortgage the above said property to Kotak Mahindra Bank Ltd, Sco 831, F.F, NAC, Manimajra, Chandigarh subject to the following terms and conditions:-

- 1) That the first and primary charge in respect of the installments and interest recoverable by GMADA from you will continue to vest with GMADA
- 2) That there is no default in the installments/interest and there is no violation of terms and conditions of allotment letter and GMADA will be liberty to initiate resumption proceeding and resume the plot/property in case of any violation in the terms and conditions of the allotments.
- 3) The allottee will bound to make the payment of additional price in respect of the plot/site and may be determined and demanded by Estate Officer, GMADA as per the terms and conditions of allotment letter.
- 4) The allottee shall strictly abide by the terms and conditions of allotment letter and any violation at any stage shall lead to cancellation of allotments and resumption of plot/Building.
- 5) The allottee shall not be allowed at any stage to mis-use on land and purpose for which the land is allotted.
- 6) No transfer of land through GPA or otherwise shall be allowed.
- 7) This permission to mortgage will be valid for six months from the date to issue.
- 8) This permission to mortgage will be governed by the provisions of the Punjab Regional Planning & Development Regulation Act. 1995 and Rules & Regulation made their under.

Superintendent

Application No

Simplified Performa for Services under Punjab RTS Act (62)

Part -1

1	Name of Service	Attested Copy of Any Document
2	Name of Department/ Service	Housing and Urban development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick $(\sqrt{)}$]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

1	Copy of FIR/Report in Daily Dairy Register	
2	Give detail or Purpose for use	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Submitted Tick ($\sqrt{}$) /

1.	Application Receipt No.	4.	4.	Date by which Service to be provided
2	Service asked for	5.	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	6.	Signature of authorised official

Simplified Performa for Services under Punjab RTS Act (63)

Part -1

1	Name of Service	Change of Ownership (Other than Death Cases)
2	Name of Department/ Service	Housing and Urban development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3 Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail please Tick ($$)	SCF/SCO/SSS/Booth/Ind. Site/House No.
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	
9	Sanction Order No.	
10	Owner's Name.	
11	Father's/Husband's name	
12	Sale/Gift/Transfer Deed Sr. No.	
13	Book No.	
14	Volume No.	
15	Page No	
16	Dated:	

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Certified Copy of Sale Deed/Transfer Deed/Gift Deed issued by the	
	Sub-registrar or Permission to transfer letter issued by GMADA	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official

GREATER MOHALI AREA DEVELOPMENT AUTHORITY PUDA BHAWAN, SECTOR 62, SAS NAGAR

www.gmada.gov.in

To,

.....

Memo No: GMADA/E.O/2015/ Dated:

Sub:- Transfer of Ownership of H. No......., Sector....... S.A.S Nagar

Ref: Your letter No. dated

In reference to the application submitted and after considering the documents, the ownership of above said House is transferred into your name. You will be bound to follow the rules & regulations of the Punjab Regional and Town Planning and Development Act-1995 and conditions of allotment letter. This transfer will be as per Registration and Stamp Act.

Superintendent (H)

Simplified Performa for Services under Punjab RTS Act (64)

Part -1

1	Name of Service	Demarcation of Plot
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
5	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Copy of proof of Ownership	
2	Copy of forwarding letter regarding sanction of building plan by empanelled architect vide its Order	
	NoDated	

OR

3	Copy of forwarding letter regarding sanction of building plan issued by	

Estate Officer Vide order No	
Dated	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.		Date by which Service to be provided	
2	Service asked for	5.		Fees/Facilitation Charges, if any	
3.	Date of Application	6.	6.	Signature of authorised official	



Simplified Performa for Services under Punjab RTS Act (65)

Part -1

1	Name of Service	Issue of Plinth / Roof level Certificate
2	Name of Department/ Service Provider (Pre-filled into the system)	Housing and Urban Development

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
5	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick ($$)]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Submitted Tick ($\sqrt{}$) /

Yes

1 Photocopy of Demarcation Certificate (in case of allotment by GMADA)

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

1.	Application Receipt No.	4.	Date by which Service to be provided
2	Service asked for	5.	Fees/Facilitation Charges, if any
3.	Date of Application	6.	Signature of authorised official



Simplified Performa for Services under Punjab RTS Act (66)

Part -1

1	Name of Service	Water Supply and Sewerage Connection
2	Name of Department/ Service	Housing and Urban Development
	Provider (Pre-filled into the system)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
5	Adhaar Card No. (Attach Copy)	

Part -3 Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar card of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Date of Application	
4	Property Detail [please Tick $(\sqrt{)}$]	SCF/SCO/SSS/Booth/Ind. Site/House/Plot/Other
5	Plot No.	
6	Plot Size:	
7	Sector/Location	
8	City	

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Occupation Certificate	
2	Road Cut Receipt	
3	Plumber's Certificate	
4	Attested copy of GPA, if Application	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	2	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of authorised official	



SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF POWER

11. DEPARTMENT OF POWER

Application No

Simplified Proforma for Services under Punjab RTS Act (172 to 178)

	Part-1			
1	Name of Service	Failure of supply due to normal fuse off call/complaint & any other reasons as per listed Standards of Performance Services and		
		Street Light failures.		
2	Name of Department/Service Provider	Power		
	(Pre-filled into the system)			

Part-2

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service

	Induon		
1	Name of beneficiary, <mark>if no</mark> t applicant.		
	(Adhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Consumer Account No. allotted by PSPCL		
Doc	uments Required	Submitted Tick	() / Yes
1	Nil		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Application No

Simplified Proforma for Services under Punjab RTS Act [179 (a)& (b)]

	Part-1		
1	Name of Service	Period of Scheduled Outage/Restoration of	
		Supply.	
2	Name of Department/Service Provider	Power	
	(Pre-filled into the system)		

Part-2

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Consumer Account No. allotted by PSPCL	
Doc	uments Required	Submitted Tick $(\sqrt{)} / Yes$
1	Nil	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

Simplified Proforma for Services under Punjab RTS Act (180)

1	Pa	rt	-1

	•	
1	Name of Service	Voltage Fluctuations: No expansion/
		enhancement of network involved.
2	Name of Department/Service Provider	Power
	(Pre-filled into the system)	

	Part-2					
1	Name of Applicant					
2	Husband/ Father's/ Mother's Name					
3	Permanent Address					
4	Correspondence Address					
5	Correspondence Phone No.					
6	Correspondence e-mail					
7	Adhaar Card No. (Attach Copy)					

Part-3

Information/ Documents required specific to the service Information

Doc	suments Required	Submitted Tick $()$ / Yes
3	Consumer Account No. allotted by PSPCL	
2	Relationship with applicant	
1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
1	Name of honoficiary, if not applicant	

1	Ν	lil		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6	6.	Signature of authorised	
				official	

Simplified Proforma for Services under Punjab RTS Act [181(a) & (b)]

Part-1

	I	fal (-1
1	Name of Service	Meter Complaints:
		(a)Inspection and replacement of slow,
		fast/creeping, stuck up meters &
		(b)replacement of burnt meters
2	Name of Department/Service Provider	Power
	(Pre-filled into the system)	

Part-2

1	Name of Applicant
2	Husband/ Father's/ Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part-3

Information/ Documents required specific to the service Information

applicable).

1	Name of beneficiary, if not applicant.		
	(Adhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Consumer Account No. allotted by PSPCL		
Doc	uments Required	Submitted Tick	(√) / Yes
1	Request of consumer for Meter		
	Inspection, Testing or Replacement (in		
	case of burnt meter) as the case may be.		
Fee	/Charges Payable		
1	Meter Inspection & Testing Charges (if		
	applicable).		
2	Meter Cost in case of Burnt Meter (if		

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6	6.	Signature of authorised	
				official	

Simplified Proforma for Services under Punjab RTS Act [182 (a) & (b), 183 (b)]

	Part-1					
1	Name of Service	Release of New Connection/ Additional Load (Domestic Supply up to 100 kW), Conversion from LT Single Phase to LT Three Phase or vice-versa.				
2	Name of Department/Service Provider (Pre-filled into the system)	Power				

Part-2	•
--------	---

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

Inic	ormation	
1	Name of beneficiary, if not applicant.	
	(Aadhaar No. of bene <mark>ficia</mark> ry. Attach	
	Сору)	
2	Relationship with applicant	
3	Consumer Account No. allotted by	
	PSPCL(if applying for Additional load).	
4	Caste	
5	BPL No.	
Doc	cuments Required	Submitted Tick $(\sqrt{)}$ / Yes
1	A&A Form along with Photograph	
2	Identity proof (if Aadhaar Card not	
	available): Voter Card, Passport	
3	Proof of ownership/occupancy of	
	premises in case of lease or rented	
	accommodation or indemnity bond in	
	prescribed format in favour of PSPCL, if	
	applicant is unable to produce the	
	consent of the owner/landlord for	

	applicant is unable to produce the	
	consent of the owner/landlord for	
	obtaining a connection.	
4	NOC from PUDA/Local Urban	
	Development Authority, if connection	
	falls in their planning schemes or within	
	the controlled area of any scheduled	
	road or in Chandigarh periphery areas.	
5	Caste Certificate (if applicable).	
6.	BPL card No.	

7	Test report of the installation duly signed	
	by the Licensed Electrical Contractor. ?	
Fee/	Charges Payable	
1	Processing fee	
2	Security (consumption)	
3	Security Meter & Meter Cup Board	
4	Service Connection Charges	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	2	4.	Date by which Service to be provided
2	Service asked for	5	5.	Fees/Facilitation Charges, if any
3.	Date of Application	e	6.	Signature of authorised official

Simplified Proforma for Services under Punjab RTS Act [182 (a) & (b), 183 (b)]

Part-1

	r	ai (-1
1	Name of Service	Release of New /Extension of load for Agriculture
		Supply Connection/AP High Technology/High
		Density Farming Supply.
2	Name of Department/Service Provider (Pre-	Power
	filled into the system)	

Part-2

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

	Innation		
1	Name of beneficiary, if not applicant.		
	(Aadhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Consumer Account No. Allotted by PSPCL (if		
	applying for Additional load)		
Doc	uments Required	Submitted Tick	() / Yes
1	A&A Form along with Photograph		- 320-0340- Day and Day
2	Identity proof (if Aadhaar Card not available)		
3	Proof of ownership of landas prescribed for		
	different categories.		
4	Test report of the installation duly signed by		
	the Licensed Electrical Contractor (to be		
	submitted after issue of Demand Notice).		
Fee	Charges Payable		
1	Processing fee		

1	Processing fee	
2	Security (consumption)	
3	Service Connection/ variable Charges	
	payable as intimated in the demand notice.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1. Application Receipt No. 4. Date by which Service to be provided 2 Service asked for 5. Fees/Facilitation Charges, if any 3. Date of Application 6. Signature of authorised official

Simplified Proforma for Services under Punjab RTS Act [182 (a)&(b),183 (b)]

Pa	rt_	1	

	•	
1	Name of Service	Release of New Connection/ Additional Load
		(Non-Residential Supply up to 100 kW),
		Conversion from LT Single Phase to LT Three
		Phase or vice-versa.
2	Name of Department/Service Provider (Pre-	Power
	filled into the system)	

Part-2

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

	Ination		
1	Name of beneficiary, if not applicant.		
	(Aadhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Consumer Account No. allotted by PSPCL(if		
	applying for Additional load).		
Docu	uments Required	Submitted Tick	() / Yes
1	A&A Form along with Photograph		332
2	Identity proof (if Aadhaar Card not available)		
3	Proof of ownership/occupancy of premises		
	in case of lease or rented accommodation or		
	indemnity bond in prescribed format in		
	favour of PSPCL, if applicant is unable to		
	produce the consent of the owner/landlord		
	for obtaining a connection.		
4	NOC from PUDA/Local Urban Development		
	Authority, if connection falls in their		
	planning schemes or within the controlled		
	area of any scheduled road or in Chandigarh		
	periphery areasor certified copy of CLU		
	(Change of Land Use) from competent		
	authority.		
5	In case of application by a Company, certified		
	copies of the following documentsby CA of		
	the Company.		
	a) Memorandum of Association/Articles of		
	Association.		
	b) Incorporation Certificate of the Company		
	c) Resolution of the Board of Directors in		
	favour of the person authorised to sign the		
	A&A form and other documents. The		
	signatures of the authorized signatory shall		
	also bear the common seal of the company.		

	d) Names of members of Board of Directors	
	and their residential addresses shall also be	
	furnished. Any change in members of Board	
	of Directors shall be intimated to PSPCL	
	within one month.	
6	In case of partnership firmpartnership deed	
	signed by all the partners or by a partner	
	authorised to sign by other partners through	
	a Special Power of Attorney duly notarized.	
7	Application by a Trust or a Society shall be	
	accompanied by a certified copy of its	
	constitution, its bye laws along with	
	resolution in favour of the authorized	
	signatory for signing A&A form and other	
	documents. The names of managing body of	
	the Trust/Society and their residential	
	addresses shall also be furnished. Any	
	change in managing body of the Trust or	
	Society shall be intimated to PSPCL within	
	one month.	
8	Test report of the installation duly signed by	
	the Licensed Electrical Contractor.	
Fee/	Charges Payable	
1	Processing fee	
2	Security (consumption)	
3	Security Meter & Meter Cup Board	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

4

Service Connection Charges

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for		5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	E	6.	Signature of authorised	
				official	

Simplified Proforma for Services under Punjab RTS Act [182 (a) &(b), 183 (b)]

Part-1

Part-1						
1	Name of Service	Release of New Connection/ Additional Load				
		(Street Lighting Supply), Conversion from LT				
		Single Phase to LT Three Phase or vice-versa.				
2	Name of Department/Service Provider (Pre-	Power				
	filled into the system)					
	Part-2					
1	Name of Applicant					
2	Husband/ Father's/ Mother's Name					
3	Permanent Address					
4	Correspondence Address					
5	Correspondence Phone No.					
6	Correspondence e-mail					
7	Adhaar Card No. (Attach Copy)					

Part-3

Information/ Documents required specific to the service Information

1 Name of beneficiary, if not applicant.	
(Adhaar No. of beneficiary. Attach Copy)	
2 Relationship with applicant	
3 Consumer Account No. by PSPCL, if applyin	ng
for Additional load/conversion from LT	
Single Phase to LT Three Phase or vice-ver	sa.
Documents Required	Submitted Tick $() / Yes$
1 Application by the Executive Officer/Estate	e
Officer of a Local Body, Improvement Trus	t
or Urban Development Authority or any	
person authorized by any such authority o	n l
the prescribed A&A form.	
2 Execution of agreement for Street Lighting	
as per prescribed format.	
3 Test report of the installation duly signed	by
the Licensed Electrical Contractor.	
Fee/Charges Payable	

1 Processing fee

-	
2	Security (consumption)
3	Security Meter & Meter Cup Board
4	Service Connection Charges

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4	4.	Date by which Service to	
				be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges,	
				if any	
3.	Date of Application	6	6.	Signature of authorised	
				official	

Simplified Proforma for Services under Punjab RTS Act [182 (a) & (b)]

r ai (-1

1	Name of Service	Release of Temporary Supply Connection.
2	Name of Department/Service Provider	Power
	(Pre-filled into the system)	

Part-2	
--------	--

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Consumer Account No. by PSPCL, if	
	applying for Additional load/conversion	
	from LT Single Phase to LT Three Phase	
	or vice-versa.	
Doc	uments Required	Submitted Tick $(\sqrt{)} / Yes$
1	Application by the consumer on the	
	prescribed A&A form.	
Fee	Charges Payable	
1	Processing fee	
2	Security (consumption)	
3	Security Meter & Meter Cup Board	

 3
 Security Meter & Meter Cup Board

 4
 Security works.

 I, hereby declare that all the information given above is true to best of my knowledge. If any

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

-		<u> </u>		
1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

Application No Simplified Proforma for Services under Punjab RTS Act [182 (a)& 183 (b)]

	Part-1			
1	Name of Service	Release of New/additional load for Industrial Supply (upto 100 kW/100kVA) other than DS/NRS category& conversion from LT Single Phase to LT Three Phase or vice-versa.		
2	Name of Department/Service Provider (Pre- filled into the system)	Power		

Part-2

1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

Inio	rmation	
1	Name of beneficiary, if not applicant.	
	(Aadhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
3	Consumer Account No. allotted by PSPCL (if	
	applying for Additional load).	
Docu	uments Required	Submitted Tick $(\sqrt{)}$ / Yes
1	A&A Form along with Photograph	
2	Identity proof (if Aadhaar Card not available)	
3	Proof of ownership/occupancy of premises	
	in case of lease or rented accommodation or	
	indemnity bond in prescribed format in	
	favour of PSPCL, if applicant is unable to	
	produce the consent of the owner/landlord	
	for obtaining a connection.	
4	NOC from PUDA/Local Urban Development	
	Authority, if connection falls in their	
	planning schemes or within the controlled	
	area of any scheduled road or in Chandigarh	
	periphery areas or certified copy of CLU	
	(Change of Land Use) from competent	
	authority.	
5	In case of application by a Company,	
	certified copies of the following documents	
	by CA of the Company.	
	a) Memorandum of Association/Articles of	
	Association.	
	b) Incorporation Certificate of the Company	
	c) Resolution of the Board of Directors in	
	favour of the person authorised to sign the	
	A&A form and other documents. The	
	signatures of the authorized signatory shall	
	also bear the common seal of the company.	

	d) Names of members of Board of Directors	
	and their residential addresses shall also be	
	furnished. Any change in members of Board	
	of Directors shall be intimated to PSPCL	
	within one month.	
6	In case of partnership firm partnership deed	
	signed by all the partners or by a partner	
	authorised to sign by other partners through	
	a Special Power of Attorney duly notarized.	
7	Application by a Trust or a Society shall be	
	accompanied by a certified copy of its	
	constitution, its bye laws along with	
	resolution in favour of the authorized	
	signatory for signing A&A form and other	
	documents. The names of managing body of	
	the Trust/Society and their residential	
	addresses shall also be furnished. Any	
	change in managing body of the Trust or	
	Society shall be intimated to PSPCL within	
	one month.	
8	Test report of the installation duly signed by	
	the Licensed Electrical Contractor (along	
	with Demand Notice charges).	
Fee/	Charges Payable	

ree, enarges rayable		
1	Processing fee	
2	Security (consumption)	
3	Security Meter & Meter Cup Board	

*Note :Service Connection Charges and other variable charges as applicable shall be intimated to the consumer in the Demand Notice to be issued within 7 working days of receipt of application.

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to	
			be provided	
2	Service asked for	5.	Fees/Facilitation Charges,	
			if any	
3.	Date of Application	6.	Signature of authorised	
			official	

Application No Simplified Proforma for Services under Punjab RTS Act [183 (a)]

Part-1

1	Name of Service	Transfer of Title
2	Name of Department/Service Provider (Pre-filled	Power
	into the system)	

Part-2

	10112	
1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

Name of beneficiary, if not applicant. (Aadhaar		
No. of beneficiary. Attach Copy)		
Relationship with applicant		
Consumer Account No. by PSPCL for which		
change of title is required.		
iments Required	Submitted Tick	(√) / Yes
New A&A Form along with Photograph		
Identity proof (if Aadhaar Card not available)		
Proof of ownership/occupancy of premises in		
case of lease or rented accommodation.		
NOC from PUDA/Local Urban Development		
Authority, if connection falls in their planning		
schemes or within the controlled area of any		
scheduled road or in Chandigarh periphery areas.		
In case of change in name of a Company,		
a) Certified copy of new Memorandum of		
Association/Articles of Association.		
b) Certified copy ofnew incorporationcertificate		
of the Company.		
c) Resolution of the Board of Directors in favour		
of the person authorised to sign the A&A form.		
In case of change of name due to change in		
partnership, a certified copy of new partnership		
deed signed by all the partners or by a partner		
authorised to sign by other partners through a		
Special Power of Attorney duly notarized.		
In the event of death of a consumer,		
a) the Death Certificate,		
b) Succession Certificate or		
	Relationship with applicant Consumer Account No. by PSPCL for which change of title is required. ments Required New A&A Form along with Photograph Identity proof (if Aadhaar Card not available) Proof of ownership/occupancy of premises in case of lease or rented accommodation. NOC from PUDA/Local Urban Development Authority, if connection falls in their planning schemes or within the controlled area of any scheduled road or in Chandigarh periphery areas. In case of change in name of a Company, a) Certified copy of new Memorandum of Association/Articles of Association. b) Certified copy ofnew incorporationcertificate of the Company. c) Resolution of the Board of Directors in favour of the person authorised to sign the A&A form. In case of change of name due to change in partnership, a certified copy of new partnership deed signed by all the partners or by a partner authorised to sign by other partners through a Special Power of Attorney duly notarized. In the event of death of a consumer, a) the Death Certificate,	Relationship with applicant Consumer Account No. by PSPCL for which change of title is required. ments Required Submitted Tick New A&A Form along with Photograph Identity proof (if Aadhaar Card not available) Proof of ownership/occupancy of premises in case of lease or rented accommodation. NOC from PUDA/Local Urban Development Authority, if connection falls in their planning schemes or within the controlled area of any scheduled road or in Chandigarh periphery areas. In case of change in name of a Company, a) Certified copy of new Memorandum of Association/Articles of Association. b) Certified copy of new incorporationcertificate of the Company. c) Resolution of the Board of Directors in favour of the person authorised to sign the A&A form. In case of change of name due to change in partnership, a certified copy of new partnership deed signed by all the partners or by a partner authorised to sign by other partners through a Special Power of Attorney duly notarized. In the event of death of a consumer, a) the Death Certificate, In the certificate,

for Tubewell Consumers SajjraNasad certified	
by the Revenue Officers in place of Succession	
Certificate or	
certification on plain paper regarding death of	
consumer from his/her legal heirs claimants	
duly authorized by Gram Panchayat/	
Nambardar.	
c) No Objection from other heirs to the	
connection being transferred in the name of	
one of the heirs.	
d) In the absence of documents (a) & (b) above,	
all the heirs may submit an affidavit duly	
attested by a Magistrate confirming the death	
of the consumer, identification of the legal	
heir and their consent to the connection	
being transferred in the name of a particular	
heir.	
An undertaking to pay/bear the current and	
past outstanding liabilities of the old	
consumer or those detected in the future.	
	 by the Revenue Officers in place of Succession Certificate or certification on plain paper regarding death of consumer from his/her legal heirs claimants duly authorized by Gram Panchayat/ Nambardar. c) No Objection from other heirs to the connection being transferred in the name of one of the heirs. d) In the absence of documents (a) & (b) above, all the heirs may submit an affidavit duly attested by a Magistrate confirming the death of the consumer, identification of the legal heir and their consent to the connection being transferred in the name of a particular heir. An undertaking to pay/bear the current and past outstanding liabilities of the old

Fee/Charges Payable

1	Fee for change of title or transfer of agreement.	
2	Security (consumption) and Security (Meter) at	
	the prevalent rates after accounting for the	
	security (consumption) & Security (Meter)	
	already deposited by the previous consumer with	
	his consent.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	Date by which Service to be provided	
2	Service asked for	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6.	Signature of authorised official	

Simplified Proforma for Services under Punjab RTS Act [184 (a) to (e)]

	•	Part-1
1	Name of Service	Shifting of Meter/Service Connection & Other Services.
2	Name of Department/Service Provider (Pre- filled into the system)	Power
		Part-2
1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	
	ormation/ Documents required specific to the s	ervice
	Name of beneficiary, if not applicant.	ervice
Infc 1	Name of beneficiary, if not applicant. (Aadhaar No. of beneficiary. Attach Copy)	ervice
Info 1 2	And the second	ervice
Infc 1 2 3	And ConstructionName of beneficiary, if not applicant.(Aadhaar No. of beneficiary. Attach Copy)Relationship with applicantConsumer Account No. by PSPCL.	
Info 1 2 3 Doc	Image: consumer sectorName of beneficiary, if not applicant.(Aadhaar No. of beneficiary. Attach Copy)Relationship with applicantConsumer Account No. by PSPCL.cuments Required	ervice Submitted Tick (\\) / Yes
Info 1 2 3	And the second	
Info 1 2 3 Doc 1	And the second	
Info 1 2 3 Doc	with the second seco	
Info 1 2 3 Doc 1	mmation Name of beneficiary, if not applicant. (Aadhaar No. of beneficiary. Attach Copy) Relationship with applicant Consumer Account No. by PSPCL. cuments Required Application for shifting of meter/ service connection/transformer/HT or LT Lines. Proof of ownership/occupancy of premises in case of lease or rented accommodation	
1 2 3 Doc 1	mmation Name of beneficiary, if not applicant. (Aadhaar No. of beneficiary. Attach Copy) Relationship with applicant Consumer Account No. by PSPCL. cuments Required Application for shifting of meter/ service connection/transformer/HT or LT Lines. Proof of ownership/occupancy of premises in case of lease or rented accommodation where line/ transformer is to be shifted if	
Info 1 2 3 Doc 1	And the second	
1 2 3 Doc 1	mmation Name of beneficiary, if not applicant. (Aadhaar No. of beneficiary. Attach Copy) Relationship with applicant Consumer Account No. by PSPCL. cuments Required Application for shifting of meter/ service connection/transformer/HT or LT Lines. Proof of ownership/occupancy of premises in case of lease or rented accommodation where line/ transformer is to be shifted if	

	connection.	
3	Test report of the installation duly signed by	
	the Licensed Electrical Contractor (if	
	required) to be intimated through the	
	notice.	
Fee/	Charges Payable	
	-	

1 Fee for service required.

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

Acknowledgement Receipt

1.	Application Receipt No.	4	4.	Date by which Service to be provided	
2	Service asked for	5	5.	Fees/Facilitation Charges, if any	
3.	Date of Application	6	6.	Signature of 197uthorized official	

Application No Simplified Proforma for Services under Punjab RTS Act [185 (a) & (b)] Part-1

1	Name of Service	Complaints about consumer's bill and restoration
		of supply.
2	Name of Department/Service Provider (Pre-	Power
	filled into the system)	
	F	Part-2
1	Name of Applicant	
2	Husband/ Father's/ Mother's Name	
2	Dormonont Address	

3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Aadhaar Card No. (Attach Copy)	

Part-3

Information/ Documents required specific to the service Information

1	Name of beneficiary, if not applicant. (Aadhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
3	Consumer Account No. by PSPCL.		
Doc	uments Required	Submitted Tick	() / Yes
1	Application for complaint about bill or		
	restoration of supply		
2	Copy of the bill for which complaint is being		
	made.		
3	In case of restoration of supply, receipts of		
	the outstanding dues cl <mark>eare</mark> d.		
4	Copy of receipt of payment of Monthly		
	Minimum Charges for the period of		
	disconnection, if disconnection is formore		
	than six months.		
F aa	Charges Bayable		

Fee/Charges Payable

1	Fee for service required.	
2	In case of re-connection, if the period of	
	disconnection is more than six months,	
	Security (consumption) & re-connection fee	
	as applicable.	

I, hereby declare that all the information given above is true to best of my knowledge. If any information found wrong then I will be punishable as per law.

Signature of Applicant

1.	Application Receipt No.	4.	I. Date by which Service to be provided	
2	Service asked for	5.	5. Fees/Facilitation Charges, if any	
3.	Date of Application	6.	5. Signature of authorised official	

SIMPLIFICATIONS OF PROFORMA: DEPARTMENT OF TRANSPORT

12. DEPARTMENT OF TRANSPORT

Application No

Simplified Proforma for Services under Punjab RTS Act (43.a)

Part -1

1	Name of Service	Issuance of Registration Certificate of Motor Vehicles (Non Transport)
2	Name of Department/ Service Provider (Pre-filled into the system)	Registering Authority (each District Transport Officer in each district)

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary , if not applicant. (Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	

Documents Required

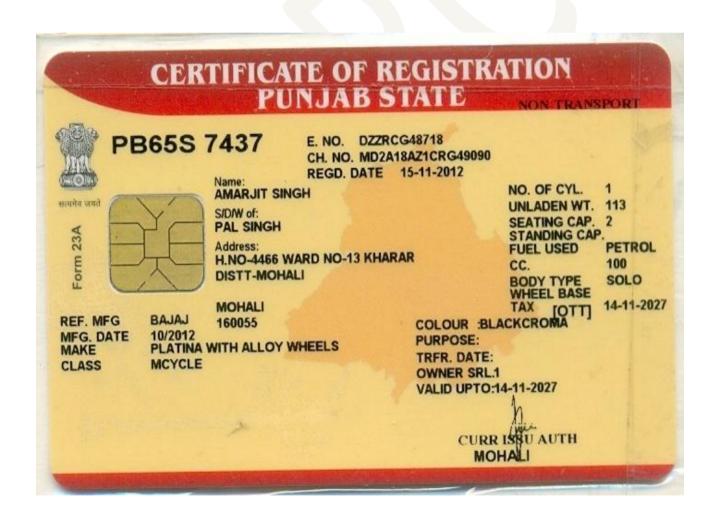
Submitted Tick (V) / Yes

Sale certificate in Form No 21		
Valid Insurance Certificate		
3 Original Sale certificate from the concerned authorities in Form No.		
21 in case of ex-army vehicles		
Proof of address- by way of any one of the Documents i.e. Voter		
List, Life Insurance Policy, Passport, Adhaar Card, Salary Slip issue by		
Central Govt, State Govt or Local Body, any other document		
prescribed by state Govt or any affidavit attested by Executive		
Magistrate 1st Class or Notary Public		
Temprioray Registartion , If any		
Raod worthyness certificate in Form No. 22 from the manufacturer		
– Form 22-A from the body builders		
Custom's clearance certificate in the case of imported vehicles		
along with the license and bond , if any.		
	Valid Insurance CertificateOriginal Sale certificate from the concerned authorities in Form No.21 in case of ex-army vehicles Proof of address- by way of any one of the Documents i.e. VoterList, Life Insurance Policy, Passport, Adhaar Card, Salary Slip issue byCentral Govt, State Govt or Local Body, any other documentprescribed by state Govt or any affidavit attested by ExecutiveMagistrate 1st Class or Notary PublicTemprioray Registartion , If anyRaod worthyness certificate in Form No. 22 from the manufacturer- Form 22-A from the body buildersCustom's clearance certificate in the case of imported vehicles	

8	Appropriate fee as specified in Rule 81	
9	Proof of citizenship	
10	10 Proof of legal presence in India in addition to proof of residence in	
	case of foreigners	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised	
			official	



Simplified Proforma for Services under Punjab RTS Act (43.b)

Part -1

(Transport)	
2 Name of Department/ Service Registering Authority (each Distri	ct Transport Officer
Provider (Pre-filled into the system) in each district)	

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.
	(Adhaar No. of beneficiary. Attach Copy)
2	Relationship with applicant

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Sale certificate in form No 21	
2	Valid Insurance Certificate	
3	Original Sale certificate from the concerned authorities in Form 21 in case of ex-army vehicles	
4	Proof of address by way of any one of the Documents i.e. Voter List, Life Insurance Policy, Passport, Adhaar Card, Salary Slip issue by Central Govt, State Govt or Local Body, any other document prescribed by state Govt or any affidavit attested by Executive Magistrate 1st Class or Notary Public	
5	Temporary Registartion , If any	
6	Raod worthyness certificate in Form No. 22 from the manufacturer – Form 22-A from the body builders	
7	Custom's clearance certificate in the case of imported vehicles along with the license and bond , if any.	
8	Appropriate fee as specified in Rule 81	
9	Proof of citizenship	
10	Proof of legal presence in India in addition to proof of residence in case of foreigners	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

	TFORM	4 23
	CERTIFICATE OF	e 48)
	CERTIFICATE OF	REGISTRATION
	Brief description of vehicle	gistration Number
	with/without gear, motor cycle with side Purchased from the Dealer Name & A	and goods vehicle, trailer, motor cy car, elc.) Idress :

	Son/wife/daughter of Full address (Permanent)	
1.0	Full address (Temporary)	
	[PAN Number (optional)	
	Signatur	e of Registering Authority
S	specimen Signature of the Registered	and a second sec
	affixed and attacted by	
ł	Registering Authority with his seal	
2		DETAILED DESCRIPTION
	1. Class of vehicle	DETAILED DESCRIPTION
	The motor vehicle is	
	(a) a new vehicle	***************************************
	(b) ex-army vehicle	***************************************
	(c) imported vehicle	
	(d) Migration from other States	
	2. Maker's name	
	Dealer's name and address	
	3. Type of body	
	4. Month and year of manufacture	
	year of manufacture	
	or cynnicers	
	attacono ratimper	
	and an antiber of motor number in	
	the case of Battery Operated Vehicles]	
8	 Fuel used in the engine 	
	9. Horse Power (B.H.P.)	
8	10. Cubic Capacity	
8	11. Maker's Classification	
	12. Wheel base	1
1	13. Seating capacity (including driver)	
	14. Unladen weight	
1	15. Colour or colours of body, wings	
	and front end	1
1	Additional particulars in the case of all transpo	and malefaller all all
1	6. Gross vehicle weight	or oencies other than motor cabs.
	(a) as certified by the manufacturer	
	(b) as registered	kgms.
1	7 ² [Number, description, size and ply rating	
	of types as declared back	
	of tyres, as declared by the manufacturer] (a) Front axle	+
	(b) Rear axle	
	(c) Any other axle	
	(d) Tandem axle	
11	8. Registered axle weight	kgms.
No.	(a) Front axle	, second se
	(b) Rear axle	kgms.
	(c) Any other axle	kgms.
	(d) Tandem axle	kgms.
	A DECEMBER OF THE ADDRESS OF THE ADD	
	Additional particulars of alternative or additin particulars of alternative or	onal Semi-Trailer Registered
:19). Type of body with an Articulated ve	nicle
20). Unladen weight	
2010	Number, description and size of tyres	******
20	statute, description and size of turne	
21	on (analy) and	
21	on (each) axie	arrent discourse of the second
21	on (each) axle 2. Registered axle weight (in respect of each	1 axle)
21	2. Registered axle weight (in respect of each	
21 22 Ti	on (each) axie	

Application No

Simplified Proforma for Services under Punjab RTS Act (44)

Part -1

1	Name of Service	Fitness Certificate for Commercial Vehicle
2	Name of Department/ Service Provider (Pre-filled into the system)	Motor Vehicle Inspector in each District

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
Docu	iments Required	Submitted Tick (\/) /

Documents Required

Yes

1	Form No 20 alongwith prescribed fee under Rules.	
2	The vehicle should be made present in good running condition before the	
	concerned Motor Vehicle Inspector at the Passing Station	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

16515235 -----The Central Motor Vehicles Rules, 1989 465 FORM 38 10 (See rule 62(1)) Signature and designation of Inspecting Authority or holder of the letter of authority of the authorised testing station. Date. 20 The certificate of fitness is hereby renewed : . Signature of Inspecting Authority or the holder of the letter of authority of the holder of the letter station: 22

Simplified Proforma for Services under Punjab RTS Act (45)

Part -1

1	Name of Service	Issue of Driving License - Motor Car / Motor Cycle
2	Name of Department/ Service Provider (Pre-filled into the system)	Licensing Authority (Each District Transport Officer in each District Quarter and SDM in Sub Division Level)

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

2	(Adhaar No. of beneficiary. Attach Copy) Relationship with applicant	
	ments Required	Submitted Tick ($$) /

Yes

1	Application in Form No. 2	
2	Medical certificate in form No 1 & 1-A	
3	3 photographes in Passport size	
4	Fee as prescribed in Rule 32	
5	One year old driving license of light motor Vehicle in case of Transport Vehicle License	
6	Proof of address- by way of any one of the Documents i.e. Voter List, Life Insurance Policy, Passport, Adhaar Card, Salary Slip issue by Central Govt, State Govt or Local Body, any other document prescribed by state Govt or any affidavit attested by Executive Magistrate 1st Class or Notary Public	
7	Proof of Age - by way of any one of the Documents i.e. Voter List , Life Insurance Policy, Passport, Adhaar Card, Salary Slip issue by Central Govt, State Govt or Local Body, any other document prescribed by state Govt or any affidavit attested by Executive Magistrate 1st Class or Notary Public, School Certificate, Birth Certificate	
8	For Regular Driving License : Original Valid learners License along with Form No 4, Prescribed fees, 4	

Paaport Size Photographes.	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

र्णिति मत्यमेव जयते			JAB STA		IG LICENC
Form 7	Nan S/D/	nber : PE ne : Al W of : SL	B-1320120 MIT SINGH JBHASK C	030272	DONAK
			-07-2012		Shind
is licenced to dri Vehicle Class	LMV	MCWG	class throu	ghout India:	A Houder Agnathe
Date of Issue		20-07-2012	-		May! Wh Nu

Simplified Proforma for Services under Punjab RTS Act (46)

Part -1

1	Name of Service	Issue of Tax Clearance Certificate (for period upto 2 years from date of application)
2	Name of Department/ Service Provider (Pre-filled into the system)	Each District Transport Officer in each Distric Quarter

Part -2

1	Name of Applicant
2	Husband / Father's / Mother's Name
3	Permanent Address
4	Correspondence Address
5	Correspondence Phone No.
6	Correspondence e-mail
7	Adhaar Card No. (Attach Copy)

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
Docu	ments Required	Submitted Tick ($$) /

Yes

No documents required as this certificate is being issued by concerned Distrcit Transport Officer on the verificateion of office record

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

Simplified Proforma for Services under Punjab RTS Act (47)

Part -1

1	Name of Service	Issue of Tax Clearance Certificate (for period beyond 2 years)
2	Name of Department/ Service Provider (Pre-filled into the system)	Each District Transport Officer in each Distric Quarter

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant. (Adhaar No. of beneficiary. Attach Copy)		
2	Relationship with applicant		
Docu	ments Required		Submitted Tick ($$) /

Yes

No documents required as this certificate is being issued by concerned Distrcit Transport Officer on the verificateion of office record

Signature of Applicant

(ACKNOWLEDGEMENT SLIP)

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

Application No

Simplified Proforma for Services under Punjab RTS Act (48)

1	Name of Service	Issue of Route Permit or National Permit
2	Name of Department/ Service Provider (Pre-filled into the system)	Secretary, regional Transport Authority in each Region of Punjab State

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.
	(Adhaar No. of beneficiary. Attach Copy)
2	Relationship with applicant

Documents Required

Yes

Submitted Tick ($\sqrt{}$) /

1	Application In From No. 48	
2	Photocopy of valid Registraion Certificate	
3	Valid Insurance Certficate	
4	Application fee Rs 200/-, Punjab State fee Rs. 1000/- and National Permit	
	fee of Rs. 16,500/-	
5	Valid goods carriage permit for the operational area of Punjjab State	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which
			Service to be
			provided
2	Service asked for	5.	Fees/Facilitation
			Charges, if any
3.	Date of Application	6.	Signature of
			authorised official

	FORM 47						ite of payment o		2010-01	215		
	[See rules 83(2) and 87	7(2)]		1	SI. Name No. the St	of Amour stee paid		Date of receipt	Payable	Period	Registration mark of	Signatu and se
AL	UTHORISATION FOR TOURIST PERMIT	OR NATIONAL PER	MIT		for with paym	uch Rs.	bank draft	of		which	the vehicle	of the authori
No.					· mad		of bank	draft				
	Office of the Secretary, Regional/State	Transport Authority		10 10	1 2	3	4	_ 5	6	7 '	8	9
Aut	thorisation No	Dated	.	11 - E	100 1200 120 10 1200 120	210120000000						
	s authorisation is valid throughout the terri	tory of India/in the Sta	te(s) of:-		Certife 72IRs 16.508	ed that th 11 vide rece	e National Pe pt number	annit hol	ter has	para u	е сопъощаа	ted tee
		· · · · · · · · · · · · · · · · · · ·		1.5	((
3.								Signatu	e and se	eal of th	e Transport	Author
5.				ŧ	*[Note	This Po	rm shall be se	curity pri	nted wal	ter-mark	paper and	shall ca
				¥.,	such holog	gram embl	em, as may be			State G	overnment.J	
9.				1		100 1000		<u> </u>				
	(Here write the names of the 5ta	ates applicable)		3	2							
	Name in full and complete address of holder of the permit	· · ·		1								
2.	Registration mark of the motor vehicle and make	2	·									
3.	Year of manufacture		di di manana di	3								
4.	¹ [Engine number or motor number in the case of Battery Operated Vehicles]			4								
5.	Chassis number of the motor vehicle			1			10					
6.	Permit number of the motor vehicle			1								
7.	Name of the permit issuing authority	······		1								
8.	Date of expiry of the permit	·····		1			18					
9.	Gross weight of the motor vehicle . Unladen weight of the motor vehicle							-12				
	. Seating capacity in the case of tourist			.[
12	vehicle Feriod of validity of the authorisation	From										
	The authorisation for the following	110000000000000000000000000000000000000										
(1 -5)	State(s) is subject to payment of taxes by the permit holder to the respective		1 ×.		-							
	State(s)	55		1								
1. 2.			1									
3.		15	S	1								
	Signature and designation wit	h seal of the Transport	Authority	٢								
· In.	bs. by G.S.R. 589(E), dated 16th September, 2005, F. by G.S.K. 76(E), dated 31st January, 2000 (w.o.f. 3	11-1-2000). Earlier item 13 v	as added by									16
× G:	S.R. 684(E), dated 26th March, 1993 (w.e.f. 26-3-19 h Ortober, 1999 (w.e.f. 22-10-1999).	ray and commed by G.S.K. (south' mater					2				
				-								

Simplified Proforma for Services under Punjab RTS Act (49)

Part -1

1	Name of Service	Addition / Deletion of Hire Purchase Entry
2	Name of Department/ Service Provider (Pre-filled into the system)	Each District Transport Officer in each District Quarter

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
Docu	iments Required	Submitted Tick ($$) /

Documents Required

Yes

1	Application In Form No. 34 countersigned by Financier for HPA enter	
2	Application in Form No 35 countersigned by Financier for HPA cancell	
3	Original certificate of Registration	
4	Prescribed fee of Rs 100/-	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

	TFORM	4 23
	CERTIFICATE OF	e 48)
	CERTIFICATE OF	REGISTRATION
	Brief description of vehicle	gistration Number
	with/without gear, motor cycle with side Purchased from the Dealer Name & A	and goods vehicle, trailer, motor cy car, elc.) Idress :

	Son/wife/daughter of Full address (Permanent)	
1.0	Full address (Temporary)	
	[PAN Number (optional)	
	Signatur	e of Registering Authority
S	specimen Signature of the Registered	and a second sec
	affixed and attacted by	
ł	Registering Authority with his seal	
2		DETAILED DESCRIPTION
	1. Class of vehicle	DETAILED DESCRIPTION
	The motor vehicle is	
	(a) a new vehicle	***************************************
	(b) ex-army vehicle	***************************************
	(c) imported vehicle	
	(d) Migration from other States	
	2. Maker's name	
	Dealer's name and address	
	3. Type of body	
	4. Month and year of manufacture	
	year of manufacture	
	or cynnicers	
	attacono ratimper	
	and an antiber of motor number in	
	the case of Battery Operated Vehicles]	
8	 Fuel used in the engine 	
	9. Horse Power (B.H.P.)	
B	10. Cubic Capacity	
8	11. Maker's Classification	
	12. Wheel base	1
1	13. Seating capacity (including driver)	
	14. Unladen weight	
1	15. Colour or colours of body, wings	
	and front end	1
1	Additional particulars in the case of all transpo	and malefaller all all
1	6. Gross vehicle weight	or oencies other than motor cabs.
	(a) as certified by the manufacturer	
	(b) as registered	kgms.
1	7 ² [Number, description, size and ply rating	
	of types as declared by it	
	of tyres, as declared by the manufacturer] (a) Front axle	+
	(b) Rear axle	
	(c) Any other axle	
	(d) Tandem axle	
11	8. Registered axle weight	kgms.
No.	(a) Front axle	, second se
	(b) Rear axle	kgms.
	(c) Any other axle	kgms.
	(d) Tandem axle	kgms.
	A DECEMBER OF THE ADDRESS OF THE ADD	
	Additional particulars of alternative or additin particulars of alternative or	onal Semi-Trailer Registered
:19). Type of body with an Articulated ve	nicle
20). Unladen weight	
2010	Number, description and size of tyres	******
20	statute, description and size of turne	
21	on (analy) and	
21	on (each) axie	arrent discourse of the second
21	on (each) axle 2. Registered axle weight (in respect of each	1 axle)
21	2. Registered axle weight (in respect of each	
21 22 Ti	on (each) axie	

Application No

Simplified Proforma for Services under Punjab RTS Act (50)

Part -1

1	Name of Service	Transfer of Vehicle (if the place of registration is the same place)
2	Name of Department/ Service Provider (Pre-filled into the system)	Each District Transport Officer in each District Quarter

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.
	(Adhaar No. of beneficiary. Attach Copy)
2	Relationship with applicant

Documents Required

Yes

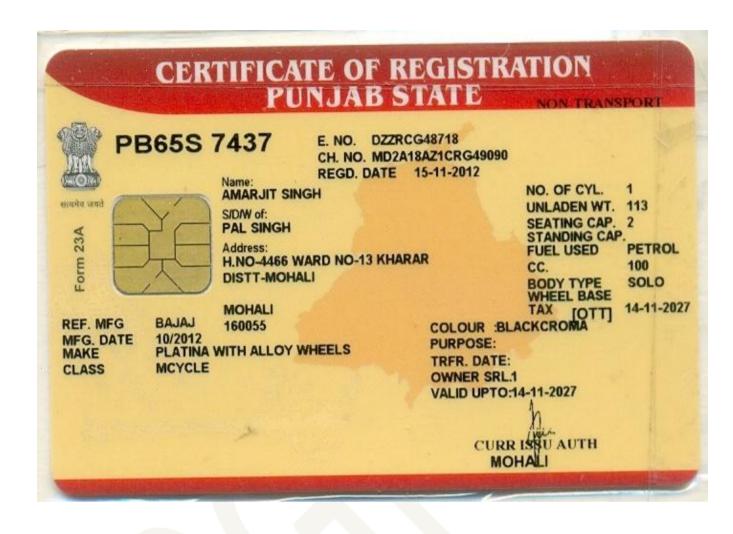
1	Application In Form No 29 & 30
2	Self Decleration Letter in the shape of affidavit from the purchaser and
	seller.
3	NOC or No Due Certificate from the financier in case Hire Purchase
	Agreement.
4	Prescribed Fee
5	Original certificate of registration
6	Valid insurance Certficate
7	NOC from the concerned authority in the case of reassignment of vehicle
	of other states registration mark and verificxation from the concerned
	authority in the case of Punjab State registration mark.
	Death certificate in case of death of the owner and legal heirs
	certificate issued by the competent authority.
8	Certified copy of order passed by the competent authority of state Govt. /
	Central Govt. in case the vehicle is purchased in the auction

Signature of Applicant

Submitted Tick ($\sqrt{}$) /

1. Application Receipt No. 4. Date by which

				Service to be provided
2	Service asked for	5	5.	Fees/Facilitation
				Charges, if any
3.	Date of Application	6	6.	Signature of
				authorised official



Simplified Proforma for Services under Punjab RTS Act (51)

Part -1

1	Name of Service	Renewal of Driving License
2	Name of Department/ Service Provider (Pre-filled into the system)	Licensing Authority (Each District Transport Officer in each District Quarter and SDM in Sub Division Level)

Part -2

1	Name of Applicant	
2	Husband / Father's / Mother's Name	
3	Permanent Address	
4	Correspondence Address	
5	Correspondence Phone No.	
6	Correspondence e-mail	
7	Adhaar Card No. (Attach Copy)	

Part -3

Information / Documents required specific to the service

Information

1	Name of beneficiary, if not applicant.	
	(Adhaar No. of beneficiary. Attach Copy)	
2	Relationship with applicant	
Docu	iments Required	Submitted Tick ($$) /

Documents Required

Yes

1	Application in From No. 9	
2	Prescribed Fee	
3	3 photographs in passport size	
4	Original Driving License	
5	Medical certifcate in Form No. 1-A	

Signature of Applicant

1.	Application Receipt No.	4.	Date by which	
			Service to be	
			provided	
2	Service asked for	5.	Fees/Facilitation	
			Charges, if any	
3.	Date of Application	6.	Signature of	
			authorised official	

ात्यमेव जयते	PL	INJAB STATE	
Form 7	Name : S/D/W of : Address :	PB-1320120030272 AMIT SINGH SUBHASK CHAND VILL. ANDANA TEH. MU DISTT. SANGRUR 14803 20-07-2012 25-12-1992 BG - U	PONAK
		00.	
and the second se	the second se	cle class throughout India:	A ICA I
Vehicle Class	LMV MCWG		HOLDER HONATUR

13. DEPARTMENT OF POLICE

	"SA	ANJH"	COMPLAINT FORM ਸਕਾਇਤ /ਫਰਿਆਦ ਫਾਰਮ
ROTECTION PARTNERSHIP PEACE	CPRC/CPSC/PSOC (Pl. Fill Nan (ਕ੍ਰਿਪਾ ਕਰਕ	e of Distt./Sub Division/Police Station above) ਜਿਲ੍ਹਾ/ਸਬ ਡਵੀਜਨ/ਥਾਣੇ: ਦਾ ਨਾਮ ਉੱਪਰ ਤਰੇ)	
UNIQUE TOKEN NO.		DATED D	M M Y Y Y Y
ਬੇਨਤੀ ਕਰਤਾ			
ਪਿਤਾ/ਪਤੀ ਦਾ ਨਾਮ		P.S ਥਾਣਾ H.NO ਮਕਾਨ ਨੰ MOBILE NO	
ਫੋਨ	ਗਲੀ ਨੰ	ਮੋਬਾਇਲ ਨੰ.	25
ਵਿਸ਼ਾ 			
ਥਾਣਾ AGAINST NAME1) ਬਰਖਿਲਾਫ S/O, D/O, W/O ਪਿਤਾ/ਪਤੀ ਦਾ ਨਾਮ			
ADDRESS ਪਤਾ			
ANY OTHER DETAIL ਕੋਈ ਹੋਰ ਵੇਰਵਾ			
	ਸ਼ਿਕਾਇਤ ਦੇ ਨਾਲ ਇਹ ਫਾਰਮ ਭਰਵਾ ਕੇ ਨੱਥੀ ਕੀਤਾ ਜਾਵੇ	For Office use only	
Name : Designation :	Diary No. Date		
Looignation .	Date	Signature of	

				432/PSSK/CITY BLD	DCR No. 432/PSSE	DC
31/08/2015.	01	PSOC City Budhlada Mansa		ed at office	The Complaint is registered at office	Th
31/08/2015	occurred on	DISPUTE OF MONEY	regarding	811369	under unique token no.	un
43	Punjab India	Ward No. 1 Budhlada Psoc City Budhlada Mansa Pu	Ward No. 1 Bu	*	resident of	res
		Sukhvinder Singh S/O Mall Singh	Suk		Receiving complaint from	Re
01-Sep-2015 09:59:46	DATE		×	811369	UNIQUE ID	
		C626-PSOC City Budhlada Mansa	C626-P,			
COMPLAINT RECEIP	COMPLA	Punjab Police	P	•	PROTECTION PARTNESSUP PECE	

