

Card No. generated by System.

Whether for exchange of existing card / new card

No. :

No. :

Declaration Form Cum Household Information Sheet -

District.

Mandal Gram Panchayat Rev. Village Hamlet Village / Tanda G.P. Ward No. Street Name Colony Door No.

COUNTER FOIL
DECLARATION FORM CUM HOUSEHOLD
INFORMATION SHEET :..

1. Head of the Family (in Full and Capital Letters) Surname <input type="text"/> Actual Name <input type="text"/>		2. Gender Male <input type="checkbox"/> Female <input type="checkbox"/>		3. Widow <input type="checkbox"/>		4. Disability ? If Yes, Code No. <input type="text"/>		5. Present Card Status No Card <input type="checkbox"/> Pink <input type="checkbox"/> AAY <input type="checkbox"/> White <input type="checkbox"/> Annapurna <input type="checkbox"/>		25 Wet land under Major / medium irrigation Acres <input type="text"/> Cents <input type="text"/> Dry land (Other Crops) Acres <input type="text"/> Cents <input type="text"/>		Wet land in other source of irrigation Acres <input type="text"/> Cents <input type="text"/> i) Khata No. <input type="text"/> ii) Other water resources <input type="text"/> iii) Electricity Connection <input type="checkbox"/>		Dry land (Commercial Crops) Acres <input type="text"/> Cents <input type="text"/> Bore / Well <input type="checkbox"/> Free / Regular (Service No.) <input type="text"/>	
7. Father or Husband's Name (Actual Name - No surname required) <input type="text"/>				8. Card No. (Existing) <input type="text"/>		9. F.P.S No. <input type="text"/>		26. Nature of House : Pucca Own <input type="checkbox"/> Pucca Rent <input type="checkbox"/> Thatched Own <input type="checkbox"/> Thatched Rent <input type="checkbox"/> IAY <input type="checkbox"/> RPH <input type="checkbox"/> WSHS <input type="checkbox"/> Plinth Area <input type="text"/> Sq.ft <input type="text"/>				27.LPG : Deepam <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> No Connection <input type="checkbox"/>		28. Code of the LPG Agency <input type="text"/>	
10. Caste <input type="text"/> ST <input type="checkbox"/> SC <input type="checkbox"/> BC <input type="checkbox"/> OC <input type="checkbox"/> MIN <input type="checkbox"/>				11. Religion Code <input type="text"/>		12. Date of Birth <input type="text"/>		13. Age <input type="text"/>		14. Enrolled as voter Yes <input type="checkbox"/> No <input type="checkbox"/>		15. Constituency No. <input type="text"/>		29. LPG Consumer No. : <input type="text"/> Dealer Code <input type="text"/>	
16. Part No. <input type="text"/>		17. Sl. No. <input type="text"/>		18. Occupation Code <input type="text"/>		19. If code not applicable details of Occupation <input type="text"/>				30. Monthly Rs. 500/- Power Bill : & Above <input type="checkbox"/> Below Rs. 500/- <input type="checkbox"/>		31. Electricity Consumer No. <input type="text"/> No Connection <input type="checkbox"/>		32. Whether Kerosene is required ? (Yes / No) Purpose : 1. Lighting <input type="checkbox"/> 2. Cooking <input type="checkbox"/>	
20. No. of Family Members <input type="text"/>		21. Telephone Yes <input type="checkbox"/> No <input type="checkbox"/>		22. Annual Income of Head of Family <input type="text"/>		23. Migrant Labour Yes <input type="checkbox"/> No <input type="checkbox"/>		24. Property Tax Assessment No. <input type="text"/>				33.Children studying in : Govt. <input type="checkbox"/> Aided <input type="checkbox"/> Private <input type="checkbox"/> No <input type="checkbox"/> Anganwadi <input type="checkbox"/> School <input type="checkbox"/> Convent <input type="checkbox"/> Studies <input type="checkbox"/>		34. Own ISL : Yes <input type="checkbox"/> No <input type="checkbox"/>	
35. Drinking Water source code <input type="text"/>		36. Vehicles Owned : Two Wheeler / Three Wheeler / Car / Jeep / Tractor / Lorry A) Vehicle Registration No. <input type="text"/>				37. Is Vehicle financed under Self Employment Scheme: Yes <input type="checkbox"/> No <input type="checkbox"/>									

Mandal : Panchayat:
Rev. Vill. : Hamlet / Tanda:
Ward : Block :
DPL.
Name of the Applicant :

Address :

At the Time of appearance at DPL, please bring any one of the following papers:

1. Address Proof
2. Election photo card
3. Electricity Bill
4. Telephone Bill
5. Identity card
6. LPG.consumer Bill
7. House Tax Bill
8. Existing ration card
9. Old Age pension card
10. Proof of children studying in Govt. School
- 11.Others :

You are requested to bring this receipt without fail on

..... at

- a) along with Family members (For White/AAY Card)
- b) With spouse for pink card
Name of the Revenue Official :

2a. Details of Family Members (Actual Name without Surname excluding Head of Family)										Relation ship Code	Date of Birth	Age	Occupation Code	Disability Code	Annual Income	
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DF Writer :
Name :
Designation :

Scrutiny Officer at DPL :
Name :
Designation :

DPL Incharge :
Name :
Designation :

Signature or thumb impression of Head of the Family

Signature :
Date :

(For Use at DPL. only)

DATE :

DPL COUNTERS

Signature of the Incharge Person

Reception Counter

DF Verification

Digital Photograph

IRIS Image

Fee Collection

Card Collection

Signature of the Card Holder

DPL Incharge :
Name :
Designation :
Signature :

Codes for using in ICR Sheets

Relation Codes : Column No. 2(a)			
01. Husband	02. Wife	03. Son	04. Daughter
05. Father	06. Mother	07. Grandson	08. Grand Daughter
09. Grand Mother	10. Grand Father	11. Daughter in - law	12. Son in - law
13. Father in - law	14. Mother in - law	15. Others	16. Brother
17. Sister			
Disability Codes :		Column No. 4	
1. Visually Handicap		2. Hearing Handicap	
3. Orthopaedical Handicap		4. Mentally Challenged	
Religion Codes : Column No. 11			
1. Hindu	2. Christian	3. Muslim	4. Buddhist
5. Jain	6. Sikh	7. Others	
Occupation Codes : Column No. 18			
01. Farmer	02. Small / Marginal Farmer	03. Agricultural Labour	
04. Daily wage earner	05. Employee - Govt.	06. Employee - Private	
07. Cooli / Porter / Hand Cart Puller		08. Fruit / Flower Vendor on Pavement	
09. Technician	10. Rikshaw Puller	11. Domestic Servant	
12. Beggar	13. Industrialist	14. Student	
15. House Wife	16. Retired Employee	17. Porter	
18. Own Business	19. Money Lender	20. Others	
21. Scavenger	22. Auto Rikshaw Driver	23. Rural Artisan	
Drinking Water Source Codes : Column No. 35			
1. Own Tap under protected water scheme		2. Public Tap under protected water scheme	
3. Own Well	4. Shallow Borewell	5. Deep Borewell	6. No Safe Drinking Water source

REMARKS OF THE ENQUIRY OFFICER

Name&Designation of the Enquiry Officer
with signature

DECLARATION FORM

I Sri/Smt.
S/o./W/o.
Declare that I have applied for issue of ration card in this DPL centre only and residing at the address given. The details of properties, income and family members etc. furnished by me in the declaration form are true to the best of my knowledge. If they are found to be false at a later date, action may be initiated against me, under section 7, of the Essential Commodities Act., 1955 and also as per Indian Penal Code.

Date :
Place :

Signature / Thumb Impression of Head of the Family

★ SAVE WATER - SAVE POWER.

★ "EDUCATION IS RIGHT OF CHILD."

★ CONSUMER AWARENESS IS CONSUMER PROTECTION.

MADDALA INDUSTRIES - Ph : 040-27656607