

Card No. generated by System.

Whether for exchange of existing card / new card

No. :

No. :

Declaration Form Cum Household Information Sheet -

District.

COUNTER FOIL
DECLARATION FORM CUM HOUSEHOLD
INFORMATION SHEET :..

Circle No. Ward Block Mandal Street Name Colony Door No. DPL No.

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="text"/>		Dry land (Commercial Crops) Acres <input type="text"/> Cents <input type="text"/> Bore / Well <input type="text"/> Free / Regular (Service No.)	
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 Govt. studying in : School <input type="checkbox"/> Aided School <input type="checkbox"/> Private School <input type="checkbox"/> No <input type="checkbox"/> Anganwadi School <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"/>									

Circle : Code :
Mandal : Block :
Ward :
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)										Relationship 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"/>

Name&Designation of the DPL Incharge with signature

Name&Designation of the Scrutiny Officer with signature

Name&Designation of the Card Issuing Officer with signature

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

REMARKS OF THE ENQUIRY OFFICER	
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	
Name&Designation of the Enquiry Officer with signature	
<u>DECLARATION FORM</u>	
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 :	<input type="text"/>
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