

APPLICATION FORM FOR TAU DEVI LAL OLD AGE PENSION

- | | | | |
|-----|--|---|-----------------------------|
| 1 | Name of the applicant | Sh./Smt..... | |
| 2 | Father/Husband Name | Sh..... | |
| 3 | Date of birth/Year(certificat
if available) | Age.....Certificate..... | |
| 4 | Permanent address | Village/City..... House No.....
P.O./Ward.....Block.....
Tehsil.....Distt..... | |
| 5. | Whether Haryana domicile | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. | a) Whether getting any financial
assistance/pension | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | b) If yes, income per month | | |
| 7 | Whether belongs to SC/BC
If yes, category/caste | Yes/No | BC SC |
| 8 | Whether applicant's children are in
Govt. service or Local Bodies or
Class-I/Class-II officer or similar in
the organizations of Public Sector. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | 1 Whether applicant's children are posted
in Private Sector and getting salary equivalent
to Class-II officer or similar. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10 | Whether applicant or his children are in any
service shown against this column. If yes,
Tick the related one. | Doctor/regd. Medical practitioner
/Advocate/C.A/I.T Consultant/
Financial/Management Advisor/
Dentist/Engineer/Architect/
Contractor, any other | |
| 11. | Whether applicant or his children are
Income Tax payee | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. | Whether applicant/his children Ex or Present/
M.P/MLA, Chairperson of Boards/Banks/
Corpn. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Signature of Applicant/Thumb impression

DECLARATION

I Sh/Smt. S/D/W/o
resident of village/city..... P.O Tehsil.....
District affirm that the above particulars are true to the best of my
knowledge and belief and nothing has been concealed.

Signature of Namberdar/Ward Representative

Name

Date

Signature of Applicant/Thumb impression

Date

SCRUTINY COMMITTEE RECOMMENDATION

1. Age

2. Whether applicant is eligible for
Old age pension

Yes

No

3. Signature of member of Scrutiny Committee

.....
Signature

.....
Signature

.....
Signature

(Name/Designation)

(Name/Designation)

(Name/Designation)

ENQUIRY

Inspecting Officer-
1. Deputy Commissioner 2. SDO (Civil) 3. Tehsildar

REPORT

NOTE: -1. The salary of eligible applicant against column 9 will be taken
equal to the salary of Rs.4,000/- of Class II Gazetted Officer.

2. Please tick the column like this

