

Proforma-2

Application form for applying for adding members in ration cards under Chhattisgarh Food & Nutrition Security Act, 2012.

To

The Commissioner/Chief Municipal Officer/ Secretary, Panchayat

District

Block/Municipality.....

Name of Gram Panchayat/Municipality.....

Name of Village/Ward.....

Name of Fair Price Shop.....

Name of applicant.....

Name of father/husband.....

Name of Head of the family in the ration card in which members are to be added.

Type of ration card.....

Ration Card number.....

Details of members to be added in the ration card.

S.No.	Name of member	Sex	Relation to head of family	Age	Latest passport photo
1.					
2.					
3.					

Documents to be attached with the application form (Any one of the following to be attached)

Aadhar Card No. of member

Epic Card No. of member

Birth certificate No

Declaration

I, hereby, declare that out of the details I have given in the application-cum-declaration form, no separate ration card is either issued in the name of any of the members of my family as also there is no entry in the ration card in any of the district of

State of Chhattisgarh. In support of the information given by myself in the application, necessary documents are available with me, which can be produced on demand.

I solemnly declare that all the information given by myself in this declaration form is fully true and I pledge that if any information is found false during enquiry, I shall be liable for penalty under Section 9 of the Essential Commodities Act, 1955.

Place –

Signature (Head)

Date-

Name-

(In case of the applicant being illiterate, thumb impression of left hand finger be taken in presence of witness and be duly signed by the witness with name and address).

Attestation

All the documents submitted along with the application have been verified by me. Members of the family as mentioned at S.no.....(copy attached) have been/have not been found matching with Socio-Economic Caste Census 2011 survey. Documents attached with the application have been found correct/incomplete/incorrect.

So issue of Antyodaya/priority ration card is recommended/application is rejected.

Name of attesting officer-

Designation-

Signature-

Date-