

APPLICATION FORM FOR ALLOTMENT**DUMDUMA PHASE-VII**

**Multistoried Residential Apartment Complex
For MIG, LIG, EWS Category at Dumduma, Bhubaneswar**

**ODISHA STATE HOUSING BOARD**

Sachivalaya Marg, Kharavela Nagar, Bhubaneswar-751 001

Phone : (0674) 2393524, 2392587, Fax : (0674) 2393952

Phone : EPBAX : (0674) 2391542, 2390141 - Extn. 134 / 160 / 166 / 155

For Office UseRef. No. Date **To be filled-in by the applicant**Money Receipt No. Money Receipt Date Outright purchase option : if opted, please tick : Yes No

To

**The Housing Commissioner-Cum-Secretary,
Odisha State Housing Board, Bhubaneswar**

Sir,

I request to register my name for consideration of allotment of one EWS/LIG/MIG Flat at Dumduma, Phase-VII, Bhubaneswar.

I furnish below the particulars for the purpose.

01. Name
(Block letter)

02. Name of Parents Father
(Block letter)

Mother

03. Permanent AddressAt P.O. P.S. Dist. Pin **Present Address**At P.O. P.S. Dist. Pin

Contact No. Cell Land

04. Nationality

Attested
Passport Size
Photograph

05. Age Date of Birth

06. Occupation
(Please specify name of Employer)

07. Caste

08. Category

09. Details of EMD & Processing Fee

a) E.M.D. Amount DD/Cash Scroll No.
& Date

b) Processing Fees DD/Cash Scroll No.
with Service Tax & Cess & Date

10. Do you undertake that you will pay the balance cost (Sale price minus EMD) of the flat as intimated by the Board ? Yes No

11. Balance Cost Payment Option :

I do undertake to pay the balance cost in outright purchase option/instalment option during construction period.

Outright Purchase Option

Instalment Option

12. Do you or any of your family members own/have been allotted any house/plot/flat/Shop-cum-Residence within the Bhubaneswar Municipal Corporation Area where the Housing Scheme is proposed to be undertaken. (Family means Husband, Wife and minor Children) Yes No

13. I undertake that the following persons are the members of my family (Family means Husband, Wife and minor Children) as noted in statement below.

Sl. No.	Relation	Name(s)	Age
1.	Husband / Wife		
2.	Son(s)		
3.	Daughter(s)		

14. That Present Annual Income of my family from all sources is Rs.
(Rupees) only.

15. I hereby declare that the above information is correct.

I agree to abide by the conditions contained in the **Orissa Housing Board Act, 1968**, the extant Rules and Regulation and Board decisions framed there under or any other order, instruction duly issued by the Board from time to time. In case of voluntary withdrawal from the scheme for any reason whatsoever, I will not claim any interest on the deposited amount.

I have read the contents relating to the terms and conditions of allotment of a flat in detail as mentioned in the Brochure annexed hereto and hereby agree to abide fully by these terms and conditions and accordingly, put my signature on this.

16. I hereby enclose the following documents as required.

(Please put 'tick mark' against the document enclosed)

(i) Identity Proof – Copy of Voter ID/ PAN Card/ Driving License/ Aadhaar Card.

(ii) Residential Proof – Copy of Telephone Bill/ Electricity Bill/ Bank Pass Book

(iii) Original Affidavit in prescribed format

(iv) Copy of Receipt in support of payment of EMD

(v) Original Money Receipt towards purchase of Application Form

(vi) Recent Passport size photograph duly attested – 01

(vii) Two self addressed envelopes of size 12 cm. X 26 cm.

Specimen signature

1.

2.

3.

Full Signature of the Applicant(s)

Date

FORM OF AFFIDAVIT

Before Executive Magistrate/Notary Public

In the Court/Office of Shri Executive Magistrate/Notary Public
Place.....
I/We, Shri/Smt. Aged
Son/Daughter/Wife of Shri Resident
of P.O. P.S.
in the district of at present by
Profession do hereby solemnly affirm and
state as follows:

1. That I am an applicant to the Odisha State Housing Board for allotment of a EWS/LIG/MIG Flat in the Apartment Project at Dumduma, Phase-VII, Bhubaneswar.
2. That I or any of my family member do not own/owns or have been allotted any residential House/Plot/ Flat/Shop-cum-Residence by OSHB or any Govt. authority within the Bhubaneswar Municipal Corporation area where the Housing Scheme is proposed to be undertaken.
3. That I have not sold/ transferred/ purchased any residential House/Plot/ Flat/ Shop-cum-Residence allotted by OSHB or any Govt. authority within the Bhubaneswar Municipal Corporation area where the Housing Scheme is proposed to be undertaken.
4. That my annual family income from all sources is Rs. _____
(Rupees _____).
5. That I undertake to pay the full cost of house as fixed by OSHB after allotment and before taking over possession.
6. That, I do opt for outright purchase facility and do undertake to pay the full cost, as and when asked for by OSHB, in one installment. (Applicable only in case of outright purchase option).
7. The facts stated in this application appended to it are true to the best of my/our knowledge and belief and shall be construed as a part of this affidavit.

Identified by me.

SIGNATURE OF THE DEPONENT

I Shri/Smt. Aged
Son/Daughter/Wife of Shri Resident
..... P.O. P.S.
in the district of at present by
Profession who is identified
By Shri advocate
appears before me and states on oath that content of this affidavit are true to the best of his/her
knowledge.

Deponent

Executive Magistrate/Notary Public