APPLICATION FORM



ODISHA STATE HOUSING BOARD

Sachivalaya Marg, A/32, Kharavel Nagar, Bhubaneswar-751001 Phone: 0674-2393524, EPABX- 2390141, 2391542

For (Office Use					
Ref N	No:					
Date	:				0 - 15 0 14 1 1	
	e filled-in by the Applican	t	_		Self Attested Passport size	
	Money Receipt No.				Photograph	
Money Receipt Date:						
То						
	The Housing Commis	sioner-cum-Secreta	ary,			
	Odisha State Housing Board, Bhubaneswar					
Sir						
	I request to register my name for consideration of allotment of HIG Flat/ MIG Flat/ EWS Flat/					
	HIG core House/ Plot on as is where is basis at					
	I furnish below the particulars for the purpose.					
01.	Name:					
	(Block letter)					
02.	Name of Parents / Hus	sband				
	(Block letter) Father	r / Husband				
	Mothe					
03.			Present Address			
00.	At:		At:	THE TOTAL TO		
	Po:		Po:			
	P.s:		P.s:			
	Dist:		Dist:			
	Pin:		Pin:			
	State :		State:			
	Telephone :		Telephone			
	Email :		1777			

04.	Nationality:						
05.	PAN		/Aaadhar	·No.			
06.	Age		Date of B	irth			
	Occupation : (Please specify name of employer)						
08.							
	a) E.M.D. Amount		DI	D/Cash Scroll No. & Date	е		
	b) Processing Fees with Service Tax		DI	D/Cash Scroll No. & Date	е		
	c) GST						
09	09 Bank Account details of applicant, incase opting for Online refund in the event of non-allotment:						
	Bank Name	Branch Name	IFSC code	Name of the Account Holder	Account No.		
	 10. Do you or any of your family members own/have been allotted any house/plot/flat/shop/Shop-cum-Residence within the locality where the Housing Scheme exists. (Family means husband, wife, minor children) 11. I undertake that the following persons are the members of my family as noted in statement below. (Family means husband, wife, and minor children) 						
SI.	No. Relation		Name(s)		Age		
1.	Husband/Wife						
2.	Son(s)						
3.	Daughter(s)						
12.	That Dragget Appual Inco						
	(Rupees	ome of my family	from all sour	ces is Rs.) only.		

12. Bid Value quoted in respect of Flat/Plot - (Applicable only for units under auction)	
I hereby declare that the above information is correct. I agree to abide by the conditions contained in the Orissa and Regulation and Board decisions framed there und by the Board from time to time. In case of voluntary whatsoever, I will not claim any interest on the deposite to the terms and conditions of allotment of one HIG Flain detail as mentioned in the Brochure and hereby agreed and accordingly, put my signature on this.	er or any other order, instruction duly issued withdrawal from the scheme for any reason ed amount. I have read the contents relating at/2 BR flat/MIG Flat/LIG flat/EWS Flat/Plot,
 15. 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 Lic (ii) Residential Proof – Copy of Telephone Bill/ Electricity E (iii) Original Affidavit in prescribed format (iv) Copy of Receipt in support of payment of EMD (v) Original Money Receipt towards purchase of Application (vi) Recent Passport size photograph duly attested – 01 (vii) One cancelled cheque of the applicant (in case optim NEFT/RTGS). (viii) Two self addressed envelopes of size 12 cm. X 26 cm 	cense/Aadhaar Card. Bill/ Bank Pass Book ation Form g for refund through
	FULL SIGNATURE OF THE APPLICANT
Specimen Signature	
1.	DATE:
2.	
3.	

FORM OF AFFIDAVIT

Before Executive Magistrate/Notary Public

In t	ne Court/Office of Shri Executive Magistrate/Notary Public
Plac	e
I/We	, Shri/ Smt
Age	Son / Daughter/Wife of Shri
	P.OP.Sin the district
of	at presentby
Prof	ession do hereby solemnly affirm and state as follows:
1.	That I/We am/are an applicant to the Odisha State Housing Board for allotment of a of HIG Flat/2 BR flat/ MIG Flat/LIG flat/ EWS Flat / House/Plot at
2.	That I/We or any of my/our family members do not own/owns or have been allotted any residential nouse/plot/flat/shop/Shop-cum-Residence by OSHB or any Govt. authority in the locality where the Housing Scheme exists, as per the conditions contained in the Brochure under "Terms and Conditions of Allotment".
3.	That I/We have not sold/ transferred/ purchased any residential house/plot / flat/shop/Shop-cum-Residence allotted by OSHB or any Govt. authority in the locality where the Housing Scheme exists, as per the conditions contained in the Brochure under "Terms and Conditions of Allotment".
4.	That my/ our annual family income from all sources is Rs/
5.	That I/We undertake to pay the bid value of the Flat/Plot or full cost of the Flat/House/LIG Plot as fixed by OSHB after allotment and before taking over possession, as per terms and conditions of the Brochure.
6.	That the facts stated in this application and documents appended to it are true to the best of my/our knowledge and belief and shall be construed as a part of this affidavit.
7.	That I/We am/are well aware of the terms and conditions contained in the Brochure and filled up the Application Form and agree to abide by the same in all respect.
lder	tified by me.
Adv	Signature of the Deponent
1 8	Shri/Smt
Shri	
P.S.	in the district of at present
by	Profession who is identified by Shri
adv	ocate appears before me and states on oath that content of this affidavit are true to the best of his/her
kno	vledge and belief.

Deponent