## APPLICATION FORM FOR ALLOTMENT

of EWS Flat/LIG/HIG Core Simplex House



At Muktapur, Nayagarh



## **ODISHA STATE HOUSING BOARD**

Sachivalaya Marg, A/32, Kharavela Nagar, Bhubaneswar - 751 001 Phone: 0674-2393524, EPABX- 2390141, 2391542

	Fax: 0674-2393952	,,			
For (	Office Use				
Ref.	No.				
Date				Attested	Attested Passport Size
To b	e filled-in by the applic	ant		Passport Size Photograph	Photograph in case of joint
Mone	ey Receipt No.				Applicant
Mone	ey Receipt Date				
To	<b>The Housing Commis</b> Odisha State Housing		ry,		
Sir,	I request to register my HIG core house in the Nayagarh.				
	I/WE furnish below the	particulars for the pur	rpose.		
01.	Name (Block letter)				
02.	Name of Parents				
	Father/Mother (Block le	etter)			
03.	Permanent Address		Pres	ent Address	
	At		At		
	P.O.		P.O.		
	P.S.		P.S.		
	Dist.		Dist.		
	Pin		Pin		
	Contact No.	111		Land	
04.	Nationality				

05.	Age			Date of Birth	
06.	(Pleas	pation se specify of Employer)			
07.	Detail	ls of EMD & Pro	cessing Fee		
	a) E.N	Л.D. Amount		DD No./Scroll No. & Dat	e
		ocessing Fees  n Service Tax		DD No./Scroll No. & Dat	е
08.	localit (Fami	ty where the Ho ily means husba ertake that the fo	using Scheme is bushind, wife, minor ch	peing implemented by OSH nildren) Yes [ re the members of my fami	Shop-cum-Residence in the HB.  No  Iy (Family means Husband,
	SI. No.	Relation/ Other Depend	lants	Name(s)	Age
	1.	Husband / Wif	е		
	2.	Son(s)			
	3.	Daughter(s)			
10.	That I	Present Annual	Income of my fam	ily from all sources is Rs.	
	( Rup	ees			) only.

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 is:	sued by the B	Board from ti	me to time.	In case of v	oluntary/	withdrav	wal from
the scheme for an	y reason wha	tsoever, I wil	II not claim a	any interest	on the de	eposited	amount.

I have read the contents relating to the terms and conditions of allotment of a house/ 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.

	these	terms	and	conditions	and	accordingly,	put	m y	signature	on	this.
12.	I hereb	v enclos	e the	followina docu	ıments	s as required.					

	(Plea	ase put 'tick mark' against the document enclosed)		
	(i)	Identity Proof – Copy of Voter ID/ PAN Card/ Driving	g License.	
	(ii)	Residential Proof – Copy of Telephone Bill/ Electrici	ty 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 Applic	ation Form	
	(vi)	Recent Passport size photograph duly attested - 01		
	(vii)	Two self addressed envelopes of size 12 cm. X 26 cm.	cm.	
Speci	men	Signature		
4				
1.				
2.			Full Signature of the A	applicant(s)
			Date	
3.				

## **FORM OF AFFIDAVIT**

In the	ne Court/Office of Shri	Executive Magistrate/Notary Public			
Place	e				
I Shr	ri/Smt	Aged			
Son/	/Daughter/Wife of Shri	Resident			
of	P.O	P.S			
in the	e district of at prese	ent by			
Profe	ession	do hereby solemnly affirm and			
state	e as follows:				
1.	That I am an applicant to the Odisha State Housing Boahouse/ HIG core house in the Pathani Samant Composite				
2.	That I or any of my family member do not own or have bee cum-Residence by OSHB or any Govt. authority in the loimplemented by OSHB.				
3.	That I have not sold/ transferred any residential Plot/Flat/House/Shop-cum-Residence earlier allotted by OSHB or any Govt. authority in the locality where the Housing Scheme is being implemented by OSHB.				
4.	That my annual family income from all sources is Rs	/			
5.	That I undertake to pay the full cost of house as fixed by over possession.	y OSHB after allotment and before taking			
6.	6. The facts stated in this application form appended to it are true to the best of my knowledge and belief and shall be construed as a part of this affidavit.				
Ident	tified by me.				
		SIGNATURE OF THE DEPONENT			
I Shr	ri/Smt	Aged			
Son/Daughter/Wife of Shri					
of	P.O	P.S			
in the	e district of at prese	ent by			
Profe	Profession who is identified				
appe	Shriears before me and states on oath that content of this wledge.				