

Annexure - I

No.

APPLICATION FORM FOR ALLOTMENT

DUMDUMA PHASE-VI

**Multistoried Residential Apartment Complex
For HIG Category at Dumduma, Bhubaneswar**



ODISHA STATE HOUSING BOARD

Sachivalaya Marg, A/32, Kharvela Nagar, Bhubaneswar-751001

Phone: 0674-2393524, EPABX- 2390141, 2391542

For Office Use

Ref. No.

Date

To be filled-in by the applicant

Money Receipt No.

Money Receipt Date

Outright purchase option : If opted, please tick : Yes ☐ No ☐

Attested
Passport Size
Photograph

To

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

Sir,

I request to register my name for consideration of allotment of HIG Flat at **Dumduma, Phase-VI** Bhubaneswar.

I furnish below the particulars for the purpose.

01. Name
(Block letter)

02. Name of Parents/Husband
(Block letter) Father/Husband
Mother

03. Permanent Address	Present Address
At <input type="text"/>	At <input type="text"/>
P.O. <input type="text"/>	P.O. <input type="text"/>
P.S. <input type="text"/>	P.S. <input type="text"/>
Dist. <input type="text"/>	Dist. <input type="text"/>
Pin <input type="text"/>	Pin <input type="text"/>

Contact No. Cell Land

04. Nationality

05. Age Date of Birth
06. Occupation
(Please specify name of Employer)
07. Caste

08. Details of EMD & Processing Fee

- a) E.M.D. Amount DD No./Scroll No.
Date
- b) Processing Fees DD No./Scroll No.
with Service Tax Date

09. Bank Account* details, incase opting for Online refund in the event of non-allotment :

Bank Name	Branch Name	IFSC code	Name of the Account Holder	Account No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*Account holder must be the Applicant.

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 locality 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/ Other Dependants	Name(s)	Age
1.	Husband / Wife	<input type="text"/>	<input type="text"/>
2.	Son(s)	<input type="text"/>	<input type="text"/>
3.	Daughter(s)	<input type="text"/>	<input type="text"/>

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/our 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. | <input type="checkbox"/> |
| (ii) Residential Proof – Copy of Telephone Bill/ Electricity Bill/ Bank Pass Book | <input type="checkbox"/> |
| (iii) Original Affidavit in prescribed format | <input type="checkbox"/> |
| (iv) Copy of Receipt in support of payment of EMD | <input type="checkbox"/> |
| (v) Original Money Receipt towards purchase of Application Form | <input type="checkbox"/> |
| (vi) Recent Passport size photograph duly attested – 01 | <input type="checkbox"/> |
| (vii) Two self addressed envelopes of size 12 cm. X 26 cm. | <input type="checkbox"/> |

Specimen signature

- | | |
|----|---|
| 1. | |
| 2. | Full Signature of the Applicant(s) |
| 3. | Date |

FORM OF AFFIDAVIT

Before Executive Magistrate / Notary Public

In the Court/Office of Shri Executive Magistrate/Notary Public
Place.....

I 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 HIG Flat in the Apartment Project at Dumduma, Phase-VI, Bhubaneswar.
2. That I or any of my family member do not own or have been allotted any residential Plot/ Flat/ House/ 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 Plot/ Flat/ House/ 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 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
of 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.

Executive Magistrate/Notary Public