



# ODISHA STATE HOUSING BOARD

Sachivalaya Marg, Bhubaneswar-751001

Phone No-(0674)2393524/2392587/2393277

EPBAX - (0674) 2391542, 2390141 - Ext.- 147, 160 /134/163,

FAX (0674) 2393952,

Website :<https://oshb.org>.

## APPLICATION FORM FOR ALLOTMENT OF RESIDENTIAL HOUSES/FLAT AT SUNDARGARH AND NAYAGARH

*For Office Use*

Ref No:

Date:

Self Attested  
Passport size  
Photograph

To

The Secretary

Odisha State Housing Board,

Bhubaneswar

Sir/ Madam

I/We request to register my/our name for consideration of allotment of

1. LIG house at Badapatrapali Ph-I, Sundargarh
2. EWS flat at Muktapur, Nayagarh

(Put tick mark for the scheme applied for)

I/we furnish below the particulars for the purpose.

01. Name of the applicant :

(Block letter)

02. Name (in Block letter)

Father

Mother

Spouse

03. Address for correspondence:

<u>Permanent Address</u>		<u>Present Address</u>	
At:	<input type="text"/>	At:	<input type="text"/>
Po:	<input type="text"/>	Po:	<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"/>
State:	<input type="text"/>	State :	<input type="text"/>
Telephone No.:	<input type="text"/>	Mobile Phone No.:	<input type="text"/>
		E-mail:	<input type="text"/>

04. Nationality:

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05.Caste:  06. Category

07. PAN No.

08. Aadhaar No.-

09. Age:  10. Date of Birth:

11. Gender

12. Occupation

(Please specify name of Employer)

13. Details of EMD & Processing Fee

a) EMD/Full cost.  DD / UTR No

Date

b) Processing Fee with GST

DD/ UTR No

Date

14. Bank Account details, in case opting for Online refund in the event of non- allotment :

Bank Name	Branch Name	IFSC code	Name of the Account Holder(Applicant only)	Account
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

15. Do you or any of your family member(s) own/have been allotted any house/plot/flat/shop/Shop-cum-Residence by OSHB or Govt. Agency within the locality where the housing scheme exists. (Family means husband  wife and minor children).

Yes

If Yes, give details

No

16. I/we undertake that the following persons are the members of my/our family as noted in statement

below. (Family means husband, wife, and minor children)

Sl.No	Relation	Name(s)	Age
i.	Husband/Wife		
ii.	Son(s)		
iii.	Daughter(s)		

17. That Present Annual Income of my family from all sources is Rs. \_\_\_\_\_

(Rupees  only.

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18. I/We hereby declare that the above information is correct.

I/We 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. I/We have read the contents relating to the terms and conditions of allotment of ahouse/flat on “as is where is basis and whatever there is ”, in detail as mentioned in the Brochure annexed hereto and hereby agree to abide fully by the terms and conditions and accordingly, put my/our signature on this.

I also undertake that in the event of any information submitted above is found to be fraud, misleading and false in future or in the event of more than one allotment/possession/ownership in favour of my family is detected at any stage in the same locality, from any Govt. Agency, the authority will be at liberty to cancel the allotment and forfeit the entire amount deposited by me at my cost and risk.

19. I/We 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/Aadhar 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/Processing Fees/GST
- (v) Recent Passport size photograph duly attested – 01
- (vi) One cancelled cheque of the applicant (in case opting for refund through NEFT/RTGS).

Specimen Signature

1.

2.

3.

**FULL SIGNATURE OF THE APPLICANT**

**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/We am/are an applicant to the Odisha State Housing Board for allotment of Plot/House/Flat at\_\_\_\_\_on\_\_“as is where is basis and whatever there is ”.
2. That I/We or any of my/our family members do not own or have been allotted any residential house/plot/flat/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.
3. That I/We have not sold/ transferred/ purchased any residential house/plot / flat/ 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.

Executive Magistrate/Notary Public

**ODISHA STATE HOUSING BOARD**  
**ALLOTMENT OF LIG HOUSE/EWS FLAT AT BADAPATRAPALLI, SUNDARGARH, &MUKTAPUR, NAYAGARH**  
**ACKNOWLEDGEMENT RECEIPT**

(Details to be filled up by Applicant except Ref. No.)

**(Allotment Branch Copy)**

Ref. No.

1. Applicant's Name \_\_\_\_\_

2. Type of plot/house/ flat applied: \_\_\_\_\_ at \_\_\_\_\_

3. Details of Deposit:

Particulars	Amount (Rs.)	DD/ UTR NO.	Date
1. E.M.D.			
2. Processing Fee			
3. GST			

4. Kindly quote this reference no. in all your future correspondence

Authorized Signatory

O.S.H.B. Date

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