



(Dully filled, signed and scanned document copy to be uploaded during the request for participation in the e-Auction)

Location of the Plot bidding for : Plot /Flat/ House No _____
at _____

7. Correspondence Details	:	
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Date :

Full signature of the Applicant

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 and whatever there is" basis.
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.
4. That my/ our annual family income from all sources is Rs. _____/-.
5. That I/We undertake to pay the full cost of the plot/house/flat 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.
8. That I/We have neither been selected as a successful bidder in any auction process for plot/house/flat of OSHB nor withdrawn from the process and the allotment has been cancelled due to default in payment.

Identified by me

Advocate

Signature of the Deponent

I/We Sri/Smt.....Aged.....Son/Daughter/Wife of
ShriResident.....
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/ their knowledge and
belief.

Deponent

Executive Magistrate/Notary Public