



GOVERNMENT OF ARUNACHAL PRADESH
OFFICE OF THE DISTRICT FOOD & CIVIL SUPPLIES OFFICER
WEST KAMENG DISTRICT : BOMDILA.

APPLICATION FORM NEW RATION CARD.

1. Name of Application :-
2. Father/Husbands Name :-
3. Occupation of Applicant :-
4. Present address :-
5. Permanent address :-
6. Electoral Numbers :-
7. House/Quarter No. :-
8. Name of dependant family members with age and relationship.

SL.NO.	NAME	AGE	RELATIONSHIP
1.			
2.			
3.			
4.			
5.			
6.			
7.			

8. Surrender Certificate/No Objection Certificate in case of transfer from other district.

9. Inner line permit number and date of validity in case of non tribals.

10. I do hereby declares that information mentioned above are true to the best of my knowledge and I am liable for punishment unser the law in above information is found to be incorrect.

Signature the Applicant.

Certified that details of dependant family members show above has been physically verified on the spot and to be genuine as given below:-

- A. Adult members (above 12 Years) _____
- B. Minor members (below 12 years) _____

For private Employees Seal Signature.

Seal and Signature
Controlling Officer,
(For Govt.Servants)

Per Form Rs.10/-