

ISSUED FREE OF COST BY DISTRICT SOCIAL WELFARE OFFICER KUPWARA

Application form for the grant of Assistance under National Social Assistance Programme

0694

1. IGNOAPS 2. IGNWPS 3. IGNDPS

Tehsil

Mohalla

Attested by
BMO

1. Name of the applicant (in Block Letters)
2. Son/Wife/Widow of
3. Residence
4. Age as on date
5. Monthly income from all the Sources
6. Whether belongs to BPL Category if so attach documentary proof

Thumb Impression/Signature of Beneficiary

Age Certificate By BMO

I have examined

S/o, W/o R/o

& found him/her of Years old.

Place :

Dated :

Seal & Sig. of BMO

Certificate of Disability for IGNDPS by District Disability Committee under CMO.

Nature of Disability

Percentage of Disability

INCOME CERTIFICATE

This is to Certify that the monthly Income of Shri/Smt.

S/o, Wd/o R/o

is Rs. (Rupees)

from all the sources.

Dated :

Seal & Signature of
Tehsildar

It is certified that the applicant falls under BPL Category, BPL Survey No

Seal & Signature