

GOVERNMENT OF NCT OF DELHI
FOOD, SUPPLIES & CONSUMER AFFAIRS DEPARTMENT
K-BLOCK, VIKAS BHAWAN, IP ESTATE, NEW DELHI-110002
APPLICATION FORM FOR NEW RATION CARD/DUPLICATE CARD/MODIFICATION/SURRENDER/TRANSFER

Warning: (i) Furnishing wrong information in this form is an offence (ii) Ration Card shall be issued only for drawl of Specified Article under EC Act.

- | | | | | |
|--|---|--|--|-------------------------------------|
| <input type="checkbox"/> New Ration Card | <input type="checkbox"/> Duplicate Card | <input type="checkbox"/> Name Addition | <input type="checkbox"/> Name Deletion | <input type="checkbox"/> Correction |
| <input type="checkbox"/> Change of HOF | <input type="checkbox"/> Change of FPS | <input type="checkbox"/> Change of KOD | <input type="checkbox"/> Transfer | <input type="checkbox"/> Surrender |

Name of Applicant

Mothers Name

Fathers Name

Husband's/Spouse Name

Nationality Gender Date of Birth Age

UID EID

Address at which New Cards is requested:

House No. Locality Village/Town

Distt . State Pin Code

E-mail Address

Mobile/Tel.No.

Occupation Total Annual Income of Family

Food Category: Wheat Rice **Energy Category:** Kerosene Oil Users Gas Users Old RC No. (If Any)

If Gas Users: Name of person in whose name gas connection issued Consumer No

Name of Gas Company **Name of Gas Agency**

Details of Family members:

S. No	Name (in Capital Letters)	Gender M / F	DOB DD/MM/YY	Age	Name of Mother	Name of Father	Name of Spouse	Relation with HOF	Occupation	Aadhar No.	EPIC No.

Duplicate Card: Ration Card No. FPS Name Lic No

Reason: Lost Damaged Document attached: (i) Copy of FIR (ii) Old Card (iii) Address Proof

Name Addition/Deletion Details:

S. No.	Name	Gender (M/F)	DOB (DD/MM/YYYY)	Age	Mother's Name	Father's Name	Spouse Name	Relation with HOF	Reason	Add/Delete

Documents attached:

Correction Details: Existing

Correction

Change of HOF: Existing HOF

New HOF **Reason**
(Only from the existing member)

Change of FPS: Existing FPS Name

Proposed FPS Name

FPS Lic. No.

FPS Lic. No.

Change of KOD: Existing KOD Name

Proposed KOD Name

KOD Lic. No.

KOD Lic. No.

Transfer details:

New address (within Delhi):

Surrender Details:

Documents attached:

1. I.D. Proof :

2. Proof of residence :

3. Other mandatory document :

Declaration: I do hereby solemnly declare and affirm that:

1. I am citizen of India.
2. None of the above members neither draw ration from Para military forces nor have any Ration Card in Delhi or elsewhere in the country.
3. All the above members are residing or intend to reside in Delhi permanently.
4. I shall use the Ration Card only for drawl of Specified Food Articles and not for any other purpose.
5. In case of any information furnished above is found incorrect, I shall be liable for cancellation of Ration Card and punishment under the provisions of Essential Commodity Act, 1955.

Signature/Thumb impression of applicant-----

Name of Applicant-----

For office use only

FSI Verification Report:

Date of verification

Reference No.

Recommended

Not recommended

If not recommended then reason

Signature of Inspector Name Date

FSO approval report:

Approved Not approved

If not approved then reason

Signature of FSO Name Date

For New Ration Card:

Ration Card No. Date received

Date of Dispatch by Speed Post Reference No.

Delivered Not delivered If not delivered Reason

Signature of DEO

Signature of Inspector

Signature of FSO

Name

Name

Name

Date

Date

Date