

Court Fee Stamp as required

APPLICATION FORM FOR ISSUANCE OF

OTHER BACKWARD CLASSES CASTE CERTIFICATE

Paste Applicant Photo

(Fields marked * are mandatory)

Service Payment Details :

- 1. Service Charges of the kiosk Operator **per Unit** = 8.00
- 2. Printing Charges **per unit** = 10.00
- 3. Scanning Charges **per unit** = 5.00
- 4. The Government fees **per unit** = 30.00
- 5. Depts Charges fee per unit = 2.00

Total 55.00 .

(The amount may vary based on no of printing and scanning page counts)



Applicant's signature / Thumb Impression

Documents Required

Mandatory Documents

Supporting Documents

1. RoR
2. Self Declaration
3. Land Pass Book
4. Any other document in support/claim

Delivery Time Lines ; Estimated Timelines To Process The Application (Expected Date of Delivery) : 30 working Days

Fill all the details in the block letters

Personal Details

Applicant Name* :- _____

Gender* :- _____ Marital Status*:- _____

Date of Birth* :- _____ Age* :- _____

Parents Details

Father Name* :- _____

Mother Name* :- _____

Spouse Details

Spouse Name* :- _____

Relation With Applicant* :- _____

Contact Details

Phone No :- _____ Mobile No :- _____

Email :- _____

Permanent Address :-

Urban

Rural

Permanent Address

District *	:- _____	Sub Division *	:- _____
Tahsil *	:- _____	RI Circle *	:- _____
Block *	:- _____		
GP/ULB	:- _____	Village / Ward* :-	_____
House No/Street Name	:- _____	Post Office	:- _____
Police Station *	:- _____	Pin	:- _____

Submitter Details

Is applicant and submitter are same? * **Yes** **No**

Submitter's Name* :- _____

Relation With Applicant* :- _____

Present Address :-

Urban

Rural

Is Present Address Same as Permanent Address? Yes

No

(If "No" please fill the Present address given below)

Permanent Address

District * :- _____

Sub Division * :- _____

Tahsil * :- _____

RI Circle * :- _____

Block * :- _____

GP/ULB :- _____

Village / Ward* :- _____

House No/Street Name :- _____

Post Office :- _____

Police Station * :- _____

Pin :- _____

Caste Details :-

Religion * :- _____

Caste* _____

Sub Caste/Community :- _____

Occupational Background : _____

Purpose :-

Father Mother & Spouse Other Details

Please select the respective relation (Father / Mother / Spouse) to fill up the details

Father

Mother

Spouse

Constitutional Post:

Designation :

Government Service

Service(Central/State):

Designation:

Scale of Pay, including classification if any

Date of appointment to the Post:

Age at the time of promotion to the class-1 post:

Employment of International Organization

Name of Organization:

Designation:

Period of Service Form:

Period of Service To;

Death/Permanent In-capacitation (Putting an officer out of Service):

Date of Death/Permanent In-capacitation:

Details of permanent In-capacitation;

Employment in public Sector Undertaking

Name of organization; _____

Designation: _____

Date of appointment to the post: _____

Armed Forces including Para-military forces

Designation: _____

Scale of pay; _____

Professional Class(Please indicate whether engaged in Trade, Business and Industry)

Applicant's Occupation/Profession: _____

Property Owners

Agricultural land holding (owned by mother, father and minor children)

Location: _____

Size of holding (Area): _____

Irrigated (type of Irrigated Land)

I _____

II _____

III _____

Unirrigated

IV. Percentage of irrigated landholding to statutory ceiling limit

Under state land ceiling law: _____

V. If land holding is both irrigated/un-irrigated total irrigated land

holding on the basis of conversion formula under state land ceiling law: _____

VI. Percentage of total irrigated land holding to statutory ceiling limits as per (V): _____

Plantation

Crops/Fruits: _____

Location: _____

Area of Plantation: _____

Vacant land and buildings in Urban areas or Urban Agglomeration

Location of property: _____

Details of property: _____

Use to which it is put: _____

Income /Wealth

Annual family income from all Sources (including salaries &

Income from agriculture land): _____

Whether Tax Payer (if yes, a copy of the last 3 returns be furnished): _____

Whether covered in wealth tax act(if yes,Furnish details): _____

Wealth Tax Details: _____

Any other remarks; _____

I, Shri / SmtSon of / Daughter of / Wife of resident of village P.S. District and I certify that the above said particulars are true to the best of my knowledge and belief that I do not belong to the Creamy Layer of S.E.B.C/O.B.Cs. and eligible to be considered for the posts reserved for S.E.B.C/O.B.Cs. In the event of any information being found false or incorrect, or ineligibility being detected before or after the selection, I understand that my candidature/appointment is liable to be cancelled and I shall be liable to such further actions as may be provided under the law and/or rules.

Yes

No

Signature of the applicant