

Application Form for the allotment of staff quarters at ESI Colony, Rohini, Sector 15, New Delhi-85.

S.No.	Particulars				
1	Name of the applicant (in block letters)				
2	Date of the Birth of the applicant				
3	Date of Joining in the Corporation				
4	Designation and place of posting				
5	Name of Drawing and Disbursing officer				
6	Sex (Male/Female)				
7	Marital Status (Married/unmarried)				
8	a. Present Basic Pay & Grade Pay b. Pay scale c. Date of increment				
9	Type of staff quarter applied for (separate application shall be given for separate category of staff quarter)				
10	Belong to SC/ST/PH/OBC Category etc.				
11	Whether wife/husband of the applicant employed (if yes, give details)				
12	Whether presently allotted any staff quarter? If yes details thereof. If surrendered the reasons thereof.				
13	Whether the applicant is having any property in his name or his spouse at the time of application the details may be provided.				
14 Details of family members who will reside in the quarter when allotted and occupied					
S. No.	Name of the Family member	sex	Date of Birth	Relationship	Emp. Status
15.	Whether the applicant has read the allotment Rules	Yes	No		
16.	Whether he/she is ready to comply with the allotment Rules	Yes	No		

Place _____
Date _____

Signature of the applicant _____
Place of posting _____

(For Official Use only)

Forwarded to the Dy. Director(Admn)/Estate Officer ESI Hospital Rohini, Sector 15, New Delhi for further necessary action. The matters regarding allotment of staff quarter like date of appointment, pay, family details etc. have been verified from the service book record and are found correct.

(Signature _____
Designation _____
Official seal _____