GOVERNMENT OF INDIA MINISTRY OF COMMUNICATIONS & I T DEPARTMENT OF TELECOMMUNICATIONS

APPLICATION FORM FOR NON-OFFICIAL (TEMPORARY PASS)

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Part-I (To be filled by the applicant)

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1.	NAME (Block Letters											
		(First	Name)	,	(Mic	idle	Name)		(Sur	Name)	
2.	FATHER'S/HUSBAND'S NAME (Block Letters)		and the second s		the second of							
		(First Name)			(Middle Name)				(Sur Name)			
3.	DATE OF BIRTH											
	## part	рb			M	M			YY			
4.	SEX		M					F				
			(Tic	k ap	prop	riate	Box)					
5.	NAME OF THE FIRM	-									:	
	ASSOCIATED WITH (AS EMPLOYEE, OFFICE BE OR IN ANY OTHER CAPA	ARER								,		
6.	DESIGNATION CONTRACTOR/LABOUR	erend minute system (1949 files) of		go-reb-wr k	سه ۱۳۰ _۰ و استف را نسوا			Angrija Paljura galanda (Aline)		<u>.</u>		
<u> </u>	DAILY WAGER											
7.	OFFICIAL ADDRESS AN TELEPHONE NO.	ND .	and a large of the first street and a large of								1	
8.	RESIDENTIAL ADDRES TELEPHONE NO	S &			, maga anggar maka 1 at 1							
9.	MARK OF IDENTIFICAT	NOF				·				·		
10	PLEASE SPECIFY THE BUILDING(s) FOR WHICE TEMPORARY PASS IS REQUIRED	СН										

11. Detailed justification for issue of a Non-Official Temporary pass (Please give full and convincing justification for issue of a Non-Official Temporary pass along with the following documents.

NOTE:- The following document must be enclosed with the application form.

- 1. Copy of valid contract
- 2. Names of the laboureres specified by the contractor on letter head of the Company/firm.
- 3. Character certificate from a Gazetted Officer.

CERTIFICATE

I certify that the information/answers given by me in part I of the application form are correct.

SIGNATURE OF THE APPLICANT.

Date: Place:

The information—furnished by the application has been verified to be correct.

Under Secretary(T) Tel: 23036300