

FARM NO.3

Sl.No.....

Date of Receipt.....

Registration No.....

APPLICATION FOR CHANGE IN THE FOOD CARDS

Warning :- It is an offence punishable with imprisonment and/or fine to make false statement in this application.

1. Name of the Head of Family.....
2. Present Address.....
3. (a) Food Card No.....
(b) F.P.S. No..... Units as on card
Cereals.....
(c) Registration No..... Sugar.....
- i) Change in Age
ii) Change of address within Circle
iii) Change of H.O.F.
iv) Change of F.P.S.
v) Change in mode of drawal
vi) Change of category
vii) For correction of inaccuracy in the Food Card.

Note:- Information against item No.1 to 3 is to be given in each case and Para4 (I to vii) whichever is applicable.

4. I) Change in age

Sl. No.	Name of the person whose age is to be changed	Age as recorded on the food card	Date of birth and present age	Relationship with H.O.F.	Remarks.

ii) Change of Address (within same Circle)

Old address	New address where shifted	Date of shifting	Remarks.

iii) Change of H.O.F.

Name of H.O.F. (Old)	Name of new H.O.F.	Age of new H.O.F.	His/her relation with old H.O.F.	Reason for change

iv) Change of FPS

v) Change of mode of drawal

vi) Change in category

New F.P.S. No.	Reason for change	Present	Change required	Present	Change required	Place & State to which belong
		Weekly Bi-Weekly Monthly	Weekly Bi-Weekly Monthly			

vii) Correction of inaccuracy in food card

inaccuracy if any	correction to be made

Declaration:- I shall be liable for punishment under the Delhi Specified Food Articles (regulation of Distribution) Order, 1968 if above information is found false or incorrect.

Signature/T.I. of Head of Family

Counterfoil Form

1. Name of the head of the Family
2. Date of application
3. Regd. No. of application

Signature of Counter Clerk

(FOR OFFICE USE ONLY)

1. Date on which change made in food card.....
2. Nature of change made in food card No.....registered with FPS No.....
Regd. No. necessary amendment has also been carried out in the F.P.S. vide register of the Circle.

Signature of IHQ/FSO

Signature of Counter Clerk

I/We have received my/our food card after necessary correction.

Date

Signature/T.I. of Card Holder

Inspector's post-verification report

Visited on.....and contacted Shri.....H.O.F./Other members of the family/neighbourer holding food card No..... registered with FPS No..... The above mentioned change has been post verified by me and is found to be correct/incorrect on account of the following reasons and necessary rectification has been done/requires to be done in the food card.

Order of F.S.O.

Signature of Inspector.....

Full Name.....

Date.....

Signature of I.H.Q./F.S.O.....

Full Name.....

Date.....