

Form 1A (see rule 3)

Application form for availing Public Grievance Services

Language in which the service is required : English Malayalam

e-District Registration Number if any:

Part I (General Details for one time registration in e-District portal)

1. Name of person for whom service is sought *

2. Gender (M/F) *

3a. Age *: 3b. Date of Birth(DD-MM-YYYY)

Details	4. Present Address	5. Permanent Address
House No *:		
House Name *:		
Street / Place *:		
Post Office *:		
PIN code *:		
Village *:		
Taluk *:		
District *:		
Name of Local Body *:		
Type of Local Body * <input type="checkbox"/> Grama Panchayat <input type="checkbox"/> Municipality <input type="checkbox"/> Corporation		

6. Name of Father *: **OR** Name of Mother *..... **OR** Name of Spouse *..... **OR** Name of Guardian *:.....

7. Phone (Res.): Code:..... Number: 8. Mobile:

9. Email:

10. Ration Card No: 11. Driving License No:

12. Election ID Card No 13. Passport No:

14. Adhar No (UID) :

15 SSLC Registration Number: / Year.....

Part II K (a) - Grievance details

Grievance Program (Departmental / JSP/Sutharyakeralam)	
Subject of Grievance	
Name of Department	
Name of Office	
Details of Grievance	

Part II K (b) - Previous Reference details (if any)

Reference Number	
Date	
Name of the Department of the Reference Application.	
Name of the Office of the Reference Application.	
Remarks	

Enclosures:

DECLARATION

I do hereby certify that the particulars mentioned above are complete and true to the best of my knowledge and belief. I also agree that any loss to Government due to the Incomplete or Incorrect information provided above may be recovered from my movable/ immovable assets. I also agree that the grievance reply so issued and any benefits accrued in lieu of that stands nullified on proved mis-representation.

Place :

Signature :

Date:

Name of Applicant :

Relationship with the person for whom service is applied for
:
(Relationship to be specified if the above declaration is signed by Parent
/ Guardian / Authorized Representative)