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5	owned or regis commencing of specified eithe Note: 1. Applit advertisement date of advertit Kshetriya Vitra	etered lease on any date or in the advir cants havir will also be sement. The k, the loca location. 2	of the plot(s) of land a for minimum 15 year from the date of advertisement or in the agregistered lease of a considered provide the offered land will be tion for Godown land. In case land belong x -2.	ars in the name of a vertisement upto the Corrigendum (if any leed commenicng or ed the lease is valid for e verified during Field should be within the	pplicant / n last date o ) and mee n any date for a minim ld Verificati e Village / o	nember of submissiting the nor or o	'Family Ui ion of app rms speci- e date of of 15 yea e of Durga /illage limi	nit' lication as fied.  rs from the im ts as per
	Name(s) of the owner of Land / Leaseholder	hip with	Date of registration of sale deed/gift deed/ registered lease deed/ date of mutation	Address of the location of the land for LPG Godown	Khasra No./ Survey No.	Dimens land Length in metre	d *# Breadth	Distance from location in km
			D D M M Y Y					
	dimension of 2 8000 Kg. LPG dimension of 2 5000 Kg. LPG minimum dime capacity of 300 also be provide other applicant	25 M X 30 I 2.(2) If you a 2.1 M X 26 I (1) If you a ension of 1: 00 Kg. LPC ed, if requiration t for this location	ng for Sheheri or Ru M or the constructed are applying for Gran M or the constructed are applying for Durg 5 M X 16 M or the co 6 (2) In case the app red in additional shea cation and in case it all such applications	LPG Godown should hin Vitrak, the plot of LPG Godown should ham Kshetriya Vitrak constructed LPG Godulicant has more than let. (3) The land show is found at any stage	d have a m f land for G d have a m , the plot of own should the one la wn above s e that the s	ninimum sto odown sho ninimum sto land for G I have a m nd the deta hould not b ame land i	orage cap ould have orage cap odown sh inimum st ails of the oe offered l	acity of minimum acity of could have orage same can by any by more

# Provide dimensions of the plot in metre (M) only.

\* Provide dimensions of the plot that will be used for proposed godown out of the total land owned.

6	If you are applying for for Godown or showrd belongs to member of	om at the	adve	ertise	d loc	atio	n (ov	vnec	d or	leas	ed	for	mir	nmu								
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7	Additional Information	on : (To b	e fille	ed in	by \$	SKO	Dea	alers	5)													
a.	Name of the SKO Deal	ership																				
b.	Location																					
C.	District																					
d.	State																					
e.	Category of dealership	)												Ш								
f.	Name of the Oil Compa	any																				1
g.	Constitution of the dealership																					
h.	Average monthly SKO advertisement for this			_	•	cedi	ng 1	2 mc	nth	s pr	ior	to t	he r	non	th c	of			Av. I	(L pe	r mtl	1.
8	Additional Information	: (To be fil	led i	n by l	NDNI	E LP	G Re	taile	rs /	Dist	rib	uto	rs)									
a.	Name of the LPG NDN Retailer / Distributor	E																				
b.	Location																					
C.	District		$\vdash$		$\dagger \dagger$	$\dashv$	+	1		$\exists$	$\dashv$			$\vdash$						$\dashv$		
d.	State																					
e.	Name of the Oil Compa	any												П							$\neg$	

#### 9 DECLARATION BY THE APPLICANT.

I am aware that eligibility for LPG distributorship will be decided based on the information provided by me in my application. On verification by the Oil Company if it is found that the information provided by me is incorrect/ false/misrepresented then my candidature will stand cancelled and I will be declared ineligible for LPG Distributorship.

I also confirm that if selected, I will present all the supporting documents in original in respect of the information given by me in this application and failure to present these documents in original will result in cancellation of selection.

I am fully aware that if I am unable to provide LPG Godown duly approved by the Office of Chief Controller Of Explosives, Petroleum & Explosives Safety Organisation and / or Showroom as per the Oil Company's standard layout, then the allotment of distributorship made to me will be cancelled.

I am aware that in case the same land offered by me in my application for provision of LPG Godown and showroom facility is also offered by any other applicant, for the same location, my candidature for LPG Distributorship will be rejected.

I am fully aware that I will not be appointed as LPG distributor if I am employed. I shall have to resign from the service and produce proof of acceptance of my resignation from my employer before issuance of Letter of Appointment. Failure to do so shall lead to cancellation of my selection.

I am also aware that I cannot draw any salary / perks / emoluments (other than the pension received) from the state / Central governments and I have to forego these benefits at the time of appointment as LPG Distributor. Failure to comply to this condition will lead to cancellation of my selection.

I am fully aware that I have to personally manage the operation of LPG Distributorship.

I am aware that if selected in the draw, I have to provide all weather motorable approach road to the Godown within the timelines given in the Letter Of Intent and an undertaking, as per the prescribed format in the form of a Notarized affidavit will have to be provided at the time of Field Verification Of Credentials (FVC).

I am aware that if selected, I have to deposit 10% of the applicable security deposit before the FVC is carried out failing which my candidature will be cancelled. In case, if it is found the information given by me is incorrect / false / misrepresentated then my candidature is laible to be cancelled along with forfeiture of the amount deposited before FVC.

That, if selected, I undertake that I will be depositing an interest free Security deposit as per the policy of the Corporation.

I have read the terms and conditions applicable for the LPG Distributorships mentioned in the advertisement / Brochure and confirm that I fulfil the eligibility criteria for the LPG distributorship I have applied for in this application.

That, if selected, I undertake that I will submit at the time of Field Verification Of Crendentilas( FVC), duly notarized affidavits, for all the self declarations made in my application with regard to selection of LPG Distributorship

The checklist at Point No. 10 which is a part of this application has been verified by me before the submissiion of this application form and the same is true and correct

ation form and the same is true and correct
<u>Undertaking</u>
daughter of /son of/ wife ofhereby confirm that the information given above is true and Any wrong information /misrepresentation/ suppression of facts will make me ineligible for this LPG orship.
Signature of applicant
d d - m m - y y y Name of applicant (Name in block letters)

10. Che	ck list for App	plicants								
	Note : Tick (√)	'Yes' or 'No' as applic	able. (All points are Ma	ndatory)						
Pt. No.			Document / Activ	ity to be c	checked					
i		ed DD No I Company and payab	dated le at	draw	n in favour of	Yes	/	No		
ii	I have pasted	my recent photograph	h and signed across the	e photogra	ıph.	Yes	/	No		
iii	I have enclose	ed copy(ies) of eligibili	ity certificate (s) for the	category a	as applicable	Yes	/	No	/	NA
iv			original as per format gi			Yes	/	No		/
V	I have enclose applicable	ed self declaration in o	original as per format gi	ven in App	pendix - 2, as	Yes	/	No	/	NA
vi	I have enclose Appendix 4 as		original for joint owners	/ joint less	see of land as per	Yes	/	No	/	NA
vii		ed self declaration in onts as per Appendix - 3	original - declaration / u Bc.	ndertaking	g as applicable, for	Yes	/	No	/	NA
viii	I confirm that	my age as on date of	application is as per the	e eligibility	criteria.	Yes	/	No	/	NA
ix	I confirm that	I am having minimum	educational qualification	on as per t	he eligibility	Yes	/	No	/	NA
Х	of the 'Family the same mee No.1.23 of the	Unit' ** / my parents a ets the eligibility condit	for Godown/ Godown, and Grand parents (both tions including the own so refer to Item No. 5 o autorships)	h maternal ership crite	l and paternal) and eria as per Clause	Yes	/	No	/	NA
xi	member of the paternal) and as per Clause	e 'Family Unit' ** / my the same meets the ee No.1.23 of the Broch	for Showroom/ Showro parents and Grand pare eligibility conditions incluing ure (please also refer to ing for LPG Distributors	ents (both uding the o o Item No.	maternal and ownership criteria	Yes	/	No	/	NA
xii		i have signed the undate and Place.	ertaking at the end of th	ne filled in	application form	Yes	/	No	/	NA
xiii	I confirm that	i have numbered and	signed all pages of the	Application	n.	Yes	/	No	/	NA
xiv	Total number	of pages of the applic	ation including attachm	ents is	numbers.	Yes	/	No	/	NA
XV	I confirm that have been en		mplete in all respects a	nd the req	uisite documents	Yes	/	No	/	NA
# Where	Date	Place	Name of applica		nention in the check	Signa			icab	ıle"

Family Unit for multiple dealership / distributorship norm means the following:

i) In case of married person/ applicant, 'Family Unit' will consist of individual concerned, his/her Spouse and their unmarried son(s)/daughter(s).

ii)In case of unmarried person/ applicant, 'Family Unit' will consist of individual concerned, his/her parents and his/her unmarried brother(s) and unmarried sister(s).

iii) In case of divorcee, 'Family Unit' will consist of individual concerned, unmarried son(s)/unmarried daughter(s) whose custody is given to him/her.

iv) In case of widow/widower, 'Family Unit' will consist of individual concerned, unmarried son(s)/unmarried daughter(s). Family Unit for ownership of land for Godown/Showroom means Family unit as defined in multiple dealership / distributorship norm of eligibility criteria)/ parents (includes Step Father/Step Mother), grandparents (both maternal and paternal), Brother/Sister (including Step Brother & Step Sister), Son/Daughter (including Step Son/Step Daughter), Son-in-law/Daughter inlaw of the applicant or the spouse (in case of married applicant).

	SELF DECLARATION Appendix - 1 (page 1 of 2)
	(TO BE TYPED ON PLAIN PAPER)
l,	son/daughter/wife of Age
	years residing at do hereby solemnly affirm and say as under :
1 2 3 4	That I am an Indian Citizen and residing in India.  That my date of birth is ddd/mmm/yyyyyy ' (in words
	That I am married and name of my spouse is That neither I nor my spouse, unmarried son(s)/unmarried daughter(s) have dealership/ distributorship or hold letter of Intent for Retail Outlet or SKO-LDO dealership or LPG distributorship or RGGLV of any PSU Oil Company:  OR
	That I am widow/widower . That neither I nor my unmarried son(s)/unmarried daughter(s) have dealership/distributorship or hold letter of Intent for Retail Outlet or SKO-LDO dealership or LPG distributorship or RGGLVof any PSU Oil Company:
	OR
	That I am divorcee . That neither I, nor unmarried son(s)/unmarried daughter(s) (whose custody is given to me) have dealership/ distributorship or hold letter of Intent for Retail Outlet or SKO-LDO dealership or LPG distributorship or RGGLV of any PSU Oil Company:
5	That I hereby confirm that none of my family members, as defined in brochure are employees of Oil
6	Marketing Companies That I am of sound physical and mental health.
7	That I have never been convicted nor charges have ever been framed against me by any Court of Law for any criminal offences involving moral turpitude and/or economic offences (other than freedom struggle).
8	That I hereby confirm that I was never a signatory to dealership/distributorship agreement of any PSU Oil Company, which was terminated for proven malpractices and / or for violations of provisions of the Marketing Discipline Guidelines. I also confirm that I have not resigned from sole proprietorship of any dealership / distributorship of any PSU Oil Company in order to transfer the dealership / distributorship in favour of my family member/s (as defined in the dealer / distributor Selection Guidelines).
9	For Applicants applying under the category of SKO dealers* (a) That I am the sole proprietor of SKO dealership of (OMC name) in the Name & Style of at (location) opertaing below an average allocation of 75 KL of SKO per month during the immediate preceding 12 months prior to the month of advertisement for the LPG Distributorship.
10	<ul> <li>(b) That I have not been penalized for violation of Marketing Discipline Guidelines within last 5 years preceding the date of advertisement and /or there are no proceedings pending against my Dealership under Marketing Discipline Guidelines, Dealership Agreement, Kerosene Control Order or ESMA.</li> <li>(c) I am aware that if I am selected for the LPG distributorship, I will have to surrender my SKO dealership before being appointed as LPG Distributor by IOC/BPC/HPC.</li> <li>For Applicants who are having NDNE retailer/distributorship or holding LOI of NDNE retailer/distributorship*</li> </ul>
	(a) That I or a member of my Family Unit am/is having NDNE retailer/distributorship or holding Letter of Intent of NDNE retailer/distributorship of (OMC name) at location(s).
	(b) I am aware that if I am selected for the LPG distributorship, I/my Family Unit member will have to surrender the NDNE retailer/distributorship or LOI held in my name / Family Unit member before being appointed as LPG Distributor by IOC/BPC/HPC.
11	I am aware that in case it is detected at any stage that the same piece of land for LPG Godown/ Showroom offered by me in my application for provision of LPG Godown/ Showroom facility iwas also offered by any other applicant for the same location, then my candidature for LPG Distributorship will be rejected/ the Letter of Intent will be withdrawn/ Distributorship, if already appointed, shall be terminated.  * Strike off whatever is not applicable.

	SELF DECLARATION Appendix - 1 (page 2 of 2)
12	That if any information/ declaration given by me in my application or in any document submitted by me in support of application for the award of the LPG Distributorship or in this self declaration is found to be untrue or incorrect or false, then Indian Oil Corporation Ltd.*/ Bharat Petroleum Corporation Ltd. */ Hindustan Petroleum Corporation Ltd. * would be within its rights to withdraw the Letter of Intent/ terminate the Distributorship (if already appointed) and that I would have no claim, whatsoever, against the Corporation for such withdrawal/ Termination.  * Strike off whtaever is not applicable.
13	I am aware that if I am selected in the Draw for LPG Distributorship, I will have to convert this declaration into a Notarized affadavit prior to commencement of the Field verification of credentials.  * Strike off whatever is not applicable.
	I hereby verify that what has been stated above is true and correct to the best of my knowledge and nothing material has been concealed therefrom.
	Thisday of20 Signature of person making Self Declaration
	(Name in block letters)

	, <del></del>		(TO BE TYPE	RATION ED ON BLANK PAPER )			ppendix	- 2
ı	-	=	amily member as de		criteria oth	er than a	pplicant)	
ı Age	years reside	ent of	Son/w	_do hereby solemnly	affirm and	say as ur	nder:-	
1	That I am unma (Mr/Ms) IOC*/BPC*/HPC	rried and m	ny father*/mother*/un (location news paper date	nmarried brother* / u (name) has app n) under '	nmarried si lied for LPC _' category	ster* 3 distribut	orship of	ement
	(Mr/Ms) IOC*/BPC*/HPC made in * Strike off whic	C* at	• •	(name) has app n) under ' ed	lied for LPC _' category 	G distribute against tl	orship of ne advertis	ement
2			singly/ jointly in my r alongwith the demar				applicatio	n form.
	Godown/ Showroom	Names of the owner(s)/	Date of registration of sale deed/gift deed/ registered	Khasra No./Survey No.	Total Dim the plot	ension of of land	land demarc	s of piece of as per ated plan
		Lessee(s)	lease deed/ date of mutation		Length in metre	Breadth in metre		Breadth in metre
	(a)	(b)	(c)	(d)	(€	·)		(f)
			D D M M Y Y					
3 (a)	above applicant That in case he	/she is sele LPG godow	e provided in case a cted for LPG distribu n / showroom (as re ot is offered)	itorship, I confirm tha	at I do not h	nave any o	objection f	or the
	construction of the particulars g	the LPG go given at (f) a ase a piece	cted for LPG distribution down / showroom (as per the demarcation (portion) out of the pationed in (f) )	storship, I confirm that s required by OMC) on on the site plan e	at the abov	re mention signed by	ned land, p y all co-ow	lot as per ners.
3 (b)	•		aid plot of land/ piece distributorship locat			not been d	offered by I	me to any
4 This	material has be I am aware that declaration into	en conceale if the applic a Notarized	s been stated above ed therefrom. cant is selected in the d affadavit prior to co day of	e Draw for LPG Dist Immencement of the	ributorship,	I will have	e to conve	rt this
				Signature Name Relationship				

Appendix 3a

#### STANDARD FORMAT FOR SC/ST CATEGORY CERTIFICATE

Note: A candidate who claims to belong to one of the Scheduled Castes / Scheduled Tribes should submit in support of his / her claim, a certificate in original, with a copy thereof in the form given below, issued at any time by a competent authority # notified by the Government of India, of the district in which his parents (or surviving parents) ordinarily reside who has been designated by the State Government concerned as competent to issue such a certificate. If both his parents are dead, the officer signing the certificate should be of the District in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. In case of any doubt about the genuineness of the certificate, the same may be got verified through the concerned District Magistrate / Deputy Commissioner.

such a certificate. If both his parents are dead, the officer signing the certificate should be of the District in which the candidate himself ordinarily resides otherwise than for the purpose of his own education. In case of any doubt
about the genuineness of the certificate, the same may be got verified through the concerned District Magistrate / Deputy Commissioner.
The form of the certificate to be produced by Scheduled Castes / Scheduled Tribes candidates.
This is to certify that Shri / Smt. / Kum* son / daughter* of of village / town * in District / Division* of the State / Union Territory* of belongs to the Caste / Tribe and his / her religion is which is recognised as a Scheduled Caste / Scheduled Tribe under the Scheduled Castes / Scheduled Tribes lists (modification) order 1956* read with the Bombay Re-organisation Act, 1960 and the Punjab Reorganisation Act 1956*.
The Constitution (Jammu & Kashmir) Scheduled Castes Order, 1956* The Constitution (Andaman & Nicobar Islands) Scheduled Tribes Order, 1956* The Constitution (Dadra & Nagar Haveli) Scheduled Castes Order, 1962* The Constitution (Pondicherry) Scheduled Castes Order, 1964* The Constitution (Scheduled Tribes) (Uttar Pradesh) Order, 1967*
The Constitution (Nagaland) Scheduled Tribes Order, 1970*
Place : Signature :
Date: Designation:
State / Union Territory*
* Please delete the words which are not applicable.
Note: The terms "Ordinarily reside(s)" used here will have the same meaning as in Section-20 of the Representation of the People Act, 1950.
# Officers competent to issue Caste / Tribe certificates.
i. District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector, 1st Class Stipendiary Magistrate / City Magistrate *** Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.
ii. Chief Presidency Magistrate / Additional Chief Presidency Magistrate, Presidency Magistrate.
iii. Revenue Officers not below the rank of Tehsildar.
iv. Sub-divisional officer of the area where the candidate and / or his family normally resides.
v. Administrative / Secretary to Administrator / Development Officer (Lakshadweep).

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Appendix - 3c

#### Declaration/undertaking - for OBC Candidates

	(TO BE TYPED ON PLAIN PAPER)	iles
l, s	son/daughter of Shriresident of village/town/city of State / Union Territory of	
	e community which is recognized as a Backward Class for the purpos overnment of India, Ministry of Social Justice and Empowerment's Resol	se of reservation in services under
(Cr	cdated*. It is also declared that I decreamy Layer) mentioned in Column 3 of the Schedule to to the Government & Training O.M. No. 36012/22/93-Estt.(SCT) dated 08/09/93 as a	ent of India, Department of
10	· , ,	Signature of the Candidate)
Pla	ace :	
Dat	ate:	
	details of Resolution of Government of India will have to be furnished, in woned as OBC	hich the caste of the candidate is
Note	e:	
a. b.	Declaration/undertaking not signed by Candidate will be rejected.  False declaration will render the applicant liable for rejection of application	on/candidature at any time.
C.	I am aware that if I am selected in the Draw for LPG Distributorship, I will undertaking into a Notarized affadavit prior to ommencement of the Field	

## (PRESCRIBED FORMAT FOR 'PH'CATEGORY APPLICANTS)

-3d

a a	APPENDIX
(For office use only)	
Date: Place:	
Signat	ture of issuing authority Stamp
Form-II	
Disability Certificate (In cases of amputation or complete permanent paralysis and in cases of blindness) (See rule 4)	of limbs
(NAME AND ADDRESS OF THE MEDICAL AUTHORITY I CERTIFICATE)	SSUING THE
	Recent PP size Attested Photograph (Showing face only) of the person with disability
Certificate No. Date:	
This is to certify that I have carefully examined Shri/Smt./Kum	
Birth (DD / MM / YY) Ageyears, male/female Reg Nopermanent resident of House No StreetPost Office District	Ward/Village/
A) he/she is a case of:	
<ul><li>locomotor disability</li><li>blindness</li></ul>	
Please tick as applicable)	

PAGE 10/2

(B) the diagnosis in his/her	case is	_
(A) He/ She has	%(in figure) nent/blindness in rel	percent (in words) ation to his/her(part of body) as per
2. The applicant has submitt	ed the following do	cument as proof of residence:-
Nature of Document	Date of Issue	Details of authority issuing certificate
	CONTRACTOR OF SERVICE OF SECURE .	de la company de
		(Signature and Seal of Authorised Signatory of notified Medical Authority)
Signature/Thumb impression of the		
person in whose		
favour disability certificate is		
issued.		ž.

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### PRESCRIBED FORMAT FOR 'PH' CATEGORY APPLICANTS

APPENDIX-3d

#### Form-III

Disability Certificate
(In case of multiple disabilities)
(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE
CERTIFICATE)
(See rule 4)

Recent PP size
Attested
Photograph
(Showing face
only) of the person
with disability

Cei	rtificate No.		Date:		
Thi	s is to certify that	we have carefully	examined		
Shr	1/Smt./Kum.				/son/wife/
	ghter of Shri				Date of
	th (DD / MM / Y	Y)A		years, male/female	
No.	gistration No		pe	rmanent resident of Hou	ise
Off		Ward/Village			Post
			District	State	, whose
pno	tograph is affixed	above, and are satis	sfied that:		
S. No.	Dicability			ty in the table below:  Permanent physical i disability	mpairment/mental
1	Locomotor disability	@	The state of the same recently. In the same of the		The second secon
2	Low vision	#	t in the second of the second	Control to the control to the control of the contro	Charles and a second of
3	Blindness	Both Eyes	Comment Special Special	DEMONST THE COMPLETE TANDANCE CONTRACT.	er i's manual was a scenario
1	Hearing impairment	£		The second secon	(P - Dames) - room room or room
5	Mental retardation	X	A CONTRACTOR OF THE PROPERTY O	Security Securitaries organization in	
,	Mental-illness	X	Commence was	White the constant of the State of the state of	

Page 1 82

In figures:-	percent	
		percent
2. This condition is progres	ssive/ non-progressive/ likely	to improve/ not likely to improve.
3. Reassessment of disabili		improve.
(i) not necessary,		
Or		
(ii) is recommended/after_shall be valid till (DD / MM	yearsm	nonths, and therefore this certificate
@ - e.g. Left/Right/both ar		
# - e.g. Single eye/both eye	8	
£ - e.g. Left/Right/both ear	s	
	ed the following document as	proof of residence.
Noture - CD	8 and the	Details of authority issuing certificate
Nature of Document	Date of Issue	Details of authority issuing certificate
The second of the second or the		Name and seal of the
	to compare the contract of the contract of pro-	1
Name and seal of Member  Signature/Thumb impression of the person in whose favour disability certificate is		Name and seal of the
Name and seal of Member  Signature/Thumb impression of the person in whose favour disability certificate is issued.		Name and seal of the
Name and seal of Member  Signature/Thumb impression of the person in whose favour disability certificate is		Name and seal of the
Name and seal of Member  Signature/Thumb impression of the person in whose favour disability certificate is issued.		Name and seal of the Chairperson
Name and seal of Member  Signature/Thumb impression of the person in whose favour disability certificate is issued.		Name and seal of the Chairperson

Name of Location\_\_\_\_\_

## PRESCRIBED FORMAT FOR 'PH'CATEGORY APPLICANTS

APPENDIX-3d.

#### Form-IV

Disability Certificate (In cases other than those mentioned in Forms II and III)

# (NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE) (See rule 4)

Recent PP size Attested Photograph (Showing face only) of the person with disability

Се	rtificate No.	Γ	Date:				
SIII	I/Smt./Kum.	t I have carefully ex	amined				
wif	e/daughter of Shr	i				SOI	
Bir	th (DD/MM/Y		ge	voore male	/C- 1		_ Date of
Reg	gistration No.		nanent resid	years, male	remaie		
No.		Ward/Village	/ Street	ient of Hou	se	-	
Off			D:	ct	City	Post	
pho	tograph is affixed	above, and am satis	fied that he	/sho is a se	State		_, whose
01		disabilita	Lin/ham				
imp	airment/disability			alina of per	centage phys	sical	
the i	elevant disability	has been evaluated in the table below:-	as per guid	ennes (to b	e specified) a	and is show	n against
	-						
S.	* * * #	Affected Part of		To these seems	emerces survival as		
No.	Disability	Body	Diagnosis	Permane	nt physical i disability	mpairment	t/mental
1	Locomotor disability	@	The second of th	PARTIES 2 494/4 TANABANA	disability	(111 %)	TOWNER W. F. COMPANY
2	Low vision	#				1 1 100 100	
:3	Blindness	Both Eves	: 			77 7 mm 2 22	
4	Hearing				marin committee on the same	er men in an	
4	impairment	£					
5	Mental	N7	***************************************		ment of the model of the second of the second	* (31	
5	retardation	X	1				
6	Mental-illness	X			TO DESCRIPTION OF THE PARTY OF THE	3 10 men 10 man	
		The state of the s		make we are a second of the contract			1
Pleas	se strike out the d	inalities					the state of the state of

(Please strike out the disabilities which are not applicable.)

page 10/2

Name	of Lo	cation	
valle	UI LU	Caucii	

2. The above condition is progressive/ non-progressive/	likely to improve/ not likely to improv
3. Reassessment of disability is:	, so improv
(i) not necessary,	
Or	4 6
(ii) is recommended/ afteryearsmore be valid till (DD / MM / YY)	nths, and therefore this certificate shall
@ - e.g. Left/Right/both arms/legs	
#- e.g. Single eye/both eyes	
£ - e.g. Left/Right/both ears	
4. The applicant has submitted the following document as	proof of residence:-
Nature of Document Date of Issue	Details of authority issuing certificate
(Authorised Si	ignatory of notified Medical Authority) (Name and Seal)
	Countersigned
	{Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital, in case the certificate is issued by a medical authority who is not a government servant (with seal)}
Signature/Thumb Impression of the person in whose favour disability certificate is issued.	
Note: In case this certificate is issued by a medical authority shall be valid only if countersigned by the Chief Medical Office.	who is not a government servant, it ficer of the District."
*	
	Pag

Name of Location\_\_\_\_\_

Page 17 of 23

(Signature of applicant)

			Appendix - 3
STA	ANDARD FORMAT FOR PARAMILITAI	RY/POLICE/GOVERNMENT/PSU PER	SONNEL CATEGORY
	rtificate is to be given by Head of the Off Government on Official Letter-Head of the		•
7-6	STO ARTY CHOCKEN, INC. 1		
ketere Date	ence No.		
Jale	Eligibility Cartificate for Para	military/Police/Government/PSU Pe	reannal Catagony
	Engionity Sertificate for Fara	illinitary/r once/Governmenor 30 re	ersonner category
	# This is to certify that Mr/Ms	who was working in this office as_	had passed
	away on (date)at (Place)		
	gallantry award)in recognition		
	Mr/Ms ( name of applicant)	( relationship	) was dependent on
	Mr/Msas per our reco	ords.	
		OR	
	# This is to certify that Mr /Mrs		
	ashad passed away on (d	date)while in acti-	on at
	(Place)		
	Mr/Ms ( name of applicant)	( relationship	) was dependent on
	Mr/Msas per our reco	······································	_ ) was dependent on
	winningas per our rece		
	# This is to sent the t BA-(BA- /	OR	1)
11	# This is to certify that Mr/Ms ( name of		was working in
	our organization_and has been disabled	on (date)while performing du	ities at (place)
	<del></del>		
		OR	
V	# This is to certify that Mr /Mrs		was working in this office
	ashad passed away on (date)		9
		•	
	Mr/Ms ( name of applicant)	( relationship	) was dependent on
	Mr/Msas per our reco	ords.	
	W == 1	OR	
	# This is to certify that Mr/Ms		and has been
	disabled in peace on ( date)	due to attributable causes.	
		Sin a phin was in the	
	# Delete if not applicable.		
	Attested Signatures of applicant		
	Place	Constant to the second to the second	
	Place:	Signature :	
	Detail.	Name :	
	Date :	Designation:	
		Office Seal :	
		Office Seal .	

Appendix - 4 Undertaking for offer of land from member of the family unit/parents/ grandparents (both paternal & maternal) of the applicant and third party – All the joint owners of the land (except the applicant) have to submit this affidavit individually including the member of the family unit/parents & grandparents (both paternal & maternal) of the applicant. (TO BE TYPED ON PLAIN PAPER) ,Son/Daughter/wife of \_\_\_\_\_\_ years resident of do hereby solemnly affirm and say as under:-That I, Shri/Smt\_\_\_\_\_, own a piece of land jointly or Jointly Leased, bearing Gatta/ Khasra/Survey No.\_\_\_\_ at\_\_\_ Taluka/Tehsil per the following details: \* Land for Godown: Khasra no./ Gatta Dimension of Land Date of registration No./Survey No. Total Dimension of offered as per of Sale Deed / Gift Names of the Joint Owner(s) Demarcated Plan Total the plot of land Deed / Lease / Joint Lessee Dimension of (\_\_\_metres X ( metres x Deed / Date of the plot of land metres) metres) Mutation (\_\_\_\_metres x\_\_\_\_metres) \* Land for Showroom : Khasra no./ Gatta Dimension of Land Date of registration No./Survey No. Total Dimension of offered as per of Sale Deed / Gift Names of the Joint Owner(s) Demarcated Plan Total the plot of land Deed / Lease / Joint Lessee Dimension of ( metres x ( metres X Deed / Date of the plot of land metres) metres) Mutation (\_\_\_\_metres \_metres) Strike out w hichever is not applicable That Shri/Smt has applied for LPG Distributorship of IOC\*/BPC\*/HPC\* at (location) under 2 \_\_\_ ' Category against the advertisement appeared in\_\_\_\_\_ news paper dated That in case he/she is selected for LPG Distributorship, I confirm that I do not have any objection for the construction of the LPG godow n and/or show room (as required by OMC) at the above mentioned location, as per the demarcation on the site plan enclosed, duly signed by all the co-owners. 3 I hereby verify that what has been stated above is true and correct to the best of my knowledge, and nothing has been concealed there from. I also confirm that I have not offered this piece of land to any other person for the above purpose. I/ We am/are aware that if the applicant is selected in the Draw for LPG Distributorship, I will have to convert this declaration into a Notarized affadavit prior to commencement of the Field verification of credentials of the applicant.. This \_\_\_\_\_\_day of \_\_\_\_\_month of \_\_\_\_year.

Name(s)

Signature

	General Instructions to the candidat	tes applying for LPG Distributorship.
Item No	Instructions	Supporting Documents to be provided by applicant
1 (a. to k.)	Write the particulars of the location for which application is made as per advertisement.	For Point No. 1 e Applicants applying for locations advertised under 'SC', 'ST', 'OBC', 'SC(W)', 'ST(W)', 'OBC(W)', 'SC(GP)', 'ST(GP)' and 'OBC(GP)' category/sub-category should attach copy of their Eligibility Certificate of the respective category i.e. "SC", "ST" and "OBC" from the Competent Authority. Applicants applying for locations advertised under subcategory "SC(PH)", "ST(PH)", "OBC(PH)" should attach copy of their Eligibility Certificate from the Competent Authority of the respective category i.e. "SC", "ST", "OBC" and also their eligibility certificates in the prescribed format for Physically Handicapped (PH). Further, applicants applying for locations advertised under sub-category 'SC(GP)', 'ST(GP)', 'OBC(GP) and Open (GP)' should note that they should submit the eligibility certificate for 'GP' sub-category, as applicable from the respective competent authority, on the date of draw.
2 (a. to d.)	Write the particulars of the application fee being submitted as per type of distributorship / category for the location for which application is made as per advertisement.	Demand Draft / Pay Order of the Application fee in favor of the full name of the Oil Company payable at the city of the office of the Oil Company where the application is to be submitted.
3 (a. to q.)	Personal Details are to be filled and Declaration as per format given in <b>Appendix -1</b> to be submitted	For Point No. 3 (m), Proof of Date of Birth like School Leaving Certificate/Birth Certificate/Passport / PAN Card.
		Copy of certificate of passing X <sup>th</sup> Standard or equivalent
4	For candidates applying under GP Category only: Tick the applicable box	Applicants applying for locations advertised under 'SC (GP)', 'ST(GP)' and 'OBC(GP)' category/sub-category should attach copy of their Eligibility Certificate of the respective category i.e. "SC", "ST" and "OBC" from the Competent Authority along with the application form. However, the eligibility certificate for 'GP' sub-category, as applicable from the respective competent authority, should be submitted on the date of draw.

	General Instructions to the candida	tes applying for LPG Distributorship.
Item No	Instructions	Supporting Documents to be provided by applicant
5	Details of the plot of Land for godown or ready made godown which meets the eligibility requirement as given below:	Documents pertaining to land / Godown in the name of applicant or member of 'family unit' Registered Sale Deed/ Gif t Deed / Lease Deed (15yrs minimum) / Mutation and government record etc.
	Sheheri Vitrak or Rurban Vitrak would require a storage Godown approved and licensed by Chief Controller of Explosives of Petroleum and Explosives Safety Organisation (PESO) for storage of 8000 Kg LPG in cylinders. The applicant should 'Own' (as per ownership criteria defined in clause No. 1.23 of the Brochure as applicable), a plot of land of minimum dimensions 25 M x 30 M in the city or within 15 km from the outer limits of the	The Date of the documents have to be on or bef ore the last date f or submission of application as mentioned in the advertisement or corrigendum, if any.  In case land is in the name of member of 'family unit', consent from the family member in form of Notorized Affidavit (Appendix 2) is required to be attached with the application.
	municipal /town /village limits of the location in the same state for construction of LPG Godown for storage of 8000 Kg of LPG in cylinders Or, a ready LPG cylinder storage godown in the city or within 15 km from the outer limits of the municipal /town /village limits of the location in the same state, of capacity 8000 Kg. Note:  The plot of land for construction of godown not meeting the minimum dimensions of 25 M x 30 M will not be considered,	In case land is jointly owned by the applicant/member of the Family Unit w ith any other person(s) or jointly leased in the name of the applicant/member of the Family Unit & any other person(s) and the share of such land in the name of the applicant/member of the Family Unit meets the requirement of land f or godown then an NOC in the form of an Undertaking from the joint owner(s)/joint lessee is to be provided as per Appendix-4  'Family Unit' is defined in the Brochure under Point No. 1.23 and also in the Important Notes given below at Point
	Gramin Vitrak would require a storage Godown approved and licensed by Chief Controller of Explosives of Petroleum and Explosives Saf ety Organisation (PESO) for storage of 5000 Kg LPG in cylinders. The applicant should 'Own' (as per ownership criteria defined in clause No. 1.23 of the Brochure as applicable), a plot of land of minimum dimensions 21 M x 26 M (within 15 km from the location) for construction of LPG Godown for storage of 5000 Kg of LPG in cylinders., Or, a ready LPG cylinder storage godown (within 15 km from the location) of capacity 5000 Kg. Note: The plot of land for construction of godown not meeting the minimum dimensions of 21 M x 26M will not be considered.	No. 2.

	General Instructions to the candidate	tes applying for LPG Distributorship.
5	•	Documents pertaining to land / Godown in the name of applicant or member of 'family unit' Registered Sale Deed/ Gif t Deed / Lease Deed (15yrs minimum) / Mutation and government record etc.  The Date of the documents have to be on or bef ore the last date f or submission of application as mentioned in the advertisement or corrigendum, if any.  In case land is in the name of member of 'family unit', consent from the family member in form of Notorized Affidavit (Appendix 2) is required to be attached with the application.  In case land is jointly owned by the applicant/member of the Family Unit w ith any other person(s) or jointly leased in the name of the applicant/member of the Family Unit & any other person(s) and the share of such land in the name of the applicant/member of the Family Unit meets
	(Note: In case there are any state specific requirements/norms applicable for construction of the LPG Godown, then the same will be applicable for the respective Distributorship locations and revised minimum dimensions of the plot of land will be required as specified in the advertisement of that respective State). The plot of land or ready LPG cylinder storage godown should be freely accessible through all weather motorable approach road (public road or private road connecting to the public road). It should also be plain, in one contiguous plot, free from live overhead power transmission or telephone lines.  Canals/Drainage/Nallahs should not be passing through the plot. The land for construction of LPG godown should also meet the norms of various statutory bodies such as PWD/Highway authorities/ Town and Country Planning Department etc.	the requirement of land f or godown then an NOC in the form of an Undertaking from the joint owner(s)/joint lessee is to be provided as per Appendix-4  'Family Unit' is defined in the Brochure under Point No. 1.23 and also in the Important Notes given below at Point No. 2.
6	Details of the Land for Showroom / Showroom which meets the following requirements:-  Own a suitable shop of minimum size 3 meters by 4.5 meter in dimension or a plot of land for construction of shop of minimum size 3 meters by 4.5 meter at the advertised location or locality as specified in the advertisement. It should be easily accessible to general public through a suitable approach road.	Documents pertaining to land / showroom in the name of applicant or member of 'family unit'. Same as mentioned in the item 5 above.
7 (a to h)	Additional Information to be furnished by SKO (Kerosene) dealers for item No.a. to h.  Additional Information to be furnished by NDNE	Self declaration as per format given in Appendix - 1 to be submitted.  Self declaration as per format given in Appendix - 1 to
8 (a to e)	Additional Information to be furnished by NDNE Retailers dealers for item No. a. to e.	Self declaration as per format given in Appendix - 1 to be submitted. Copy of the NDNE Retailer Agreement with the concerned OMC.

#### General Instructions to the candidates applying for LPG Distributorship.

Important Notes:

- 1. 'Family Unit'\*\* for multiple dealerships/distributorships norms mean the following:
- In case of married applicant, 'Family Umit' will consist of individual concerned his / her spouse and their unmarried son(s) /daughters(s).
- ii) In case of unmarried person/applicant "Family Unit' will consist of individual concerened his /her parents and his/her unmarried brother(s) and unmarried(s) sister(s).
- iii) In case of divorcee, 'Family Unit' will consist of individual concerned, unmarrie son(s) / unmarried daughter(s) whose custody is given to him / her .
- iv) In case of widow/widower 'Family Unit' will consist of individual concerned unmarried son(s) / unmarried daughter(s).
- 2. 'Ownership' or 'Own' for godown / showroom for Sheheri Vitrak, Rurban Vitrak, Gramin Vitrak and Durgam Kshetriya Vitrak Type of Distributorship means having:
  - a. Ownership title of the property

Or

b. Registered lease deed having minimum 15 yrs of valid lease period commencing on any day from the date of advertisement up to the last date of submission of application as specified either in the advertisement or corrigendum (if any).

Additionally, applicants having registered lease deed commencing on any date prior to the date of advertisement will also be considered provided the lease is valid for a minimum period of 15 years from the date of advertisement. The applicant should have ownership as defined under the term 'Own' in the name of applicant / member of "Family Unit" (as defined in multiple dealership / distributorship norm of eligibility criteria)/parents (includes Step Father/Step Mother), grandparents (both maternal and paternal), Brother/Sister (including Step Brother & Step Sister), Son/Daughter (including Step Son/Step Daughter), Son-in-law/Daughter in-law of the applicant or the spouse (in case of married applicant) as on last date for submission of application as specified either in the advertisement or corrigendum (if any). In case of ownership/co-ownership by family member(s) as given above, consent in the form of a declaration from the family member(s) will be required.

In case the share of land in the jointly owned property by the applicant / member of 'Family Unit' as defined in multiple dealership / distributorship norm)/parents & grandparents (both maternal and paternal) of the applicant or the spouse with any other person(s) meets the requirement of land including the dimensions required, then that land for godown/showroom will qualify for eligibility as 'own' land subject to submission of 'No Objection Certificate' in the form of declaration from other owner(s).

- 3. Applicant must provide all information sought against various items mentioned in the Application form. If selected, at the time of verification, the applicant will have to provide documents in original in support of the information furnished in the application. Failure to present these documents in original at the time of verification will result in cancellation of selection along with forfeiture of the amount deposited by the selected candidate before the FVC.
- 4. In case, applicant requires extra space for providing details on any point, the details can be provided by adding extra rows or by adding extra sheets. However, details should be given in the same format as mentioned in that particular point.
- 5. Application form completed in all respects should be signed and submitted on or before the last date in an envelope sealed and super scribed with the Name of Location applied for, Name of the Oil Company on the top.