



## New Ration Card Application Form

### Head of the Household Details

Card Type\*:  APL  BPL  AAY  AAP

EID\*: \_\_\_\_\_ UID\*: \_\_\_\_\_

Name of Head of the Family\*: \_\_\_\_\_

Name of Head of the Family (In local language)\*: \_\_\_\_\_

Mother's Name\*: \_\_\_\_\_

Mother's Name (In local language)\*: \_\_\_\_\_

Father's Name\*: \_\_\_\_\_

Father's Name (In local language)\*: \_\_\_\_\_

Gender\*:  Male  Female

Spouse's Name\*: \_\_\_\_\_

DOB\*: \_\_\_\_\_ Age\*: \_\_\_\_\_

### Professional Details

Occupation\*: \_\_\_\_\_

Annual Income\*: \_\_\_\_\_

### Gas Connection Details

Gas Connection Status\*:  Deepam  Double  Single  No Cylinder

Gas Company Name\*: \_\_\_\_\_ Gas Agency Name\*: \_\_\_\_\_

Consumer No\*: \_\_\_\_\_

### Residence Address

Door No\*: \_\_\_\_\_ Locality / Land Mark\*: \_\_\_\_\_

State\*: \_\_\_\_\_ District\*: \_\_\_\_\_

Mandal\*: \_\_\_\_\_ Village / Ward\*: \_\_\_\_\_ Pin Code: \_\_\_\_\_

FP Shop No\*: \_\_\_\_\_

### Permanent Address

Door No\*: \_\_\_\_\_ Locality / Land Mark\*: \_\_\_\_\_

State\*: \_\_\_\_\_ District\*: \_\_\_\_\_

Mandal\*: \_\_\_\_\_ Village / Ward\*: \_\_\_\_\_ Pin Code: \_\_\_\_\_



**Add Member Details:**  YES  NO

If Yes, Please Enter Member Details

| Member Name | Gender | DOB (DD/MM/YYYY) | Mother Name | Father Name | Spouse Name | Opting to Lift Commodity (True/False) | Age | EID | UID | Relationship with Head of the Family |
|-------------|--------|------------------|-------------|-------------|-------------|---------------------------------------|-----|-----|-----|--------------------------------------|
|             |        |                  |             |             |             |                                       |     |     |     |                                      |
|             |        |                  |             |             |             |                                       |     |     |     |                                      |
|             |        |                  |             |             |             |                                       |     |     |     |                                      |
|             |        |                  |             |             |             |                                       |     |     |     |                                      |
|             |        |                  |             |             |             |                                       |     |     |     |                                      |

### Other Details

Old Ration Card No. (If any): \_\_\_\_\_

### Informant Details

Informant Name\*: \_\_\_\_\_ Informant Relation\*: \_\_\_\_\_

Delivery Type\*: \_\_\_\_\_ Mobile No\*: \_\_\_\_\_

Proof Document\*: \_\_\_\_\_

**Documents List** (NOTE: 1.Total size of all Upload Documents should not be exceeding up to 50 KB.  
2. All Upload Documents should be in PDF format only.)

Meeseva Application Form\*

Proof Document\*

Photo\*

Applicant's Signature