



GOVERNMENT OF JHARKHAND
Department of Revenue & Land Reforms

FORM OF APPLICATION FOR MUTATION

Sndehl eSpl. N.S. Frm N.V. - 10

District	<input type="text"/>	Sub-Division	<input type="text"/>
Anchala/ Circle	<input type="text"/>	Halka	<input type="text"/>
Village	<input type="text"/>		
Name of the State	<input type="text"/>	Thana	<input type="text"/>
Thana No.	<input type="text"/>	Tauzi No.	<input type="text"/>

SL. No.	Date of application	Name of person applying of mutation	Applicant's Continuous Khatian of Jamabandi No.	Particulars of Mutation required	Remarks
1	2	3	4	5	6
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature of Applicant