Swachh Bharat Mission

Format I : For data on toilet

(This form to be downloaded / Printed and duly filled in and signed copy to be scanned and submitted on the website)

| (A) Convention Destinators | | | | | |
|----------------------------|---|-----------|--------|-----------------------|--|
| 1 | (A) Georaphical Particulars 1 state: - Rajasthan | | | | |
| | 2 dist:- Sri Ganganagar | | | | |
| | Block:- Padampur | | | | |
| 4 | Tehsil:- Padampur | | | | |
| 5 | Town/City:- Gajsinghpur | | | | |
| 6 | Ward:- | | | | |
| | (B) Toilet Owner's Particulars | | | | |
| 1 Name of the Applicant | | | | · | |
| 2 | 2 Profassion 3 Father's name | | | | |
| 3 | | | | | |
| 4 | 4 Mother's name | | | | |
| 5 | Address | T | | | |
| 6 | Contact No. | Landline | | | |
| | Mobile | | | | |
| | Aadhar Card No | | | | |
| 8 | Details Acount No. | | | | |
| Name of Bank | | | | | |
| | Bank Branch | | | | |
| 9 | Note: The Funds will be transferred through electronic transfer | | | | |
| 9 | 2) Dry Latrine | | | | |
| | | | | | |
| | 3) Bahao type Latrine | | | | |
| | 4) Unsanitary Latrine based on single pit latrine | | | | |
| | (C) Undertaking | | | | |
| | any information is found to be fals/suppressed, state government/government of india will intiate sutiable action against me. signature of Applicant (D) Refference of Two Person vouching for the Toilet Owner | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Name | | | Name | |
| | Father's name | | 301 | Father's name | |
| - | Address | | 9 | Contact Address | |
| | City | | | City | |
| - 1 | State | | | State | |
| 1 | Contact No. | Land line | | Contact No. Land line | |
| | | Mob. No. | | Mob. No. | |
| | | | 1 | | |
| | Date | Sign | nature | Date Signature | |