GOVERNMENT OF JAMMU AND KASHMIR DIRECTORATE OF SOCIAL WELFARE

Application Form for Availing Petrol Subsidy to Disabled Persons

	Name and Address of the vsically Handicapped Person:			
2.	Nature of the Handicapped:			
	Occupation (whether State Government Employed or State Government Employed):			
	Place of duty and approximate distance m the employee's house:			
	Registration No. of vehicle and its rse Power:			
6. Name and full address of the driver Who drives the vehicle for blind applicant:				
7. Name and Address of the Supplier from whom the applicant wishes to buy petrol				
This is certified, I D/o/S/o Am not in receipt of any State of Voluntary Source for the purchase for which subsidy on purchase of petrol/diesel is meant and also certified that my income from all the sources does not exceed Rs 2500/- per month.				

Part II

Signature of the Applicant

1.	Registration Number of the Vehicle	:	
2.	Monthly entitlement of petrol/Diesel	:	
	at Concessional Rate		
3.	Vehicle of 2Horse Power and Below	:	15 liters per month
	Vehicle of more than 2Horse Power		More than 15 liters per month