

ULHASNAGAR MUNICIPAL CORPORATION

CITIZEN FACILITATION CENTRE

SUBJECT: PERMIS PROPER	SION FOR	Repai	r / Re	ENOV	ΆΤΙ	ON (Of E	BUIL	DIN	G /	
Token Number (For Office	Use)										
	· · · ·			Date	2:-		/	/			
Citizen Identification N	umber										
(If Citizen Identification Number is given, do not fill below Details)											
Applicant's Details: Last Name/ Surname			Name Father/Husband's Na					Name			
		i tuiit	i vuine			Tamer/ Husbanu S Ivanie					
Details of Society (If Application from Society): Name Of Society:											
5											
Designation											
Address:											
Head				Infor	matio	n					
House/Building/Soc. Name:											
Flat/Block/Barrack No.:	Wing/Floor:										
Road/Street/Lane:											
Area/Locality/Town/City:					Talı	ıka:					
Pin code:											
Ward Committee No.:	1[]2[]3	[]4[]									
Electrol Panel No.:											
Telephone No. (if any):	Co	ontact Pe	rson:								
Email Address (if any):											
т	Inform	ation of	Property		•						
Head Type of Property	[] Land	1] Buildir		<u>orma</u>	tion					
(Please Tick $[\checkmark]$ as applicable		L	Junan	' 6							
Property Number											
(Computerized)											
Necessary Particulars about above service:											
Head					Partic	culars					
1 Address of the building / property (To be repair / renovate)											
		Pin									
2 Year of Construction					1			1			
]	

3	Type of Property		Author	ised					
	(Tick which ever $\left[\checkmark \right]$ ap	Unauthorised							
		- /		.011560					
4	Type of Authorised / Unau	athorised	[] Chawl						
	property	1. 11.)	[] Bungalow						
	(Tick which ever [✓] ap	plicable)	[] Apartm	ent					
5	Construction permission /				Date:				
	commencement certificate		ļ						
6	Construction completion / certificate number	Usage			Date:				
7	Usage Type -		[] Resident	[] Non R	Resident				
	(Tick which ever 🚺 ap	* /	[] Mixed						
8	Details of repair / renovati	on							
	Necessary Enclosure				as under	r.			
	(If enclos	sed tick [✔] or not enclo	osed tick [X])					
			_						
		Enclosur				Yes/No			
	1 Certified copy of the construction completion certificate / usage permission								
	along with approved map OR Copy of Certificate issued by CTS/ADM								
	office regarding E/U No. 2 7/12 Extract / City Survey Extract								
3 NOC of owner / society									
	· · · · ·	or License F	Ingineer for rer	povation/repair					
Т									
	Declaration I/Westate on solemn affirmation								
	·								
	that the above information	is true and	d correct with	the best of my	knowle	dge. If the			
	information given is found with	rong then I/	We shall be held	d legally liable for	r its cons	equences.			
	Date:-			Applicant's	s Signat	ure			
	()								
	The document may please	be deliver	ed to:-						
	1. Self/Nominated Perso	on []	a) C.F.C. [] b) Camp No	•[]				
	Name of Nominated Person ()								
	2. By Post								
	a) U.P.C. [] b) Register A.D. []								
	,			1					
	3. Courier []	-							
(Not to be filled if address is same as above) Correspondence Address:- Last Name/ Surname Name Father/Husband Name									
	Last Mame/ Surname	INd	ime	Famer/	nusbanu	Name			
	ouse/Building/Soc. Name:								
	st/Block/Barrack No.		V	Ving/Floor:					
	at/Block/Barrack No.:								
Ro	ad/Street/Lane:			Taluk	a:				
Ro Ar Pir	ad/Street/Lane: ea/Locality/Town/City: n code:			Taluk	a:				
Ro Ar Pir	ad/Street/Lane: ea/Locality/Town/City:			Taluk	a:				