

# Check List

Documents / Certificates / Evidences to be submitted by applicant

Important Notice: - As per criteria of winner, category applicant may submit self-Declaration on Paper.

No Judicial Papers / Stamp Papers are not necessary.

As per GOM Resolution dated: 14/08/2013 and 09/03/2014

|                   |  |
|-------------------|--|
| Name of Applicant |  |
| Scheme Name:      |  |
| Scheme Code:      |  |
| Category:         |  |
| Priority No.:     |  |
| Application No.:  |  |
| Tenement No.:     |  |

Note:-

1. Applicant should mark the tick in the box shown against each of the document in the table below, to ensure that the copies of documents / certificates / evidences, as applicable, are attached with "acceptance letter". The applicant required to sign in the space provided at the end of the checklist table.

2. The officer accepting the certified copies of documents / certificates / evidences should verify the same with all the originals thereof as produced before him by the applicant. The officer needs to sign in the space provided at the end of the checklist table.

3. Documents at serial No. 1 to 9 in the checklist table below are compulsory for all applicants in all categories (i.e. Applicants in GP and all categories). Documents indicated at serial No. 10 to 23 are for the applicants in the categories other than General Category (GP). The applicants are expected to submit relevant documents as applicable to his / her category.

## Check List

| Sr. No. | Criterion of eligibility  | Certified copies of documents / certificates / evidences to be submitted             | Applicant to ensure submission by tick marking in the box | Officer accepting the document to ensure submission of the same by tick marking in the box | Remarks |
|---------|---|--|---|--|---------|
| (1)     | (2)   | (3)  | (4)   | (5)  | (6)     |
| 1A      | Applicant's Acceptance Letter   | Acceptance Letter (Format S)   | ✓<br><input type="checkbox"/>                             | ✓<br><input type="checkbox"/>  |         |
| 1B      | Certified photo   | Certified Photo (Format F)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 2       | Appendix showing Terms / Conditions   | Appendix (Format AP)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 3A      | Self-Declaration  | (Format P)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 3B      | Indemnity Bond  | (Format X)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 4       | Age proof for 18 yrs and above  | (1) Birth certificate issued by competent authority as legally valid                 | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | OR (2) School Leaving Certificate Or any other relevant Document                     | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 5       | Certificate of more than 15 years stay in Maharashtra State                             | Domicile certificate issued by competent authority or 15 years Residence Certificate | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 6A      | Document Showing income during year 01/04/2016 to 31/03/2017 If Applicant is in service | (1) Salary certificate (Format A)  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|---------|--|---|---|--|---------|
| (1)     | (2)  | (3)   | (4)   | (5)  | (6)     |
|         |  | AND (2) Income Tax Return   | <input checked="" type="checkbox"/>                       | <input checked="" type="checkbox"/>  |         |
|         |  | AND (3) Salary Certificate in Format - A of applicant's spouse  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (4) Income Tax Return of applicant's spouse   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND ( If does not comply point No.3 and 4 ) (5) Self Declaration in the Format -C of applicant's spouse | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 6B      | Applicant is self-employed and Income Tax Assesse        | (1)Income tax Return  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (2) Salary Certificate in Format - A of applicant's spouse  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (3) Income Tax Return of applicant's spouse   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND ( If does not comply point No.2 and 3 ) (4) Self Declaration in the format -C of applicant's spouse | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 6C      | If applicant is self-employed but no income tax assessee | (1)Self Declaration in the format No.- B  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (2) Salary Certificate in Format - A of applicant's spouse  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (3) Income Tax Return of applicant's spouse   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|---------|---|--|---|--|---------|
| (1)     | (2)   | (3)  | (4)   | (5)  | (6)     |
|         |   | AND ( If does not comply point No.2 and 3 ) (4) Self Declaration in the format -C of applicant's spouse  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 6D      | If applicant is Agriculturist   | (1) Applicant's Income certificate for year 2016-17 issued by concerned Tahsildar                        | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | AND (2) Income tax Return if available   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | AND (3) Salary Certificate in Format - A of applicant's spouse   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | AND (4) Income Tax Return of applicant's spouse  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | AND ( If does not comply point No.3 and 4 ) (5) Self Declaration in the format - C of applicant's spouse | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 7       | Proof of Applicant that he/she does not possess house/plot in MCGM area | Self-Declaration in Format (E)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 8       | Document showing evidence of present accommodation                      | 1) Rent Receipt Or   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | 2) Attested copy of leave and licenses agreement Or  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | 3) Society maintenance receipt Or  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|---------|--|--|---|--|---------|
| (1)     | (2)  | (3)  | (4)   | (5)  | (6)     |
|         |  | 4) Attested copy of Electricity Bill Or                                  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | 5) Attested copy of telephone bill                                       | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 9       | Form - Part A and B  | Print out of Form Part A and B (System Generated)                        | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 10      | Schedule Castes and Nav Buddhist (SC)) Note:- Applicant in this category will have to produce Caste Validity Certificate (CVC). The possession of tenements shall not be given without CVC | 1) Caste certificate issued by competent authority of Maharashtra State. | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | 2) Caste validity certificate if available                               | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 11      | Scheduled Tribes (ST) Note:- Applicant in this category will have to produce Tribe Validity Certificate (TVC). The possession of tenement shall not be given without TVC                   | 1) Tribe Certificate issued by competent authority of Maharashtra State. | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | 2) Tribe Validity Certificate if available                               | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|---------|---|---|---|--|---------|
| (1)     | (2)   | (3)   | (4)   | (5)  | (6)     |
| 12      | Nomadic Tribes (NT)<br>Note:-Applicant in this category will have to produce Caste Validity Certificate (CVC). The possession of tenement shall not be given without CV     | 1) Caste certificate issued by competent authority of Maharashtra State   | <input checked="" type="checkbox"/>                       | <input checked="" type="checkbox"/>  |         |
|         |   | 2) Caste validity certificate if available  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 13      | Denotified Tribes (DT)<br>Note:-Applicant in this category will have to produce Caste Validity Certificate (CVC). The possession of tenement shall not be given without CVC | 1) Caste certificate issued by competent authority of Maharashtra State   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | 2) Caste validity certificate if available  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 14      | Journalist (JR)   | (1) Photo copy of Identity Card   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | (2) Certificate issued by Director General of Information and public relation of Maharashtra state Or any other proof | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 15A     | Freedom Fighter (FF)<br>Applicant (himself Freedom fighter)   | (1) Certificate regarding freedom fighter issued by Hon. Chief Minister   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | OR (2) Tamrapatra / Sanmanpatra (letter of honour)  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|---------|--|---|---|--|---------|
| (1)     | (2)  | (3)   | (4)   | (5)  | (6)     |
|         |  | OR (3) Certificate issued by Collector Office   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (4) Format "FF" Self Declaration  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 15B     | Freedom Fighter (FF) Applicant (legal heir of Freedom fighter)   | (1) Certificate issued by District Collector about legal heir                                       | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (2) Tamrapatra / Sanmanpatra (letter of honour)   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (3) Format "FF" Self Declaration  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(1)   | Blind Applicant or physically handicapped persons  | (1) Certificate issued by National Association for Blind  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | Certificate issued by All India Institute of Physical Medicine and Rehabilitation, Haji Ali, Mumbai | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | OR Certificate issued through SADM (Software For Assessment of Disability, Maharashtra)             | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(2)   | Low Vision or physically handicapped persons or persons in absolute need of accommodation on health ground | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra)                | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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| (1)     | (2)  | (3)  | (4)   | (5)  | (6)     |
| 16(3)   | Leprosy Cured or physically handicapped persons or persons in absolute need of accommodation on health ground  | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra) | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(4)   | Hearing Impairment or physically handicapped persons or persons in absolute need of accommodation on health ground   | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra) | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(5)   | Locomotor Disability or physically handicapped persons or persons in absolute need of accommodation on health ground                                       | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra) | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(6)   | Mental Retardation or physically handicapped persons or persons in absolute need of accommodation on health ground   | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra) | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 16(7)   | Mental Illness or physically handicapped persons or persons in absolute need of accommodation on health ground   | Certificate issued through SADM (Software For Assessment of Disability, Maharashtra) | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 17      | Families of defence personnel and personnel of Border Security force who have been died or disabled or declared missing. (Pl. see information booklet)(DF) | (1) Certificate issued by concerned authority of defence department                  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |



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| (1)     | (2)  | (3)   | (4)   | (5)  | (6)     |
|         |  | AND (2) Certificate issued by District Sainik Board                             | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 18      | Ex serviceman and their dependents (Ex Serviceman)   | (1) Certificate issued by concerned authority of defence                        | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (2) Certificate issued by District Sainik Board                             | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 19      | All sitting and Ex members of Parliament or Assembly or council, representing constituencies in Maharashtra (MP / MLA / MLC)   | (1) Certificate issued by Secretary Parliament / Legislative Assembly / Council | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | AND (2) Format "MP" Self Declaration  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 20      | MHADA Employee (ME)<br>Note:-The Possession of tenement shall be handed over subject to verification from regional board of MHADA, whether the applicant has taken or not any benefit through MHADA lottery or welfare scheme or ME category | (1) Certificate issued by Secretary, MHADA in Format "ME"                       | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |  | And (2) Format "ME -1" Self Declaration   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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| (1)     | (2)   | (3)  | (4)   | (5)  | (6)     |
| 21      | State Government servants and employees of the statutory Boards (except MHADA) under State Govt. including those who have already retired | Certificate issued by competent authority in format no. "SG"   | <input checked="" type="checkbox"/>                       | <input checked="" type="checkbox"/>  |         |
| 22      | Central Govt. servants occupying staff quarters and due for retirement within three years or those who have already retired (CG)          | (1) Certificate issued by competent Authority certifying that applicant is due for retire in 3 years from the date of advertisement and residing in staff quarter allotted to him in Maharashtra State | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | OR (2) Certificate issued by competent Authority certifying that the applicant is retired before 3 years from the date of advertisement  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 23      | Artist (AR) (Pl. see booklet for details)   | (1) Certificate issued by Directorate of Cultural Affairs, Maharashtra State   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | OR (2) Certificate issued by Directorate of Art, Maharashtra State   | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
| 24      | General Public (Any other documents as desired by the applicant.)   | (1)  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | (2)  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |
|         |   | (3)  | <input type="checkbox"/>                                  | <input type="checkbox"/>   |         |

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|------------------------------|--------------------------|--|--|--|---------|
| (1)                          | (2)                      | (3)  | (4)  | (5)  | (6)     |
|                              |                          | (4)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
|                              |                          | (5)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
|                              |                          | (6)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
|                              |                          | (8)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
|                              |                          | (9)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
|                              |                          | (7)  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
| 25                           | Other                    | Other  | <input type="checkbox"/>   | <input type="checkbox"/>   |         |
| (Applicant Name & Signature) |                          |  | (Name and signature of officer accepting the certified copies of documents duly verified with) |  |         |

ACCEPTANCE LETTER

By Registered Post A.

By Hand

To,

The Chief Officer

Mumbai Housing & Area Development Board, Grihnirman Bhavan, Bandra East,  
Mumbai-400 051.

Sir,

With reference to your letter ..... dated .....

I have to inform you that I accept the offer of allotment of a tenement on the terms and conditions setout in the Appendix to that Letter.

I further declare that this acceptance is unqualified and without any reservations, conditions or complaint.

Yours

Place : MUMBAI

Date :

( MR. \_\_\_\_\_ )

(Verification of Applicant's Photo)

I certifying that photo affixes herewith is of \_\_\_\_\_ (Applicant name) and he/she is known to me \_\_\_\_\_ yrs.

Recent Applicant  
Photograph

Certifying officers sign & seal

Photo certified on basis of documents:

Name of Certifying officer :  
Designation of Certifying Officer :  
Address of Certifying Officer :

Note:

1. Please upload affix photo in space provided.
2. Certifying Officer should sign & seal across the photo
3. Certifying Officer should mention all details i.e. full Name, Designation & address
- c. MP/MLA/MLC
- d. Corporator
- e. Gazetted Officer
- f. Branch Manager of any Nationalise Bank

## Letter of Acceptance Of Terms and Conditions



Applicant Photo

1. The tenement shall be taken possession of and occupied by the allottee within 15 days from the date of allotment.
2. (1) The allottee shall satisfy himself about the workmanship, fittings, fixtures and the like before taking over possession of the tenement.

(2) If any defect in any of the matters referred to in clause (1) is brought to the notice of the Chief Officer within a period of three months from the date of taking over possession, it shall wherever possible be rectified by the Board without further charge to the allottee; and in other cases, such allottee shall be entitled to receive reasonable compensation for such defects.

(3) Where there is a dispute as regards to any defect in the building relating to any of the matter envisaged by clause (1) or as to whether it is reasonably possible for the Board to rectify the defect or as regards the reasonableness of the compensation payable in respect of such defect which cannot be or is not rectified by the Board, the matter shall be referred for decision, with the approval of the Government, to an officer not lower in rank than a Superintending Engineer in the Buildings and Communications Department of the Government as the Board may be order specify within a period of six months from the date of handing over possession. The Officer so specified shall after enquiry record his decision which shall be final.

3. The allottee shall use and occupy the tenement for the purpose of residence only.

4. (1) On allotment of the tenement, all the allottees in building or a group of buildings shall form a housing society or a company and produce a certificate from the Registrar of the co-operative Societies of the registration of the Housing Society, or as the case may be, from the Registrar of companies regarding registration of the Company.

(2) If the allottees agree that after paying the full purchase price of the building and all outstanding dues payable to the Authority, they would like to be governed by the provisions of the Apartment Act, the Authority shall, after all the allottees have paid the full purchase price and all outstanding dues, submit the building to the provisions of the Apartment Act, by duly executing and registering a Declaration as provided in that Act, and thereupon the allottees shall be governed by the provisions of that Act.

(3) It shall entirely rest with all the allottees to decide whether they shall form a housing society or company or be governed by the Apartment Act. The decision once made shall be final.

5. On receipt of intimation regarding registration of the housing society or company by the allottees, or intimation that the allottees have elected to be governed by the Maharashtra Apartment Ownership Act, 1970, the Board shall take all necessary steps to lease the land underneath the building and

appurtenant thereto to the housing society, company or the Association of apartment owners for a period of 90 years and to convey to the said Society, Company, or as the case may be, the Association aforesaid, its rights, title and interest in the building containing the tenements and execute the necessary document in that behalf and deliver all documents of title relating to the building aforesaid to the said housing society, company, or as the case may be, the Association of apartment owners. All charges incurred by the Board for such conveyance including professional charge shall be borne by the housing society, Company or the Association as the case may be.

6. The Society, Company or the Association shall pay the lease rent at 2 ½ per cent of the amount of the premium of land per annum. Till such time, the Society or Company of the allottees is formed and registered, or the Association is formed and indenture of lease is executed, the allottee will have to pay the ground rent to the Estate Manager (concerned) Mumbai Housing and Area Development Board, regularly not later than 5th of every month commencing on the date of allotment of the tenement. The ground rent is as fixed will be applicable.

7. The housing society, company or the allottees till the Association is formed will be responsible for the payment of all the taxes, cesses, impost and other dues to the local authority and Government, as the case may be. In order to enable the housing society, company or the Association of allottees to fulfil its or their duties as a lessee of the Authority, the allottee shall pay to the housing society or company or the Authority at the proper time and place his share of the municipal taxes, water and electricity charge, ground rent, share of common services i.e. common lights, sweeper, watchman and the like and his share of the other public charges due, in respect of the land and the building and other dues payable if any.

8. The maintenance and management of tenements in the building and the land underneath and appurtenant thereto will rest with the society, company or association, as the case may be, and the Board will not have any concern whatsoever or be responsible in any manner in this respect.

9. The society, company or Association when formed and registered shall have to get the building insured at its own cost, and the allottee shall have to pay to the Society, Company or Association his proportionate share of the same.

10. The allottee shall be governed by the provisions of the Maharashtra Housing and Area Development Act, 1976 as amended from

time to time and the Maharashtra Housing and Area Development (Estate Management, Sale, Transfer and Exchange of Tenements) Regulations, 1981, till the building is duly conveyed to the Society, Company or Association, as the case may be.  
10 A. If the allottee fails to pay any instalment or any other dues of the Authority on the due date, the Authority, without prejudice to any other remedy available to it shall be at liberty to recover the same together with interest thereon at the rate of 13.5% percent per annum as arrears of land revenue under the provisions of section 67 and 180 of the Maharashtra Housing and Area Development Act, 1976.)

+ Inserted by notification no.MH/EMR/1083/8474/EM-9 dated 27-11-1984.

11. The sale price of the tenement communicated in the offer of allotment has been fixed tentatively and if after receipt of final bills for the construction of the tenements or payment of interest on the amount of loan taken for the construction of these tenements or for expenditure incurred on supervision and maintenance the Board considers it necessary to revise the price tentatively fixed it will do so and determine the final price payable on allotment and the allottee shall be bound by such determination and shall have to pay on demand the difference, if any, between the final price determined and the price paid by the allottee.

12. If any allottee surrenders the tenement before the conveyance is passed on to the society, Company or the Association his entire period of stay will be treated as on rental basis, and he will have to pay the economic rent for the said period which will be deducted from the amount of the price paid by him. For such surrender, the allottee shall give three clear calendar months' notice to the Board, failing which a further sum equivalent to three months' economic rent will be deducted from the price paid by him before

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_, resident \_\_\_\_\_

\_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place : MUMBAI

Applicant Signature : .....

Date:

Applicant's Name: \_\_\_\_\_

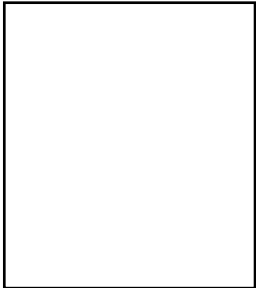
Applicant's Name: \_\_\_\_\_

Application No. :

Signature:

Date:

Applicants Thumb Impression



## SELF DECLARATION

Applicant Photo

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_ do hereby solemnly affirm on oath and state as follows:- \_\_\_\_\_. I have been offered allotment of a tenement by the Mumbai Housing and Area Development Board, under the Code No. \_\_\_\_\_ Scheme at \_\_\_\_\_ under the Board's letter No. \_\_\_\_\_ dated \_\_\_\_.

2. I reaffirm the statements made by me in my application for allotment of a tenement in the said scheme.

3. I have accepted the terms and conditions of the offer and further undertake to abide by the provisions of the Maharashtra Housing and Area Development Act, 1976, as amended from time to time, and the Maharashtra Housing and Area Development (Estate Management, Sale, Transfer and Exchange of Tenements) Regulations, 1981. (All rates, regulation and registration and decision)

4. I declare that the Mumbai Board shall be at full liberty to cancel the allotment and resume the tenement allotted to me, and to take action for prosecution, if any, if the contents of my application are found to be incorrect, or default is committed by me in respect of the terms and conditions of allotment.

I MR/MRS \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place: \_\_\_\_\_

Applicant Signature : .....

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant NO: \_\_\_\_\_

Applicants Thumb Impression





Indemnity Bond on Plain Paper

Applicant  
Photo

This Indenture of Indemnity Bond is made and executed on this \_\_\_\_\_ day of \_\_\_\_\_ 40 yrs, an Indian habitant \_\_\_\_\_ in favour of Mumbai Housing and Area Development Board, a regional unit of MHADA having its office at Griha Nirman Bhavan, Kala Nagar, Bandra (E), Mumbai – 400 051 (hereinafter referred to as the said Board).

I say and submit that, I have applied vide application No. \_\_\_\_\_ for Code No. \_\_\_\_ Under the scheme advertised by MHADA (MHADB). I say and submit that, the requisite documents required for eligibility for the applicant such as, age proof, residential proof and stay in Maharashtra, Annual income, No residence or plot in the MCGM limit, Ration card, Caste certificate etc. and other documents are true and correct to the best of my knowledge and belief.

I have applied for allotment of tenement in Code Nos. 402 and in categories \_\_\_\_\_ other than the code and category in which I am declared successful. I, therefore surrender our claim in Code No. \_\_\_\_\_ And categories \_\_\_\_\_ and ready to accept only one tenement in this Code No. \_\_\_\_ and category ME .

Further in case any of the documents are found to be incorrect, false, fabricated & forged, I will be solely responsible for the same, MHADA shall be at fully liberty to cancel the allotment and initiate the legal action for prosecution against me, and I shall be held responsible alone for the same.

I further undertake to indemnify and keep indemnified MHADA/MHADB and all its officers from the effect of all legal proceeding of whatsoever nature that may arise in future in respect of above scheme and against all losses and damages, costs, charges and expenses, claims, penalties or any other action whatsoever which may be put to on reasonably incur or suffer by reason of furnishing false and fabricated documents for the allotment of tenement by the MHADA Board.

I do hereby state that this indemnity bond shall be binding upon me and my legal heirs' successors etc. in respect of said scheme.

I hereby also declare that I myself and my heirs, successors shall not have any right

title and interest against the said Board in respect of the provision of allotment letter in respect of the said tenement. IN

WITNESS WHEREOF I have set and subscribed my hands to this Bond of Indemnity on the day of \_\_\_\_\_ 202\_\_\_\_

I MR \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_  
\_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place: \_\_\_\_\_

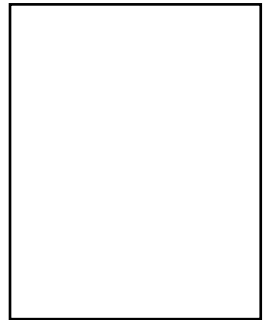
Applicant Signature :

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_

Applicants Thumb Impression



## SALARY CERTIFICATE

This is to certify that Shri /Smt./Ms. \_\_\_\_\_ is working in this organization since date \_\_\_\_\_ on the post of \_\_\_\_\_.

This organization /company has paid total amount Rs. \_\_\_\_\_/- to him during last 12 months i.e. \_\_\_\_\_ to \_\_\_\_\_ towards salary. This amount does not include all reimbursable allowances such as House Rent Allowance, Medical Allowance, Car Allowance, Washing Allowance, Travelling Allowance, Kit Allowance etc. but includes bonus and other amount.

The above amount is for 12 month, and accordingly his average monthly income work out to Rs. \_\_\_\_\_/-.  
(If the MHADA asks you have to submit payment receipt for 12 month )

Place: MUMBAI

Date: \_\_\_\_\_

Affix using  
card of  
Company /  
Stamp

SEAL

Signature of Authorized Person : \_\_\_\_\_

Name of Organization / Company : \_\_\_\_\_

Name of Signing Person : \_\_\_\_\_

Designation : \_\_\_\_\_

Address of Organization : \_\_\_\_\_

(If applicant is self employed but not income tax assessee)

SELF DECLARATION

Applicant  
Photo

I \_\_\_\_\_-Age \_\_\_\_yrs. Indian, often residing \_\_\_\_\_  
\_\_\_\_\_declare that I havebeen applied for tenement of Mumbai Board  
under the Code No. \_\_\_\_ at-----advertised Dt-----having application No. \_\_\_\_\_do  
hereby solemnly affirm on oath and state as follows :- I declare that I am not on any kind of service /  
job. But I am self-employed since having last 12 months (i.e. \_\_\_\_\_ to \_\_\_\_\_) Income Rs I  
declare that my pan card No. is \_\_\_\_\_and I am not income tax payer.

I declare that the information mentioned as provided above is true and correct to the best of my personal  
knowledge, information and belief. If the information is given above found false, MHADA/ Mumbai Board cancelled of  
allotment of tenement and liable for prosecution and punishment.

I declared that the information provided above is true and correct to the best of knowledge and belief.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_occupation\_\_\_\_\_  
resident of \_\_\_\_\_hereby declare that the information provided above is true  
and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false  
information. If the information as given above is found to be false, I shall be liablefor prosecution and punishment under section  
199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place: \_\_\_\_\_

Applicant Signature :

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_

Applicants Thumb Impression

(Self Declaration of income of applicants husband / wife if unemployed or self employed but not income tax assessee)

SELF DECLARATION

Applicant Photo

I Mr./Mrs./ Ku/ \_\_\_\_\_ Age \_\_\_\_\_ yrs  
 . \_\_\_\_\_ declare that my husband /  
 wife Mr./ Mrs. / MR \_\_\_\_\_ applied for schemeCode \_\_\_\_\_ in scheme code No.  
 \_\_\_\_\_ of Mumbai Board having Application No. \_\_\_\_\_.

I Mr. / Mrs. \_\_\_\_\_ declare that I am unemployed / having self business / service of/in  
 \_\_\_\_\_ I self employed / employee of \_\_\_\_\_  
 company and having last 12 months (i.e. \_\_\_\_\_ to \_\_\_\_\_) income Rs. \_\_\_\_\_ I declare that  
 my pan card No. is \_\_\_\_\_ and I am not income tax payer.

I declare that the information mentioned as provided above is true and correct to the best of my personal knowledge,  
 information and belief. If the information is given above, found false, MHADA/ Mumbai Board cancelled of allotment of  
 tenement and liable for prosecution and punishment.

I declared that the information provided above is true and correct to the best of knowledge and belief.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged  
 \_\_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of  
 \_\_\_\_\_ hereby declare that the information provided above is true and correct to the  
 best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the  
 information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of  
 IPC 1960 and / or any other law applicable thereto.

Declared on this day Dated ----- Month -----

Place: \_\_\_\_\_

Applicant Signature:

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicants Thumb Impression

Application No. : \_\_\_\_\_

Note: If spouse of applicant is unemployed the income of spouse should mentioned as "Nil"

(Specimen Form of Self Declaration to be execute by Freedom Fighter or his / her legal heir)

SELF DECLARATION

Applicant  
Photo

I Mr./Mrs./Kum. MR \_\_\_\_\_ Age \_\_\_\_ yrs declare that I have been applied fortenelement of Mumbai Board under the Code No. \_\_\_\_ At ----- advertised Date: ----- having application No. \_\_\_\_\_.

I declare that, Freedom Fighter Mr./ Mrs./Kum ----- by his name or his / her legal heir have not taken benefit of allotment of tenement of any of the State GovernmentScheme or any of the scheme by MHADA.

I declare that the information mentioned as provided above is true and correct to the best of my personal knowledge, information and belief. If the information is given above found false, MHADA/ MumbaiBoard cancelled of allotment of tenement and liable for prosecution and punishment.

I hereby declare that the information provided above is true and correct to the best of my personal knowledge & belief.

I MR \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liablefor prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Declared on this day Dated ----- Month -----

Place: \_\_\_\_\_

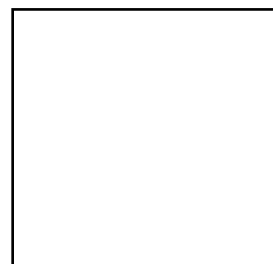
Applicant Signature :

Date: \_\_\_\_\_

Applicants Thumb Impression

Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_



(Specimen Form of Declaration to be execute by MHADA Employee )SELF

## DECLARATION

Applicant Photo

Mr./Mrs./Kum. \_\_\_\_\_ age \_\_\_\_ yrs declare that I have been applied for \_\_\_\_\_ tenement of Mumbai Board under the Code No. \_\_\_\_ at \_\_\_\_\_ advertised Date having \_\_\_\_\_ application No. \_\_\_\_\_. I declare that, me or my Spouse have not taken benefit from MHADA Employee Category for allotment of tenement of any of the scheme of MHADA. Also I or my Spouse are not member of any MHADA employee welfare scheme/Housing Society in Maharashtra and I or my Spouse not taken any benefit of any MHADA employee welfare scheme. MHADA has not allotted any Staff quarters on ownership basis to me & my spouse in Maharashtra state.

I declare that the information mentioned as provided above is true and correct to the best of my personal knowledge, information and belief. If the information is given above found false, MHADA/ Mumbai Board cancelled of allotment of tenement and liable for prosecution and punishment.

I hereby declare that the information provided above is true and correct to the best of my personal knowledge & belief.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Declared on this day Dated ----- Month -----

Place: \_\_\_\_\_

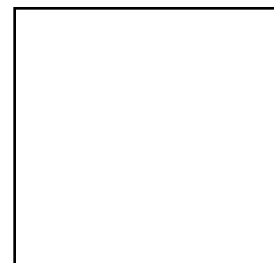
Applicant Signature :

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_

Applicants Thumb Impression



Note : The possession of tenement shall be handed over subject to verification from regional board of MHADA, whether the applicant has taken or not any benefit through MHADA lottery or welfare scheme or ME category.

(CERTIFICATE TO BE SUBMITTED BY STATE GOVERNMENT EMPLOYEE /EMPLOYEE  
OF GOVERNMENT CORPORATION)

CERTIFICATE

IT IS TO CERTIFIED THAT MR/MRS \_\_\_\_\_ IS WORKING IN THIS DEPARTMENT/  
CORPORATION ON \_\_\_\_\_ POST. HIS/HER APPOINTMENT DATE IS  
\_\_\_\_\_ AND WORKING CONTINIOUSLY MORE THAN 5 YEARS MEANS \_\_\_\_\_ YEAR  
\_\_\_\_\_ MONTH. THIS CERTIFICATE ISSUED TO TAKE BENEFIT OF RESIDENTIAL TENEMENT  
RESERVE FOR STATE GOVERNMENT / GOVERNMENT CORPORATION .

Place: \_\_\_\_\_

Signature of Competent Officer : \_\_\_\_\_

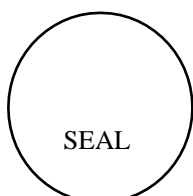
Date: \_\_\_\_\_

Name of Competent Officer: \_\_\_\_\_

Designation : \_\_\_\_\_

Department / Corporation : \_\_\_\_\_

Address of Organization/ Corporation : : \_\_\_\_\_





(To be executed by the applicants through "MP/MLA/MLC" Category)

## SELF DECLARATION

Applicant  
Photo

I, Shri/Smt./Ms./ \_\_\_\_\_ son/ daughter/ wife of \_\_\_\_\_ age \_\_\_\_ years do hereby solemnly affirm on oath and state as follows.

1. I have been offered allotment of a tenement by Mumbai Board / MHADA under scheme code No. \_\_\_\_ at \_\_\_\_\_ vide Board's letter No. \_\_\_\_\_ Dated. \_\_\_\_\_
2. I shall be entitled to get one tenement or plot at any place in the Maharashtra State.
3. I shall not be in possession of a tenement or plot on ownership basis, hire- purchase basis at a place where I desire to ~~have~~ tenement constructed by MHADA.
4. If I already possess from Government or MHADA a tenement or a plot either on rental / on leave and license basis / on hire purchase basis or on outright sale basis, I shall have to surrender the said tenement (s) to the Government or MHADA, as the case may be.
5. I shall not be eligible to get accommodation in the MLA's Hostel either at Mumbai or at Nagpur if I secure a tenement from MHADA at the place or has already constructed a house on a plot secured at the from MHADA.

I affirmed on this day \_\_\_\_\_ month of 201.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_ hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place: \_\_\_\_\_

Applicants Thumb Impression

Applicant Signature :

Date: \_\_\_\_\_

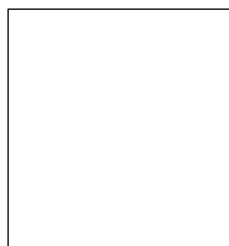
Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_



(Self Declaration of Income from service and other sources / employment)

SELF DECLARATION



I Mr./Mrs./ Ku/\_\_\_\_\_ age \_\_\_\_ yrs .Indian Citizen, residing  
 \_\_\_\_\_ declare that my husband / wife Mr./ Mrs. / -----  
 ----- applied for scheme Code \_\_\_\_ in scheme code No. \_\_\_\_\_ of Mumbai Board  
 having application No. \_\_\_\_\_.

I Mr. / Mrs. \_\_\_\_\_ declare that I am employee of----- company and I  
 having my average monthly income of Rs ----- along with I have my own business and from that  
 business my income of last 12 months (i.e. \_\_\_\_\_ to \_\_\_\_\_) of Rs. ----- -- . I declare that from the  
 both service and business my monthly income of Rs. ----- --.

I declare that the information mentioned as provided above is true and correct to the best of my personal knowledge,  
 information and belief. If the information is given above found false, MHADA/ Mumbai Board cancelled of allotment of  
 tenement and liable for prosecution and punishment.

I declared that the information provided above is true and correct to the best of knowledge and belief.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation \_\_\_\_\_ resident of \_\_\_\_\_

hereby declare that the information provided above is true and correct to the best of my personal knowledge, information and  
 belief. I fully understand the consequences of giving false information. If the information as given above is found to be false, I  
 shall be liable for prosecution and punishment under section 199 and 200 of IPC 1960 and / or any other law applicable  
 thereto.

Place: \_\_\_\_\_

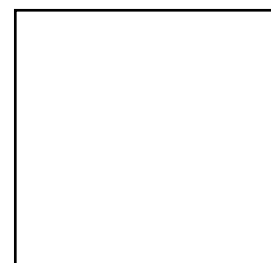
Applicant Signature :

Applicants Thumb Impression

Applicant Name: \_\_\_\_\_

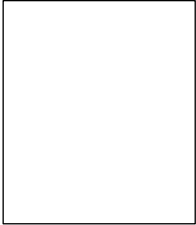
Application No. : \_\_\_\_\_

Date: \_\_\_\_\_



(Self-Declaration regarding not having residential tenement or plot in jurisdiction of MCGM)

SELF-DECLARATION



I Mr./Mrs./ Ku/ \_\_\_\_\_ Age \_\_\_\_ yrs .Indian Citizen, residing  
 \_\_\_\_\_ declare that my husband / wife Mr./ Mrs. / -----  
 ----- applied for scheme Code \_\_\_\_ in scheme code No.\_\_\_\_ of Mumbai Board having  
 Application No.\_\_\_\_\_.

\_\_\_\_\_ hereby declare that in the jurisdiction of Mumbai Municipal Corporation of Greater  
 Mumbai. I / my husband / wife / minor neither having any kind of residential tenements or residential plot allotted by MHADA or  
 personally acquired, on the basis of self-ownership or hire purchase basis nor I / my husband / wife / minormember of any  
 registered housing Co-operative Society.

I declare that I have applied for MHADA Lottery wide Application No. \_\_\_\_\_ in Scheme Code No. \_\_\_\_\_ Category  
 ME on Dt. ----- --. Any kind of Residential Tenement or Residential Plot have not been allotted to me / my  
 husband / my wife / minor.

I declare that the information mentioned as provided above is true and correct to the best of my personal knowledge,  
 information and belief. If the information is given above, found false, MHADA/ Mumbai Board cancelled of allotment of  
 tenement and liable for prosecution and punishment.

I declared that the information provided above is true and correct to the best of knowledge and belief.

I \_\_\_\_\_ son / daughter of \_\_\_\_\_ aged \_\_\_\_\_ yrs Adhar No. \_\_\_\_\_ occupation  
 \_\_\_\_\_ resident of \_\_\_\_\_ hereby declare that the information provided above is true and  
 correct to thebest of my personal knowledge, information and belief. I fully understand the consequences of giving false  
 information. If the information as given above is found to be false, I shall be liable for prosecution and punishment under section  
 199 and 200 of IPC 1960 and / or any other law applicable thereto.

Place: \_\_\_\_\_

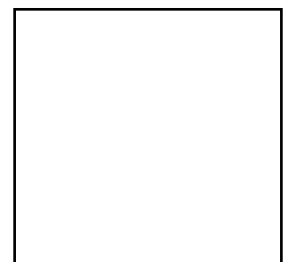
Applicant Signature :

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Application No. : \_\_\_\_\_

Applicants Thumb Impression



## **Document Submission Center:**

Counter No.16, Room No. 240,Office of Deputy chief officer/ Marketing/ Mumbai board, 1<sup>st</sup> floor, Grihnirman Bhavan,Mumbai  
Housing & Area Development Board, Bandra East, Mumbai-400 051.