

SAMPLE FORM OF APLLICATION

To

The State Public Information Officer/
The State Asstt. Public Information Officer,
Disaster Management & Rehabilitation Department,
Directorate of DM & R, Mizoram, Aizawl - 796009.

1. Full name of the applicant : Liana
2. Father/spouse name : Ruala (father)
3. Permanent address with Contact Nos. : H.No. 27/Hunthar, Aizawl,
Mizoram - 796009
Ph. No. 0389 2340464
9436155109 (M)
4. Particulars in respect of Identity of the applicant : President, YMA
Hunthar Branch, Aizawl.
4. Particulars of information solicited.
 - a) Subject matter of information : List of MNF Returnees
 - b) The period to which the information relates. : 1986 - 1987
 - c) Specific details of information required. : Names of all heads of the Families of the MNF Returnees.
 - d) Whether information is required by the post or in person (the actual postal charges shall be included in providing information. : In person
 - e) In case by post (ordinary, registered or special. : Not arise.

5. Address to which information will be sent and in which form. : As feel suitable by the Public authority.
7. Has the information provided Earlier. : No.
8. In this information not made available. : No.
9. Do you agree to pay the Required fee. : Yes
10. Have you deposited application Fee(If yes details of such deposit) : Rs. 10/- vide Receipt No. _____ Dt. _____
11. Whether belongs to BPL Category, have you furnished the proof of the name. : No.

Place : Aizawl

Dt. _____

(LIANA)
Full Signature of the applicant
Address : Hunthar, Aizawl
Contact Nos. 0389 2340469
9436155109 (M)