

FORM-A
[See rule (3)(1)]
Application form for obtaining Information

ID NO.
(For office use)

To,

The Chakma District Public Information Officer.
Chakma Autonomous District Council,
Kamalanagar : Mizoram.

1. Name of the applicant:
2. Full address:
3. Particulars of information required: (in brief):
4. I hereby stated that the information sought for is not covered under the categories which are Exempted from disclosure of information under section 8 or under section 9 of the Right to Information Act. 2005 and to the best of my knowledge, it is pertaining to the Chakma Autonomous District Council.
5. *(1) I hereby submit the prescribed application fee of Rs. _____ (in words Rupees _____) only vide payment of application fee Receipt No. _____ dt. _____ of the Chakma Autonomous District Council.
*(2) I enclosed herewith Demand Draft/Pay Order No. _____ dt. _____ drawn. In favour of Chakma Autonomous District Council issued by _____ (Bank) towards the fees payable.
*(3) I belong to BPL family . Xerox copy of my Card/Certificates is enclosed herewith.

Place _____
Date _____

Signature of applicant:
e- mail address, if any :
Telephone No. (Office):
(Residence):

- N.B : Person belonging to BPL family need not pay any type of fees
: * Strike out whichever is not applicable.