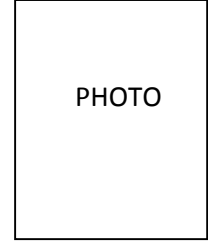


**OFFICE OF THE MUNICIPAL CORPORATION: BODUPPAL
MEDCHAL - MALKAJGIRI DISTRICT**

APPLICATION FOR PENSION

To,
The Commissioner,
Boduppal Municipal Corporation,
Medchal - Malkajgiri District.



Respected Sir,

I am belong to poor family and eligible for Old age / Widow / Disabled / Toddy Tapper / Weaver pension. I may please be sanction pension.

1. Name (Full) :
2. Sex : Male / Female
3. Age : Years
4. Father / Husband name :
5. House No. :
6. Habitation name :
7. Area Name :
8. Municipality Name :
9. Aadhaar Number :
10. If disabled,
 - a. SADAREM ID No. , if assessed under SADAREM :
 - b. Degree of disability :
11. If widow,
 - a. Date of death of Husband :
(Attach Death certificate as proof)
12. If Toddy tapper, membership ID. No. of Toddy Co-operative Society or Individual tapper of "Tree of Tapper" Scheme. :
13. If Weaver, membership ID. NO. of Weavers Society. :
14. Phone number :

Applicant Signature / Thumb Impression