



**REVENUE DEPARTMENT, GOVT. OF NCT OF DELHI**  
**APPLICATION FORM – INCOME CERTIFICATE**

**BENEFICIARY DETAILS**

1.e-DistrictRegistration Number :

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(For already Registered User- Not to be filled in by first time Applicants or those having Aadhaar number)

**OR**

2. UID (AADHAAR) No :

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3. Name of Beneficiary :

4. Name of Father :

5. Name of Mother :

6. Name of Spouse :

7. Gender :

Male

Female

Other

8. Date of Birth :

DD	MM	YYYY
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**Beneficiary color  
Passport Size  
Photograph  
Size – 5 x 4.5 (Cm.)  
Or  
2 x 1.75 (Inch)**

9. Mobile No. :

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e-Mail ID :

@ \_\_\_\_\_

10. Present Address :

House Name/No : \_\_\_\_\_

Locality : \_\_\_\_\_

Sub- division : \_\_\_\_\_

State : \_\_\_\_\_

PIN Code : \_\_\_\_\_

Sub-Locality : \_\_\_\_\_

Village/Town : \_\_\_\_\_

District : \_\_\_\_\_

Country : \_\_\_\_\_

11. Whether the Present and Permanent Address is same :

Yes

No

12. if No, Permanent Address :

House Name/No : \_\_\_\_\_

Locality : \_\_\_\_\_

Sub- division : \_\_\_\_\_

State : \_\_\_\_\_

PIN Code : \_\_\_\_\_

Sub-Locality : \_\_\_\_\_

Village/Town : \_\_\_\_\_

District : \_\_\_\_\_

Country : \_\_\_\_\_

13. Purpose to obtain certificate (Please tick any one)

For availing charge concession in Education Institution

For securing seats in the quota reserved in professional college in socially economical Backward classes.

For obtaining loans from Government departments.

For getting Pension

For getting financial aid available to Ex-serviceman.

For getting the loan available to SC/ST for different purpose.

For getting the relief given to the victims of natural calamities.

For getting the artificial limb, cycle etc. supplied to physically handicapped passes.

For getting free Ration card etc.

Others

14. Period of Stay in Delhi: \_\_\_\_\_ Year(s)

Month(s)

15. Whether Income certificate issued earlier? :

Yes

NO

**If yes, attach copy of certificate and provide below details**

a. Income Certificate No : \_\_\_\_\_

b. Amount : Rs. \_\_\_\_\_



16. Whether living in :  Owned House  Rented House

17. In case of Owned House  
a. Area of the House: \_\_\_\_\_ Yards. c. Number of Floors Rented: \_\_\_\_\_  
b. Number of Floors : \_\_\_\_\_ d. Total Monthly Rental Income: Rs \_\_\_\_\_

18. In case of Rented House (*Attach copy of rent agreement*)  
a. Monthly Rent : Rs. \_\_\_\_\_

19. Are you BPL Ration Card / NFS Card Holder? :  Yes  No  
*If yes, Provide the details and attach Ration Card*  
Ration/NFS Card No : \_\_\_\_\_ Issue Date :

20. Are you Income Tax Payer? :  Yes  No  
*If yes, attach copy of Last Financial year IT Return and provide below details*  
Pan Card No. : \_\_\_\_\_

21. Are you Salaried Employee? :  Yes  No  
22. If yes, :  Government  Private  
*(Attach Last 3 Month Salary Slip/ Certificate from Employer)*

23. Details of Employer :-  
a. Name of the Employer : \_\_\_\_\_  
b. Address of the Employer:-  
House Name/No : \_\_\_\_\_ Sub-Locality : \_\_\_\_\_  
Locality : \_\_\_\_\_ Village/Town : \_\_\_\_\_  
Sub-division : \_\_\_\_\_ District : \_\_\_\_\_  
State : \_\_\_\_\_ Country : \_\_\_\_\_  
PIN Code : \_\_\_\_\_  
c. Telephone No : \_\_\_\_\_

24. If No, Occupation: \_\_\_\_\_  
25. Monthly Income from Job/Occupation : Rs. \_\_\_\_\_

26. Details of family their Income (*Attach copy last six months bank statement and copy of PAN card*)

S.NO	Name	Age	Relationship with Applicant	Occupation/Job	If Income tax Payee Provide PAN card No.	Bank A/c No and bank name	Monthly Income
1.					_____		
2.					_____		
3.					_____		
4.					_____		
Total Monthly Family Income :							

27. Please provide the following details of Assets :

S.NO	Items	Whether Owned (Yes/No)	Quantity
1.	Car		
2.	Two Wheeler		
3.	Air Conditioner		
4.	Colour Television		
5.	Refrigerator		
6.	Water purifier		
7.	Inverter		
8.	Cooler		
9.	Cable/DTH Connection		
10.	Mobile Connection		
11.	Land Line		



**28. Please Provide the Details of the Monthly Expenditure on the Following: (Attach relevant document)**

- a. Electricity Bill : \_\_\_\_\_ e. Kitchen expenditure  
b. Water Bill : \_\_\_\_\_ (including gas+ kerosene) : \_\_\_\_\_  
c. Landline and Mobile Phone Bill: \_\_\_\_\_ f. Ration Expenditure : \_\_\_\_\_  
d. Travelling expenditure g. Property Tax : \_\_\_\_\_  
(Petrol and Maintenance) : \_\_\_\_\_ h. Other Household expenditure : \_\_\_\_\_

29. Whether loan taken :  Yes  No  
If Yes, Monthly installment : Rs. \_\_\_\_\_

**30. Please provide the details of children studying : (Attach School fees Receipt)**

S.No.	Name of the Child	Name of the School/ College	Monthly fees
Total :			

31. Total Monthly Expenditure (18+28+29 +30) : Rs. \_\_\_\_\_

32. Total Monthly Income of family from all sources : Rs. \_\_\_\_\_

**33. Identity Proof of Beneficiary (Please tick one, provide the document No. and attach the same )**

- Aadhaar Card  PAN Card  Ration Card with Photograph  
 Voter ID Card  Passport  Driving License  
 Any Govt. recognized document Document No :

**34. Present Address Proof of Beneficiary (Please tick one, provide the document No. and attach the same )**

- AADHAR Card  Voter ID Card  Driving License  
 Passport  Ration Card  Electricity Bill DISCOM Name \_\_\_\_\_  
 Water Bill Utility Name \_\_\_\_\_  Gas Bill Comp Name \_\_\_\_\_  
 Telephone Bill Company name \_\_\_\_\_  Any Govt. recognized document  
 Rent Agreement (Registered)  Bank Passbook Document No :

**35. Permanent Address Proof of Beneficiary (Please tick one, provide the document No. and attach the same )**

- AADHAR Card  Voter ID Card  Driving License  
 Passport  Ration Card  Electricity Bill DISCOM Name \_\_\_\_\_  
 Water Bill Utility Name \_\_\_\_\_  Gas Bill Comp Name \_\_\_\_\_  
 Telephone Bill Company name \_\_\_\_\_  Any Govt. recognized document  
 Rent Agreement (Registered)  Bank Passbook Document No :

**Declaration:** I hereby solemnly affirm & declare that, all of the above furnished information, is true & correct to the best of my knowledge. I am fully aware that furnishing incorrect or false or forged information will lead to punitive action against me under the relevant statutory provisions.

Date:  DD  MM 20YY

Beneficiary Signature :

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

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