GOVERNMENT OF SIKKIM OFFICE OF THE DISTRICT CIVIL SUPPLIES OFFICER SIKKIM

VERIFICATION REPORT FORM

(1)	Name of the applicant:					
(2)	Resident of					
(3)	Location of the Shop:	Constituency:				
(4)	Profession of the applicant:					
(5)	Trade Licence No					
(6)	Controlled Commodity Licence No. (If any):					
(7)	Whether the shop is in Rural area or Bazar area:					
(8)	No. Of shops dealing with the Controlled Commodities in the area that the applicant shop belongs to:					
	(A) PDS:					
	(B) General:					
(9)	The applicant has applied for:	(A) FPS/TPDS				
		(B) Rice				
		(C) Wheat & Wheat Products				
		(D) Sugar				
		(E) S. K. Oil				
		(F) Palmoline Oil				
(10)	Category of the area: (General/SC/ST)					
(11)	Approximate population of the area supposed to be covered by the applicant's Shop:					
(12)	Number of Households in the area supposed to be covered by the applicant's Shop:					
(13)	13) Precise names of the blocks supposed to fall under the applicant's Shop:					
	(A)(B)	(C)(D)				
(14)	Distance between the applicant's	s shop and the nearest Food Distribution Centre				
	Kilometre.					
(15)	Transportation charge from the nearest Food Distribution Centre to the applicant's shop:					
	RsPer quintal					
(16)	Other incidental charges evisaged to occur in transportation of Foodgrains from the food Distribution Centre					
	to the applicant's shop:					
	(A)					
	(B)					
	(C)					

(17)	Mode of transportation by: Jeep/Truck:				
(18)	Condition of the Road between Food Distribution Centre and the applicant's shop:				
	Good or Not Good:				
(19)	Whether the House/Room where the applicant runs the shop is his/her own or rented:				
	Own/Rented room:				
(20)	If rented:	(a)	Name of the actual house owner: Shri/Smt		
			Full Address of the House Owner:		
		(B)	Monthly rent: Rs.		
(21)	Applicant's go	odown c	apacity:And Size:		
(22)	Condition of t	he appli	cant's godown: Suitable/Not Suitable:		
(23)	Applicant's social reputation: Good/Not Good				
(24)	Financial status of the applicant: Good/Not Good				
(25)	In th event of appointment of the applicant as a Govt. Retail shop/Fair Price Shopkeeper, the people of the				
	area will be benefitted: Yes/No.				
(26)	Recommendation of the Local Panchayat, (to be attached). (Majority members)				
(27)	Recommendation of the SDM/DC.				
(28)	Comments/O	bservat	ion of the verifying Inspector/Incharge: withing this space:-		
(Inforr	nation found in	conveni	ent to be furnised in this form may be given in a separate annexure.) Signature of Inspector/Incharge		

GOVERNMENT OF SIKKIM OFFICE OF THE DISTRICT CIVIL SUPPLIES OFFICER SIKKIM

No/DCSO/FCS	Date:
To,	
The Incharge, Foodgrain Godown, Food & Civil Supplies & CA Deptt., Government of Sikkim.	
Sub: VERIFICATION	
Of	annlied for his/her annointment as a Government
Retail Distributor/Fair Price Shopkeeper to distribute	
To the public of	
	verification in respect of the applicant as per the
Enclo: As Above	District Civil Supplies Officer