

V. State present monthly income of the family, from all sources which helps the applicant family to maintain itself Rs. \_\_\_\_\_

State approximate minimum monthly expenditure Rs. \_\_\_\_\_

VI. Did any member of the applicant's family receive/received any assistance from the Institute of Public Assistance or other Govt. Department. Yes/No

If yes, please give the following information

| Sr. No. | Name & address of the Govt. Department | Amount received | When |
|---------|----------------------------------------|-----------------|------|
| 1.      |                                        |                 |      |
| 2.      |                                        |                 |      |

Yours faithfully,

Dated:

(Signature/Left thumb impression  
of the applicant)  
duly attested by Gazetted Officer/Sarpanch/  
/Local M. L. A.  
Contact No.:

Enclosures to be submitted along with this form:

1. Residential Certificate for 15 years issued by Taluka Mamlatdar.
2. Medical Certificate issued by Govt. Hospital indicating the illness and certifying that Medicines prescribed are not available in the Hospital Pharmacy.
3. Income Certificate issued by Competent Authority (Income limit Rs. 1,50,000/-).
4. Marriage Registration Certificate.
5. Copy of Aadhaar Card.

Application Form should be duly completed in all respects.