

**INDRAPRASTHA GAS LIMITED****APPLICATION FORM****FOR SELLING LAND PARCEL TO IGL FOR SETTING UP OF OFFICE IN BANDA GA****A. Applicant Information :**

1. Name of Applicants/Land owner: or 1. Name of Joint Holder/Nominee (if any)	
2. Father/Spouse's Name:	
3. Address:	
4. Contact Details:	Mobile No: _____ Email: _____
5. Address Proof: (Adhar/Voter/Passport/etc. ID)	

B. Details Of Offered Land :

1.Type of Land:	
2.Location of the Plot:	
3.Longitude/Latitude Coordinates of the Centre point of Plot:	
4.Address of the Plot:	
5. Specify the relevent information	
5.1 Khasra/Gata/Kila Number:	
5.2 Khata Number:	
5.3 Khatauni Number:	
5.4 City Survey no. of plot & village:	
5.5 Area of the plot (In Sq mtrs):	
5.6 Frontage available (In mtrs):	
5.7 Depth of the plot (In mtrs):	
5.8 Details of the surroundings (Indicate approx. Distance between the surroundings and plot boundary):	
East- _____	West- _____ South- _____ North- _____
5.9 Availability of power/electricity connection:	
5.10 Availability of water connection:	
5.11 Encroachments, if any:	
5.12 Trees in the Plot (If Yes, No. of Trees):	
5.13 Whether offer plot is situated on National highway/State highway/DR etc.:	
5.14 Details of any adjoining roads(main Road, service road etc.) indicate widht of road:	
5.15 Any pathway crossing the land:	
5.16 Any high voltage transmission lines Near by,If yes distance from the plot: in mtrs:	
5.17 Nearest police station:	
5.18 Nearest fire station :	
5.19 Whether title of plot is clear, marketable and Undisputed:	
5.21 Whether the owner has received any notice of any type from any statutory body/ Agency for the referred plot. If yes, details there of:	
6. Khewat/Khatauni/Jamabandi of the subject land certified by the Patwari:	
8. Mutation Records Jamabandi for last 20 years:	
9. Land Use:	

10. Layout plan superimposed on Naksha shijra (signed by Owner):	
C. Others (If applicable):	
Tick n Fill whichever is applicable	
1. Private Limited / Partnership Firm	
a. Number of Directors:	
b. Certificate of Incorporation:	
c. Authority Letter and copy of resolution specifying name of the authorized person for making application:	
d. Balance sheet (Last 3 Years):	
Or	
2. Registered Co-Operative/Consumer Societies	
a. Attested copy of Certificate of Registration:	
b. Authority Letter and copy of resolution specifying name	
c. Balance sheet (Last 3 Years):	
Or	
3. Organized Bodies	
a. Attested copy of Certificate of Registration:	
b. Authority Letter and copy of resolution specifying name of the authorized person for making application:	
c. Balance sheet (Last 3 Years):	
I, hereby declare that I have read the above attached guidelines & the information submitted above is true to my knowledge.	
Note: All Fields are mandatory.	

Name of the Authorised Signatory

Signature of the Authorised Signatory