UD and HD Department- Arunachal



Pradhan Mantri Awas Yojana - Housing for All (Urban)

Format B- Required Information of Beneficiary Under Pradhan Mantri Awas Yojana (Housing For All-2022)

		Name of the ULB		Ward No	
1-	Name of	Head Of The Family			
2-	Sex [Mal	e: 01, Female: 02, Transgender:03]			
3-	Eather's	/ Hushand's Name			
J -	Father's/ Husband's Name				
4-	Mother's	s name			
5-	Age of h	ead of the family			
_	Dunnant	Address			
6-	Present (i)	Ward No:			
	(ii)	House/Flat/Door No			
	(iii)	Name of the Street			
	(iv)	City			
	(v)	Mobile No.			
	(*)	Widdle No.			
7-	Perman	ent Address			
	(i)	House/Flat/Door No			
	(ii)	Name of the Street			
	(iii)	City/ Village			
	(iv)	District/ State			
8-	Owners	hip details of existing house			
		[Own – 01, Rent – 02, Otherwise – 03]			
9-	Type of the house based on roof type				
		[Pucca (CC & Stone Slab)-01, Semi-Pucca			
		(Asbestos/ Steel Sheet, Tiled)-02,			
		Katcha (Grass/thatched, Tarpaulin, Wooden)-03]			
10-	Number kitchen	of rooms in the dwelling unit excluding			
11		Card Number, if not available			
11-		ard/Any other unique identification number cate of house ownership from Revenue Authority of beneficiary's native	district		
12-	Number	& age of family members			
					Aadhaar card /Voter ID Card/Any
		Relationship to Head of the Family	Gender	Age	other unique identification number or
	-	Tiedd of the Falling	ı	1	a certificate of house ownership from
13-	Religion		r		
		[Hindu-01, Muslim-02, Christian-03, Sikh-04, Jainism-			
		05, Buddhism- 06, Zoroastrianism-07, others (specify)-08]			
			L		
14-	Caste	[Carraval 04 CC 03 CT 03 CDC 04]			
		[General-01, SC-02, ST-03, OBC-04]			

15-	Bank De	etails								
		a. Bank account number b. Name of the Bank & Branch								
		c. IFSC Code of Bank								
16-	Number	of Years of Stay in this Town/City [0 to 1 year -01, 1 to 3 years- 02, 3 to 5 years- 03, Mor	re than 5 years-041							
			e than 5 years 5-1							
17-	Size of e	xisting dwelling unit (Carpet area in squaremeters)								
18-	Whether	Person with Disability (Yes/No) 🛚								
19-	Marital S	Status⊡								
		[Married-01, Unmarried-02, Single woman/Widow-03]								
20-	Whether	the family owns any house								
		re in India (Yes/No)								
	a	If yes, then location details (Locality/City/State)								
	b	If yes, then extent of land in Sq.mtrs								
21-	Employn	nent Status								
		(Self Employed – 01, Salaried – 02, Regular Wage – 03, Labour -	- 04. Other – 05)							
		(p. / , , ,	, ,							
22-	Average	monthly income of household (in Rs.)								
23-	Does the	family have a BPL Card (Yes / No)								
		a. If yes, Provide BPL Card No								
24-	Housing	requirement of family								
		(New House – 01, Enhancement – 02)								
25-	In case o	f enhancement, please specify enhancementequired								
		01-One Room,02-Kitchen,03-Bath,04-Toilet,06-One ro One room + Bathroom,09-One room + Toilet + Kitcher								
26-	Preferre	Preferred component of Mission under which beneficiary need assistance under HFA								
	(i)	Credit linked subsidy - 01								
	(ii)	Affordable Housing in Partnership - 02								
	(iii)	Beneficiary-led individual house construction/Enhancement - 0	3							
27-	Abridged	Houselist TIN (from SECC)								
	(If assistar	nce under Beneficiary-led individual house construction/enhancer	ment)							
				Photograph of						
				the						
	Signatur	e/Thumb Impression of Head of Household		Beneficiary						
	Jibilatali	e, impression of freed of floudefloid								
				1						
	Signatur	e of representative of ULB in-charge								
	of above	information								