HARYANA RENEWABLE ENERGY DEVELOPMENT AGENCY (RENEWABLE ENERGY DEPARTMENT, HARYANA)

APPLICATION FORMAT FOR PURCHASE OF SPV HOME LIGHTING SYSTEM (MODEL-III) TO BE SUBMITTED WITH THE OFFICE OF ADDITIONAL DEPUTY COMMISSIONER OF THE CONCERNED DISTRICT

NAME OF THE BENEFICIARY	:	
FATHER'S NAME	:	
OFFICIAL ADDRESS	:	
RESIDENTIAL ADDRESS	:	
TELEPHONE NO.	:	
CATEGORY	:	
RATION CARD NO./ PHOTO	:	
IDENTITY CARD NO./		
ANY IDENTITY REF.NO.		

Certified that I will not sell/ lend/ gift domestic light supplied to me under the Government subsidies schemes. I will also produce the SPV domestic light to the Government officer/ representative for monitoring purpose, whenever required.

		Signature of	
FOR OFFICE USE ONLY			
Advance booking receipt No	Date	Amount	
Final payment receipt No	Date	Amount	
Date of issue of domestic light			
Make of B.O.S		Sr.No	
Make of module		Sr.No	
Date			

P.O/ APO

I understand that violation of above should lead to cancellation of my ration card/ proof

attached.

Dealing Clerk/ TA

HARYANA RENEWABLE ENERGY DEVELOPMENT AGENCY (RENEWABLE ENERGY DEPARTMENT, HARYANA)

APPLICATION FORMAT FOR PURCHASE OF LED BASED SOLAR LANTERN TO BE SUBMITTED WITH THE OFFICE OF ADDITIONAL DEPUTY COMMISSIONER OF THE CONCERNED DISTRICT

NAME OF THE BENEFICIARY	:	
FATHER'S NAME	:	
OFFICIAL ADDRESS		
OFFICIAL ADDRESS	:	
RESIDENTIAL ADDRESS	:	
TELEPLIONE NO		
TELEPHONE NO.	:	
CATEGORY	:	
RATION CARD NO./ PHOTO	:	
IDENTITY CARD NO./		
ANY IDENTITY REF.NO.		

Certified that I will not sell/ lend/ gift the LED based Solar Lantern supplied to me under the Government subsidies schemes. I will also produce the LED based Solar Lantern to the Government officer/ representative for monitoring purpose, whenever required.

I understand that violation of above should lead to cancellation of my ration card/ proof attached.

FOR OFFICE USE ONLY		
Advance booking receipt No	Date	Amount
Final payment receipt No	Date	Amount
Date of issue of domestic light		
Make of B.O.S	S	r.No
Make of module	Sr	:.No
Date		
Dealing Clerk/ TA		P.O/ APO

HARYANA RENEWABLE ENERGY DEVELOPMENT AGENCY (RENEWABLE ENERGY DEPARTMENT, HARYANA)

APPLICATION FORMAT FOR PURCHASE OF LED BASED HOME LIGHTING SYSTEM TO BE SUBMITTED WITH THE OFFICE OF ADDITIONAL DEPUTY COMMISSIONER OF THE CONCERNED DISTRICT

NAME OF THE BENEFICIARY	:	
FATHER'S NAME	:	
OFFICIAL ADDRESS	:	
RESIDENTIAL ADDRESS	:	
TELEPHONE NO.	:	
CATEGORY	:	
RATION CARD NO./ PHOTO	:	
IDENTITY CARD NO./		
ANY IDENTITY REF.NO.		

Certified that I will not sell/ lend/ gift the LED based Home Lighting System supplied to me under the Government subsidies schemes. I will also produce the LED based Home Lighting System to the Government officer/ representative for monitoring purpose, whenever required.

I understand that violation of above should lead to cancellation of my ration card/ proof attached.

FOR OFFICE USE ONLY		
Advance booking receipt No	_Date	Amount
Final payment receipt No	_Date	Amount
Date of issue of domestic light		
Make of B.O.S	Sr.	No
Make of module	Sr.1	No
Date		
Dealing Clark/TA		D O/ADO
Dealing Clerk/ TA		P.O/ APO

MONITORING FORMAT FO	₹
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Name of District:-

Name of Block:

Sr. No.	No. beneficiary address month of		month of	B.O.S		Battery		Module		Status	
			installati on							Working	If not working reasons, thereof
				Sr. No	Make	Sr. No	Make	Sr. No.	Make		