

Form II
[See sub-rule (3) of Rule 7]

Acknowledgement for Incomplete Application

From:

.....
.....
..... (The Designated Officer / Authorised Officer with full office address,
email and other contact details)

To:

.....
.....
..... (Name and address of the applicant)
Email:
Mobile:

Ref: Your application dated for
Name of the Service

The following defects in the application may be rectified, urgently:
(Specify defects, if any)

- (1)
- (2)
- (3)

The following required documents may please be submitted immediately: -

- (1)
- (2)
- (3)

Place :

Date :

Please note that the stipulated time limit for the above service as notified under sub-section (2) of Section 3 of the Meghalaya Right to Public Service shall start from the date on which the application is received complete in all respects by the Designated Officer.

Yours sincerely,

(Designated Officer / Authorised Officer)
(Office Seal)