APPLICATION FOR ALLOTMENT OF MEA TRANSIT ACCOMMODATION

| 1. | Name & Date of Birth | | | : | |
|---|---|---------------------|--------------------------------------|--------------|-----------------------|
| 2. | Designation | | | : | |
| 3. | Pre | esent de | ployment | : | |
| 4. | (a) (b) | | er residing in MEA Accommodation es, | | YES/NO |
| | (i) Flat No.(ii) Name of MEA Residential Complex/Hostel | | | : | |
| 5. | | stel whe Juested | re transit accommodation is | : | |
| 6. | Date from which or period for which accommodation is required : | | | | |
| 7. | Reason for request of transit accommodation: | | | | |
| 8. | Is the accommodation is for self, if not, details of persons for whom accommodation has been requested: | | | | |
| | | SI. No. | Name of Guest | | Relation with Officer |
| | | 1 | | | |
| | | 2 | | | |
| | | 3 | | | |
| Note: While effort will be made to allot transit accommodation keeping in view the requirement of the applicants, however, allotment will be done as per availability of accommodation. Declaration of applicant:- | | | | | |
| (i) (ii) | Certified that the above information is correct. I am aware of the penalties, which can be imposed in the event of furnishing of false rmation, subletting/misuse of the premises under GOI Allotment Rules. | | | | |
| | | | | | |
| Data | | | | Signature: | |
| Date : | | | | Contact No.: | |
| | | | | E-mail id: | |
| AO (Housing) | | | | | |