

**PUNJAB RIGHT TO SERVICE ACT 2011**

**LOCAL GOVERNMENT DEPARTMENT PUNJAB**

FROM FOR SEEKING SERVICE: MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (112) Issue of Conveyance Deed in Municipal Corporation

(Stipulated Time 15 Days)

1	Date of Application			
2	Name of the Applicant			
3	Father's/Husband's name			
4	Address	City/Village		P.O
		Tech.		Distt
		Phone/Mobile. No		
		E-mail ID, if any		
5	Issue of Conveyance Deed ULBs Requirement	a	Plot No _____	Name of Area/Monalia
		b	Departmental Fees.	
		c	Any other.	
		d		
		e		
6	Documents to be attached			
Sr No.		Checklist	Checklist (For Office Use only)	
(i)	Allotment letter	Yes/No	Yes/No	
(ii)	Copy of Agreement of sale	Yes/No	Yes/No	
(iii)	Proof of water supply connection, sewerage connection and electricity connection, if taken.	Yes/No	Yes/No	
(iv)	Proof of clearance of all dues issued by Municipal Corporation.	Yes/No	Yes/No	
7.	Signature of the Applicant:			

**(FOR OFFICE USE)**

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

**(ACKNOWLEDGEMENT SLIP)**

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Sanction of Water Supply/Sewerage Connection			
6	Documents to be attached	A	Allotment letter	Yes/No	
		B	Copy of Agreement of sale		
		C	Proof of water supply connection, sewerage connection and electricity connection, if taken.	Yes/No	
		D	Proof of clearance of all dues Issued by Municipal Corporation.	Yes/No	
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	

**PUNJAB RIGHT TO SERVICE ACT 2011**

LOCAL GOVERNMENT DEPARTMENT PUNJAB

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FROM FOR SEEKING SERVICE: Improvement Trust \_\_\_\_\_

Service asked for: (113) Sanction of Water Supply/Sewerage Connection

(Stipulated Time 7 Days)

1	Date of Application		
2	Name of the Applicant		
3	Father's/Husband's name		
4	Address	City/Village	P.O
		Tech.	Distt
		Phone/Mobile. No	
		E-mail ID, if any	
5	Sanction of Water Supply/Sewerage Connection. ULBs Requirement	a	Plot No _____ Name of Scheme
		b	Departmental Fees.
		c	Any other.
		d	
		e	
6	Documents to be attached		
Sr No.		Checklist	Checklist (For Office Use only)
(i)	Allotment letter	Yes/No	Yes/No
(ii)	Copy of approved Building Plan.	Yes/No	Yes/No
(iii)	A site plan of the plot on which it is intended to obtain Water Supply/ Sewer Connection.	Yes/No	Yes/No
(iv)	Self Declaration regarding correctness of the information supplied.	Yes/No	Yes/No
(v)	Proof of clearance of all dues issued by Improvement Trust	Yes/No	Yes/No
7.	Signature of the Applicant:	Yes/No	Yes/No

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.	2.	Date
3.	Date by which Service to be provided	4.	Fees/Facilitation Charges, if any
5.	Name of the Designated Officer	6.	Designation
7.	Location: 1.Office 2.Suvidha Center	8.	Signature of D.O/ Receiving Officer

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.	2.	Date
3.	Date by which service to be provided.	4.	Fees/Facilitation Charges, if any
5	Service asked for	Sanction of Water Supply/Sewerage Connection	
6	Documents to be attached	a	Allotment letter Yes/No
		b	Copy of approved Building Plan. Yes/No
		c	A site plan of the plot on which it is intended to obtain Water Supply/ Sewer Connection. Yes/No
		d	Self Declaration regarding correctness of the information supplied. Yes/No
		e	Proof of clearance of all dues Issued by IT Yes/No
7(a)	Name of the Designated Officer	b	Designation
c	Location: 1.Office 2.Suvidha Center	d	Signature of the Designated Officer

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FROM FOR SEEKING SERVICE: MUNICIPAL COMMETTIE/MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (114) Issue of New Trade License

(Stipulated Time 12 Days)

1	Date of Application				
2	Name of the Applicant				
3	Father's/Husband's name				
4	Address	City/Village		P.O	
		Tech.		Distt	
		Phone/Mobile. No			
		E-mail ID, if any			
5	Issue of New Trade License ULBs Requirement	a	Simple Application.		
		b	Departmental Fees.		
		c			
		d			
		e			
			Checklist	Checklist (for office use only)	
6	Documents to be attached	(a)	Simple Application.	Yes/No	Yes/No
		(b)			
		(c)			
		(d)			
		(e)			
7.	Signature of the Applicant:				

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Issue of New Trade License			
6	Documents to be attached	a	Simple Application	Yes/No	
		b			
		c			
		d			
		e			
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	

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LOCAL GOVERNMENT DEPARTMENT PUNJAB

FROM FOR SEEKING SERVICE :MUNICIPAL COMMITTEE/MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (115) Renewal of Trade License

(Stipulated Time 10 Days)

1	Date of Application				
2	Name of the Applicant				
3	Father's/Husband's name				
4	Address	City/Village		P.O	
		Tech.		Distt	
		Phone/Mobile. No			
		E-mail ID, If any			
5	Renewal of Trade License ULBs Requirement	a	Simple Application.		
		b	Photo Copy of the Previous License.		
		c	Departmental Fees.		
		d			
		e			
			Checklist.	Checklist (for office use only)	
6	Documents to be attached	a	Simple Application.	Yes/No	Yes/No
		b	Photo Copy of the Previous License.		
		c			
		d			
		e			
7	Signature of the applicant				

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Renewal of Trade License			
6	Documents to be attached	a	Simple Application	Yes/No	
		b	Photo Copy of the Previous License	Yes/No	
		c			
		d			
		e			
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	

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LOCAL GOVERNMENT DEPARTMENT PUNJAB

FROM FOR SEEKING SERVICE: MUNICIPAL COMMITTEE/NAGAR PANCHYAT /

MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (116) Removal of Solid waste from streets/roads.

(Stipulated Time 2 Days)

1	Date of Application			
2	Name of the Applicant			
3	Father's/Husband's name			P.O
4	Address	City/Village		
		Tech.		
		Phone/Mobile. No		
		E-mail ID, if any		
5	Removal of Solid waste from streets/roads ULBs Requirement	a	Simple Application.	
		b	Location of garbage point.	
		c		
		d		
		e		
6	Documents to be attached		Checklist	Checklist (for office use only)
		a	Simple Application	Yes/No
7	Signature of the applicant			

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Removal of Solid waste from streets/roads			
6	Documents to be attached	a	Simple Application	Yes/No	
		b			
		c			
		d			
		e			
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	

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FROM FOR SEEKING SERVICE: MUNICIPAL COMMITTEE/NAGAR PANCHYAT /

MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (117) Replacement of Street lights

(Stipulated Time 10 Days)

1	Date of Application			
2	Name of the Applicant			
3	Father's/Husband's name			
4	Address	City/Village	P.O	
		Tech.	Distt	
		Phone/Mobile. No		
		E-mail ID, If any		
5	Replacement of Street lights. ULBs Requirement	a	Simple Application.	
		b	Location of street light point to be replaced.	
		c		
		d		
		e		
6	Documents to be attached		Checklist	Checklist (for office use only)
		a	Simple Application	Yes/No
7	Signature of the applicant			

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Replacement of Street lights			
6	Documents to be attached	a	Simple Application	Yes/No	Yes/No
		b			
		c			
		d			
		e			
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	

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LOCAL GOVERNMENT DEPARTMENT PUNJAB

FROM FOR SEEKING SERVICE: MUNICIPAL COMMITTEE/NAGAR PANCHYAT /

MUNICIPAL CORPORATION \_\_\_\_\_

Service asked for: (118) Water pipes leakages/Sewerage/Blocked/over flow

(Stipulated Time 24 hours)

1	Date of Application			
2	Name of the Applicant			
3	Father's/Husband's name			
4	Address	City/Village		P.O
		Tech.		Distt
		Phone/Mobile. No		
		E-mail ID, If any		
5	Water pipes leakages/Sewerage/Blocked/over flow . ULBs Requirement	a	Simple Application	
		b	Location of Water Pipe leakages/Sewerage/Blocked/over flow .	
		c		
		d		
		e		
6	Documents to be attached .		Checklist	Checklist (for office use only)
		a	Simple Application	Yes/No
7	Signature of the applicant			

(FOR OFFICE USE)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which Service to be provided		4.	Fees/Facilitation Charges, if any	
5.	Name of the Designated Officer		6.	Designation	
7.	Location: 1.Office 2.Suvidha Center		8.	Signature of D.O/ Receiving Officer	

(ACKNOWLEDGEMENT SLIP)

1.	Acknowledgement Receipt No.		2.	Date	
3.	Date by which service to be provided.		4.	Fees/Facilitation Charges, if any	
5	Service asked for	Water pipes leakages/Sewerage/Blocked/over flow			
6	Documents to be attached	a	Simple Application	Yes/No	Yes/No
		b			
		c			
		d			
		e			
7(a)	Name of the Designated Officer		b	Designation	
c	Location: 1.Office 2.Suvidha Center		d	Signature of the Designated Officer	