

(See Rule 8)

Issued to: Shri / Smt. Pratapathi Commodities Pvt Ltd

BOOK No. BP 0793 Application Form Sl.No. 84

APPLICATION FOR OBTAINING PERMIT FOR SINKING OF NEW WELL

(As per the New Regulated Ground Water Resources (Management, Control and Regulation) Act 2003)

1. Particulars about the applicant (user):

- (a) Name of the applicant (IN BLOCK LETTERS): M/S. PRATAPATHI COMMODITIES PRIVATE LIMITED
- (b) Date of birth: 15/06/2007
- (c) Sex (Please tick): MF N.A.
- (d) Social Status (Please tick): ST/SC/OBC/GENERAL N.A.
- (e) Nationality: INDIAN
- (f) Son / Daughter of: N.A.
- (g) Address of the applicant: SRAM ROAD, 912 BUS ROUTE, NARENDRA COLONY, RAJAPUR, RAJAPUR, RAJAPUR, KOL-196.
- (h) Category of Farmer (Please tick): Small Farmer / Marginal Farmer / Others
(In case of application of permit for sinking irrigation well)

2. Particulars of location of the proposed well:

- (a) District: ANUPRA PRAKASH
- (b) Block, Mouza, JL No., Plot No.: RAJAPUR, GOPALPUR, J.L. NO.-02, PLOT NO-3678
- (c) Municipality/Corporation, Ward No./Borough No., Holding No.: SHIVANINAGAR MUNICIPAL CORPORATION, WARD NO-02

3. Particulars of the proposed well:

- (a) Type of the well viz. Dug Well / Tube Well: TUBE WELL
- (b) Approx. depth of the well (m): 180 MT.
- (c) In case of Tube Well:
 - (i) Approx. length (m) & diameter (mm) of the housing pipe (if any): SOM OF SOM DIA.
 - (ii) Approx. length (m) & diameter (mm) of the strainer: 20M OF 100MM DIA.
 - (iii) Material of the housing pipe & blank pipe: PVC PIPE
 - (iv) Material of the strainer: ISOM DIA.
 - (v) In case of Dug Well: _____
 - (vi) Diameter of the Dug Well (m): N.A.
 - (vii) Type of structure of the Dug Well (Please tick): Kuchcha / Pucca N.A.

4. Distance of the proposed well from nearby wells (in metres):

- (a) From the nearest shallow tube well fitted with centrifugal pump: _____
- (b) From the nearest shallow tube well fitted with submersible pump: _____
- (c) From the nearest deep tube well: 220 MT.
- (d) From the nearest drinking water tube well: 1 KM.

5. Particulars of proposed pumping device:

- (a) Type of pump to be used (Please tick): Centrifugal/Submersible / Turbine / Electric pump, etc.
- (b) Pump Capacity (m³/hr.): 5 to 6 m³/hr.

- (b) Proposed command area in ha (for irrigation well): N.A.
- (c) Owner's share of land within the command area indicated in 6(b) above: N.A.
- (d) Area proposed to be irrigated in different crop seasons as under:
 - (i) Kharif: ha, (ii) Rabi: ha, (iii) Boro: ha, (iv) Perennial: ha.
- (e) Proposed annual running hours (in case of irrigation well): _____
- (f) Whether the proposed command area or any portion of it falls within the command area of any other Minor Irrigation Scheme. If so, give details: N.A.
- (g) Proposed number of users of the well if used for domestic purpose: _____
- (h) Proposed daily running hours in case of domestic/other category of wells: 4 hours/day.
- (i) Whether the area receives supply through piped water supply scheme(s) of any Govt. organization / Local bodies: YES/NO (Please tick one)
(In case of drinking water wells)
(If 'YES', give details) _____

7. Particulars of earlier application, if any:

- (a) Whether the applicant applied for permit of sinking of well: YES / NO
on any previous occasion. (Please tick)
- (b) If 'YES', furnish the references to the previous application and indicate about grant or refusal of permit: (Attach copies) _____

8. Details of payment of application fee:

- (a) Amount of Application Fee paid: Rs
- (b) Voucher No and date: _____
- (c) Name of Treasury/Sub-Treasury/P. S. U. Bank where Application Fee has been paid: _____
- (d) Name of Bank Branch (if payment has been made in a Bank): _____

9. Any other information which the applicant would like to furnish:

For Pratapathi Commodities Pvt. Ltd.,

 Signature of the Authorized Signatory,
 Date: _____

DECLARATION BY THE APPLICANT (USER)

I do hereby declare that the particulars furnished herein above are correct and true. I understand that in case any of the information and particulars is found to be incorrect at any stage of scrutiny and investigation or afterwards, my application / permit is liable to be rejected / cancelled.

For Pratapathi Commodities Pvt. Ltd.

NOTES:

1. Separate application form should be submitted for each individual well.
2. The application form should be completed in all respect before submission. Incomplete applications are liable for rejection. Any correction/alteration in the entry shall be duly authenticated.
3. In case any of the particulars / information is found to be incorrect at any stage of verification / scrutiny the application is liable for rejection.
4. In case any of the particulars / information is found to be incorrect at any stage even after issue of the permit, the permit is liable for cancellation.
5. Pleasure write 'N.A.' against those items which are not applicable.
6. Pleasure attach the following documents along with the application:
 - (i) Document showing proof of ownership of land.
 - (ii) The Power of Attorney in favour of the applicant, in case the plot of land where the proposed well is to be constructed belongs to more than one person.
 - (iii) Photocopy of voter ID / Ration Card / such other proof of identification.
 - (iv) Mouza map showing location of the proposed well the proposed command area and the existing wells which have been referred to in item No. 2(a), (b) and (c).
7. The concerned Authority reserves the right to ask for any other document(s) from the owner applicant for examination of his application.
8. Farmers having land holding (a) ha. are Marginal Farmers and those having land holding 1-2 ha. are Small Farmers. (Item No. 1 (f)).
9. The figure indicated in 6 (d) should be the sum total of the running hours in different crop seasons viz., Kharif, Rabi, Boro, Perennial.
10. The concerned Authority reserves the right to reject any application for permit in areas where the categorization of the Block and / or other technical criteria do not permit its consideration.

T.R. FORM NO. 7 / টি.আর. ফর্ম নং - ৭

(See S.R. 46/এস. আর. ৪৬ দ্রষ্টব্য)

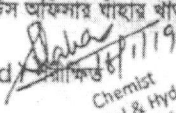
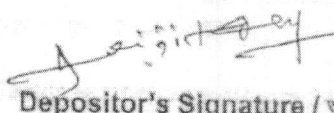
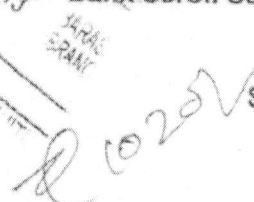
Challan for Deposit of money in the account of GOVERNMENT OF WEST BENGAL

পশ্চিমবঙ্গ সরকারের খাতে টাকা জমা দিবার চালান

1. Name of the Bank & Branch / ব্যাঙ্কের এবং শাখার নাম : **STATE BANK OF INDIA, BARASAT, 24 PGS (N)**
2. (a) Name of the Treasury / ট্রেজারীর নাম : **BARASAT**
(b) Treasury Code/ ট্রেজারীর সাঙ্কেতিক চিহ্ন :

N	P	A
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3. Account Code/ হিসাবখাত নং :

0	7	0	2	8	0	8	0	0	0	0	2	2	7
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(14-Digits must be filled up properly / ১৪ ঘর সঠিকভাবে অবশ্যই পূরণ করতে হবে)
4. Detail Head of Account / হিসাবখাতের বিশদ বিবরণ : **0702-80-808-Other Receipts-002-Other Items-27-Other Receipts.**
5. (a) Amount / টাকা : **Rs. 1020/-**
(b) In Words / কথায় : **Rupees. One thousand twenty Only.**
6. By Whom tendered - Name & Address / **PRAJAPATI COMMODITIES PRIVATE LIMITED**
যে টাকা জমা দিচ্ছে তার নাম, ঠিকানা : **SI, Vivekananda Road, 3rd Floor, Kolkata-700007.**
7. Name / Designation & Address of the Departmental Officer on whose behalf / favour money is paid: **The Chemist, RCHL, SWID, BARASAT,**
যে বিভাগীয় আমিকারিকের হয়ে / জন্য টাকা জমা দেওয়া হচ্ছে তার নাম / **NORTH 24 PARAGANAS, KOLKATA-700124.**
পদের নাম এবং ঠিকানা
8. (a) Particulars and Authority of Deposit / যে কারনে এবং ক্ষমতা অনুসারে টাকা জমা দেওয়া হচ্ছে : **WATER SAMPLE**
(b) T.V. No. & Date of A.C. Bill / এ.সি. বিলের টি.ভি নং এবং তারিখ : **ANALYSIS REPORT.**
9. Accounts Officer by whom adjustable
একাউন্টস অফিসার দ্বারা ঋণাত্মক জমা হইবে
Accountant General (A&E), West Bengal
মহাগণনিক (হিসাব ও হক), পশ্চিমবঙ্গ
- Verified / 
Chemist
Chemical & Hydrological Lab.
24 PGS. (N)
Barasat
- Signature of Departmental / Treasury Officer
বিভাগীয় / ট্রেজারীর আমিকারিকের স্বাক্ষর
- Depositor's Signature / আমানতকারীর স্বাক্ষর

- Date/ তারিখ : _____
- Received Payment/ টাকা পাওয়া গেল
- Receipt by the Bank/ Treasury/ ব্যাঙ্কের / ট্রেজারীর রসিদ
- Date / তারিখ : _____
- Treasury Received Challan No./ ট্রেজারী গৃহীত চালান নং : _____
- Bank Scroll Serial No./ ব্যাঙ্কের স্ক্রলের ক্রমিক নং : _____
- Signature with seal of the Bank
ব্যাঙ্কের শীলমোহরসহ গ্রহীতার স্বাক্ষর


In respect of Challan relating to refund of unspent amount of A.C. Bill.

এ.সি.বিলে উত্তোলিত অধিমের অব্যয়িত অর্থ ফেরত দেওয়ার চালানের জন্য