



గ్రామ - వార్డు సచివాలయము

ఆంధ్రప్రదేశ్ ప్రభుత్వం



SRICALAHASTEESWARA SWAMIVARI DEVASTHANAM SEVATICKET BOOKING

Seva Name

Seva Name*: _____

Seva Details

Seva Booking Date*: _____

Devotee Details

Aadhar Card No: _____ Devotee Name*: _____

Proof Document *: _____ Proof Document No* : _____

Gothram: _____ Nakshatram: _____

Gender*: Male Female Age: _____ Mobile Number: _____

Email Id*: _____

House No*: _____ Street Name/Location*: _____

Country*: INDIA State*: _____ District*: _____

Mandal*: _____ Village*: _____ Pin Code: _____

Informant Details

Informant Name*: _____ Informant Relation*: _____

Documents List:

(NOTE: 1.Total size of Upload Document should not exceed 3 MB. 2. All Upload Documents should be in PDF Format Only)

1. Application Form*
2. Identity Proof *
3. Passport photo*

Applicant's Signature