స్వర్ణ గ్రామ - స్వర్ణ వార్డు కార్యాలయం

ఆంధ్రప్రదేశ్ ప్రభుత్వం

APPLICATION FOR ISSUE OF AUTHORISATION TO RUN A FAIR PRICE SHOP

FP Shop Details:

Shop District: _____ FP Shop Mandal: _____
FP Shop Dealer ID: _____ Authorization No: _____
FP shop Address: _____

FP Shop Dealer Details:

Dealer Name (In Capital Letters): _____
Father/Mother Name: _____ Age & Date of Birth: _____
Caste: _____Educational Qualification: _____

Address: Door No: _____ Locality/Landmark: _____ Village: _____
Mandal: _____ District: _____ Pin code: _____
Mobile Number: _____ E- Mail ID: _____

Whether he is physically handicapped (YES/No) _____
Whether the applicant is connected with any other business run either by himself or by any member of his family and if so give details_____
Whether any number of the applicant's family has been issued authorization to fair price shop earlier and if so give the details
_____
Whether any of his blood relations is working in revenue/CS Dept. /CS corp. and if so give details
_____
Village location, Door number, when the applicant wants to run fair price shop, if he is selected
_____
Whether he can raise the sufficient funds to run fair price shop with his own funds and if so give source or whether he needs institutional finance_____
Whether he was convinced earlier for offence under central order issued by the State/Central under E.C Act._____
Amount, Challan number and date through which fee for issued authorization `and application renewal has been submitted
_____

I have carefully read the conditions and I agree to abide by them.

(a) I have not previously applied for such authorization in this district.
(b) I applied such authorization in this district on and was not granted.
(c) I hereby apply for renewal of authorization ……
……which is enclosed.
(Strike of the Clauses not applicable)

Signature of the Applicant

Procedure (following to be enclosed):

1) Application Form*
2) Copy of Authorization letter*
3) Latest renewed food grains and kerosene License*
4) PHC Certificate (Certificate is enclosed in case he is physically handicapped).

Contact Details:

Land Line Number :
Mobile Number :
E- Mail ID :