స్వర్ణ గ్రామ - స్వర్ణ వార్డు కార్యాలయం

ఆంధ్రప్రదేశ్ ప్రభుత్వం

E-Pass Book Application Form

Service Type*: ☐New Pattadhar Pass Book
☐ Duplicate Pattadhar Pass Book
☐ Replacement of Pattadhar Pass Book

Land Details:-

District *: _____Mandal *: _____Village*: _____ Khata No*: _____

Pattadhar Details:-

Caste Category *: _____Caste Name *: _____Division Name*: _____

Reasons for Pattadhar Pass Book*: _____

For Duplicate/Replacement of Pattadhar Pass Book

Old Pattadhar Pass BookNo *: _____Registration No *: _____Registration Date*: _____

Applicant Details:-

Applicant Name *: _____Relation *: _____Gender*: _____

Date of Birth: _____

Permanent Address:-

State*: _____Door No: _____ Locality/Land Mark: _____

District*: _____ Mandal*: _____ Village/Ward*: _____Pin Code: _____

Address to send the e-passbook:-

Door No: _____ Locality/Land Mark: _____

State*:_____District*: _____ Mandal*: _____

Village/Ward*: _____Pin Code: _____Mobile Number*: _____

Phone: _____Email ID: _____Ration Card No: _____

Remarks: _____

Delivery Type*: ☐ Postal

Applicant's Signature