

GOVERNMENT OF MIZORAM

DIRECTORATE OF FOOD, CIVIL SUPPLIES & CONSUMER AFFAIRS

APPLICATION FORM FOR DUPLICATE

CARD/MODIFICATION/SURRENDER/TRANSFER

(as per Govt. Approval vide No. S.11011/44/2011.FCS&CA dt. 15.11.2013)

Duplicate card Hming thlak/belh Chhungkaw lu thlakna
 Correction FPS thlakna Transfer Surrender

Affix Recent Photo of
Head of Family
photo duly attested
by Gazatted Officer

Application No. and Date: _____

1. Diltu Hming*: _____

2. Nu/Pa Hming*: _____

3. Personal Details:

Gender: Male Female Date of Birth (dd/mm/yyyy): ___/___/_____

Mobile No. _____ e-mail id: _____

4. Present Address

HouseNo./Inhming: _____ Veng Hming: _____

Khaw Hming*: _____ District*: _____ PIN: _____

Kum khata pawisa lakluh zat (in Rs)*: _____ Hnathawh*: _____

5. Permanent Address

HouseNo./Inhming: _____ Veng Hming: _____

Khaw Hming*: _____ District*: _____ PIN: _____

6. Gas Connection (Nei lo/Bur khat/Bur hnih/PNG): _____

7. Bank Account chungchang

Bank Hming: _____ Branch Hming: _____

Bank A/C No.: _____ MICR/IFSC Code: _____

8. Duplicate Card: Ration Card No. _____

FPS/Retailer Name: _____ Code: _____

FPS/Retailer (Kerosene): _____ Code: _____



ACKNOWLEDGEMENT SLIP

Received from Pi/Pu _____

application for Ration Card. Application number _____ on _____

Office Seal

Authorised signatory

9. A chhan: Card ti bo Card ti chhia

10. Document Thil tel*: i) Card Hlui ii) FIR Copy iii) Address Proof

11. Chhungkaw lu ber thlakna: A ngai: _____

A thar: _____

Thlak duhna chhan: _____

13. Thil dang thlak te: _____

14. Transfer details

Chenna Address thar

HouseNo./Inhming: _____ Veng Hming: _____

Khaw Hming*: _____ District*: _____ PIN: _____

Surrendered Address

HouseNo./Inhming: _____ Veng Hming: _____

Khaw Hming*: _____ District*: _____ PIN: _____

Document Attached

Id proof:

Chenna Proof:

Other Mandatory Document

15.

Local Council/Village Council Hriatpuina

He Ration Card *Duplicate/Modification/Surrender/Transfer* diltu

Pi/Pu _____ hi kan veng chhung a awm ani
tih leh Mizoram khua leh tui dik tak ani tih ka hriatpui e.

President, V.C/Chairman, L.C. hming leh Signature: _____

Seal

16.

New Ration Card Details (Office lam dah khah tur)

Recommended/No Recommended: _____

Signature (with Name) of Insecting/Verifying Official: _____

Card Type (AAY/PHH/Non-NFSA)*: _____

Card Number: _____ Date of Card Issue: _____

FPS Code: _____ FPS Code (Kerosene): _____

Signature of DCSO _____

Belh tur/Paih tur leh a dangte Hming leh chanchin kimchang ziahna. (Box chhungah a leng lo anih chuan Box dangah ziah chhunzawm mai tur)

SI No	Hming*	Nu/Pa Hming*	Mipa/Hmeichhia *	Pianni, thla leh Kum (dd/mm/yyyy)*	Chhungkaw lu ber nena in laichinna*	UID/Voter ID*	Addition/Deletion*	Dahkhah tur dang a awm chuan
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								

Note : **(Star/he chihchhiahna) Awmna te hi fill up ngei ngei tur. (*Indicates mandatory which needs to be filled).*

Documents attached for name Addition/Deletion _____