



Application form for Ration Card (Consumer Card)  
Government Of Himachal Pradesh  
Department Of Food, Civil Supplies & Consumer Affairs



FPS ID: \_\_\_\_\_

1. Category: APL ☐ BPL ☐ AAY ☐ AAY ☐ District: \_\_\_\_\_ Block: \_\_\_\_\_

2. Gram Panchayat/MC/NP/NAC: \_\_\_\_\_ Ward No.: \_\_\_\_\_

3. Name of Applicant: \_\_\_\_\_ Father /Husband Name: \_\_\_\_\_

4 Residential Address: \_\_\_\_\_

\_\_\_\_\_ Pin Code: \_\_\_\_\_

5. Place and State from where migrated: \_\_\_\_\_

6. Particular of Surrender/Deletion certificate (original copy to be attached) \_\_\_\_\_

7. Date & reason of arrival in the distribution area: \_\_\_\_\_

8. Total monthly income of family from all sources: Rs. \_\_\_\_\_

(with allowances for employees of the Govt./Semi-Govt. Department/ Corporations, Boards etc.)

9. Nationality: Indian ☐ Tibetan ☐

10. LPG Consumer No. \_\_\_\_\_ SBC ☐ DBC ☐

Name of Gas Agency: \_\_\_\_\_ Oil Co. IOC ☐ HPC ☐ BPC ☐

11. Bank Detail of the Head of Family:- (I) Name of Bank : \_\_\_\_\_

(ii) IFSC Code: \_\_\_\_\_ (iii) A/C No.: \_\_\_\_\_

\_\_\_\_\_

Signature of applicant

INSTRUCTIONS FOR FILLING IN THE APPLICATION FORM

- (I) The Application should be filled in neatly in block letters only.
- (ii) The persons coming from other State / city /town / village, should attach cancellation / migration/ surrender / deletion certificate issued by the previous card issuing authority/Competent Authority.
- (iii) At serial no.1 of point no. 12 fill the detail of head of the family.
- (iv) In case of Tibetan applicant the, form should be verified by Tibetan Welfare Officer or Tibetan Settlement Officer

- (v) If the applicant is a government servant, he/she should get the application certified / Attested by his Head of the office. The person who is not a Government servant, should get the application Attested by Councilor/ward member of his local ward / Executive Officer / Secretary of local body of the area or a Gazetted Officer in the town or any other class of persons specially or generally authorized by the Government for the purpose.

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Receipt of the application form

Dairy No/Date: \_\_\_\_\_ Name of the applicant \_\_\_\_\_

This acknowledgment should be produced on \_\_\_\_\_ at \_\_\_\_\_

when Ration/ Consumer Card will be issued, if the application is found in order.

Date \_\_\_\_\_

Signature of recipient

12. Particulars of family members for which Ration/Consumer Card is required:-

S. N.	Name of Family Members	Relationship with Head of Family	DoB	Aadhaar No.										Mobile No.									
1.																							
2.																							
3.																							
4.																							
5.																							
6.																							
7.																							
8.																							
9.																							
10.																							

13. I give my consent to use my Aadhaar/biometrics for getting my ration under TPDS

14. I do hereby solemnly affirm and state as per the Section 199 of IPC that:

(a) the information given in this form is true (b) None of the persons mentioned above are in receipt of any ration from army/paramilitary forces and are also not entered in any consumer card in India & persons detailed above are actually residing on given address of applicant.

Signature / thumb impression of the applicant along with date

15. I certify that I know the applicant personally and he/she is residing on address given in column 4. I hereby certify that the information given above is correct to the best of my knowledge:

Signature of the Certifying /Attesting Authority along with designation and seal

FOR OFFICE USE ONLY

Enquiry report of the officer/official:- The facts mentioned in the application form are correct to the best of my knowledge & as per official records.

Adults	Children	Infants	Total members

Signature of the Enquiry Officer with Seal (FSO/Inspector, Food, Civil Supplies & Consumer Affairs / Gram Panchayat Vikas Adhikari/Secy/Sahayak).

Code No & Serial No. of the ration card

Dated

Signature of card preparing Officer / Official.

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Authority

I here by authorize Sh/Smt./ who is an adult member of my family, to receive my ration card on my behalf and whose specimen signature are given below.

Date

Signature of Applicant