

APPLICATION FORM FOR ISSUING IDENTITY CARD IN R/O PENSIONERS

Name	:	[]		
Post held on Retirement	:			
PPO No.	: No.UHF/Compt/Pen/	Photo		
	dated			
PRAN (If any)	:			
Date of Birth	:			
Date of Retirement	:			
Blood Group	:			
Aadhaar No.	:			
Address with Pin Code	:			
Contact No.	:			
		Signature of Card Holder		
	FOR OFFICE USE ONLY			
Endst. No.		Dated:		
Recommended & forwarded in original to the Registrar, UHF, Nauni (Solan) with remarks that the particulars of the applicant have been verified by his/her official records maintained in this branch.				

Comptroller (with office seal)

(for office use only)			
No			
Date of Issue:			

Signature of Issuing Authority (with office seal)