

Schedule-F (Clause -12)
GOVERNMENT OF WEST BENGAL
FORM-F

Application for a new Ration Card/Family Identity Card in place of a lost, damage or defaced Card
(Particulars of registration of Cards are to be supplied by the Shop Manager)

Name of applicant.....
(in Block letters)

Address Sub-Area

Details of lost, damaged or defaced Ration Card/Family Identity Card :

Sl. No.	Names of members of the Family (including applicant, if necessary)	Age	Name of father or husband	Reasons for change	Ration Card/Family Identity Card No (State whether permanent or temporary)	F.P. Shop No.	F.P. Folio No.

Name of head of family (if applicant is not himself the head of family)

Circumstances in which the Card was lost, defaced or damaged

Certified that the particulars of registration noted above are correct

I solemnly affirm that the above statements are correct.

.....
Signature of Shop Manager with Shop seal

.....
Signature or left thumb impression of the applicant

Dated201

FORM-F (Counterfoil)

Name of applicant Address

(Letter of authority when the applicant cannot take delivery in person)

I do hereby authorise of (address).....
.....to receive the relevant Ration Card/Family Identity Card and sign the receipt thereof on my behalf at my own risk and responsibility.

Dated201..

.....
Signature or left thumb impression of the applicant