DELHI DEVELOPMENT AUTHOERITY APPLICATION FOR REVALIDATION OF ENLISTMENT

(The applicant should study carefully the Rules of Enlistment and the list of documents to be annexed with the application form before filling the form. Application found deficient in any respect are liable to be rejected without any further correspondence)

	Name of applicant & Sayleer Gent Control 100 1 1 100 1			
Δ,	Jar shoul will			
2.	Nationality Indian Other			
3.	Address Regd. Office. J-2/8 Right Extr. Malvige Nagar Head office. New Delk - 11001)			
	Head office			
4.	Telephone Number 8558241919 Fax No. Now E-mail address			
5.	Constitution Individual Sole Proprietorship Concern Partnership firm Public Ltd. Company Private Ltd. Company			
6.	If partnership firm, names of the partners/ If Company name of directors 3			
7.	(a) Name of person holding power of attorney. (b) Nationality Indian Other			
8.	8. Name of Bank (with full address) Allahebed Bank issuing solvency certificate Anallow N. Delh - 49			
9.	Place of business Delh N-Dech			
10	. Full time technical staff of relevant field in applicant's employment			
	(a) Graduate Engineers with minimum 5 years experience (b) Graduate Engineers with minimum 3 years experience [excluding (a) above] (c) Graduate Engineers with minimum 2 years experience [excluding (a) and (b) above] (d) Diploma Holder Engineers with minimum 10 years experience [excluding (d) above] (f) Diploma Holder Engineers with minimum 3 years experience			
	[excluding (d) and (e) above] (g) Diploma Holder Engineers with minimum 2 years experience [excluding (d), (e) and (f) above] (h) Post Graduate in Agricultural Sciences (i) Graduate in Agricultural Sciences with minimum 5 years exp.			

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	Top Machinery an	d Equipment as per					
11.	Does the applicant have sufficient T&P, Machinery and	the Class & Category					
*	Does the applicant have sufficient T&P, Machiner, and requirements mentioned in the Enlistment Rules for applied for (Attach details on separate sheet) Yes	s P No D					
	applied for (Attach details on separate sheet)						
		P . #					
12. [[For Electrical] Years possess valid Electrical License	res 🗌 No 🗌					
i) Does the applicant possess valid Electrical License ii) Do the permanent electricians employed by contractor posses valid license Yes \(\subseteq \text{No} \subseteq \)							
ii	ii) Do the permanent electricians employed by	Yes 🗌 No 🗌					
		12 10 1 CRD 23					
13(a) Details of enlistment with DDA (i) Enlistment No. & date							
				(i) Enlistment No. & date with the applicant is a near relative of the Enlistment Rules)	e of the officer/official of		
14	Is any person working with the applicant is a flear relies.	Yes No No					
	DDA. (See Rule 17.0 is yes give details						
		ess & secured during the					
15.	If answer to above is res, gives 5. Details of DDA and Non DDA Works completed, in progre 6. Details of DDA and Non DDA works completed, in progre 6. Iast enlistment/revalidation period as per Annexure -III. 6. Iast enlistment/revalidation period as per Annexure -III. 6. Iast enlistment/revalidation period as per Annexure -III. 6. Iast enlistment/revalidation period as per Annexure.	. This list should include					
	last enlistment/revalidation period as per Annexure -III. all works whose gross amount of work done is more than all works whose gross amount of sequired. Receipted	copy of the Annexure -					
		Yes No 🗆					
	VII for DDA works also be enclosed Whether above details enclosed?	Yes 🔲 No 🗀					
	Whether above does	s = listment					
16	ad the Rules of Enlistment						
16. Certificates: i I/We (including all partners) certify that I/We have read the Rules of Enlistment i I/We (including all partners) certify that I/We have read the Rules of Enlistment of Contractors in DDA as amended upto date and shall abide by them. 43 2 Cold ii I/We certify that I/We will not get myself/ourselves registered as contractor(s) in ii I/We certify that I/We will not get myself/ourselves registered as contractor(s) in							
					the Department under information given above is	tige to ad incorrect OUT	
the Department under more than one name, the Department is I/We certify that the information given above is true to the best of our liver certify that if any information is found incorrect, our knowledge. I/We understand that if any information is found incorrect, our knowledge. I/We understand that if any information is found incorrect, our liver certify that I/none of the partners/Directors retired as an Engineer of I/We certify that I/none of the partners/Directors retired as an Engineer of Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed on Engineering or Gazetted rank or as any Gazetted Officer employed or Engineering or Gazetted rank or as any Gazetted Officer employed or Engineering or Gazetted rank or as any Gazetted Officer employed or Engineering or Gazetted rank or as any Gazetted Officer employed or Engineering or Gazetted rank or as any Gazetted Officer employed or Engineering or Gazetted rank or as any							
				Administrative duties in last two years (one year in case of Group A department, as we also certify that we have neither under our employment any such person nor We also certify that we have neither under our employment of his retirement, as			
Administrative duties in last two years and any such person with the last two years are shall we employ any person within aforesaid period of his retirement, as applicable, except with the prior permission of the parent department.							
Listation is the applicable							
	Signature(s) of applicant(s):						
\$	Signature(3) of art	Address					
	Name Signature	+ 21 S Koki Extr.					
	1. () an eeu Goe	1 Nala					
	3.	alviga					
	Signature(s) of applicant(s): Name 1. Signature 2. Signature 4. Date (Strike out whichever is not signature) Signature Avil Signature Avil Avil Signature	alviga Negar N. Dech - 1101)					
	No. of documents attached						