

## GOVERNMENT HOUSING BIO-DATA FORM

**Affix a  
passport size  
photo**

*(All information provided in this form will be used solely for the purpose of house allotment, retrieving the bio-data for the allotment system. The information will be kept confidential. This form can also be downloaded from: [www.nhdcl.gov.bt](http://www.nhdcl.gov.bt))*

**(A). PERSONAL INFORMATION:-**

1. Name of Tenant/Applicant:-.....
2. New Citizen ID No:-.....RCSC/Agency Employment No:-.....
3. District: - .....Block:- .....Village:- .....
4. Date of birth: - .....Day.....Month..... Year.
5. Designation: .....Present Grade:-.....Gross salary (Nu):-.....
6. Organization:-.....Division:-.....  
Sections:-.....Telephone :-.....(O).....(R).....(M)
7. Date of appointment in service:-.....
8. Year of application: - .....
9. **Quarter No:** .....
10. **Photocopy of new Citizen ID card must be attached.**
11. **A copy of a Tenancy Agreement (legal documents) signed between the housing authority & tenants must be enclosed.**
12. **Pay Slip with a seal and signature of Accounts Officer.**
13. **Provident Fund A/c No: - ..... (Attach a copy of PF statement)**
14. **E-Mail ID.....Mail ID of Spouse.....**

**(B). SPOUSE'S INFORMATION:-**

**DETAILS OF SPOUSE (if married)**

1. Name of Spouse: - .....New Citizen ID #-:.....
2. District: - .....Block: - .....Village: - .....
3. Date of birth: - .....Day.....Month..... Year.
4. Occupation:- .....*(If spouse is in the services of Govt. or private firm, the spaces provided below must be filled up):-*
5. Organization:.....Division:.....  
Sections:-.....Telephone:-.....(O).....(M)
6. Date of appointment:-.....Employee ID No:.....
7. Designation:-.....Present Grade:-.....

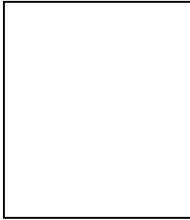
**(C). INFORMATION OF CHILDREN:-**

Sl. #	Name	Age	Gender	Occupation	Remarks
1.					
2.					
3.					
4.					
5.					

**(D). INFORMATION OF DEPENDENTS:-**

Sl. #	Name	Age	Gender	Occupation	Relationship
1.					
2.					
3.					
4.					
5.					

*I hereby declare that the information provided above is true, complete and accurate to the best of my knowledge, and that I have not willfully suppressed any material facts. I fully understand that if I fail to comply with the terms and conditions of the Tenancy Agreement and/or any of the above declarations are found to be untrue, the allotment of NHDCL quarter may be terminated with immediate effect.*



(i). Tenant/applicant's Signature  
*Affix legal stamp*

*Date:-*.....

*Verified by: (Signature):-* .....

(ii). Name & Sign of Disbursing/concerned  
Accounts Personnel  
(.....)

(iii). Name & Sign of Head of HRD or Administration  
Division  
(.....)

**Imprint Official Seal.**

**Imprint Official Seal.**

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**FOR OFFICIAL USE ONLY:-**

*Received and verified by:*

*Date:-*.....

(Signature)  
Designation: Rental Officer  
Section : REMS

(Signature)  
Designation : Real Estate Officer  
Section : REMS

Countersigned by:-

**General Manager  
Real Estate Management Services  
National Housing Development Corporation Limited**