

# Application for Change of Ration Shop or Kerosene Oil Shop (রেশন দোকান অথবা কেরোসিন দোকান পরিবর্তনের আবেদন)

(\* marked fields are compulsory)

## Section A: Existing Card type and number of the Head of Family (HoF)/ Any other member For the change of FPS/Kerosene Oil shop for the whole family)

Name*																		
Ration Card Type*	AAY			PHH			SPHH			RKSU-I			RKSU-II			GEN		
Ration Card Number*																		

## Section B: Details of the members (if only some member are applying and NOT for whole)

Name*1																		
Ration Card Type*	AAY			PHH			SPHH			RKSU-I			RKSU-II			GEN		
Ration Card Number*																		
Whether Person with Disability (PWD)							Yes					No						
Name*2																		
Ration Card Type*	AAY			PHH			SPHH			RKSU-I			RKSU-II			GEN		
Ration Card Number*																		
Whether Person with Disability (PWD)							Yes					No						
Name*3																		
Ration Card Type*	AAY			PHH			SPHH			RKSU-I			RKSU-II			GEN		
Ration Card Number*																		
Whether Person with Disability (PWD)							Yes					No						

## Section C: Details of the new FPS or Kerosene Oil shop (for A & B)

Name of the new FPS*															
FPS Code															
Name of Kerosene shop*															
Kerosene Shop Code															

## Section D: If applying for change of Ration Shop/ Kerosene Oil shop due to marriage/divorce/separation (the applicant would be added to the husband's/father's/guardian's family)

Name as in existing ration card															
Card Category						Card No.									
Name after marriage/divorce															
Card Category (of husband/ father/guardian)															
Card No. (of husband/father/guardian)															

**Section E: Contact details of the family\* (in case of marriage/divorce, the family in which the applicant is entering)**

Primary Mobile Number(For communication)*																				
Secondary Mobile Number																				
Whatsapp Number																				
Email ID																				
If you don't want us to send e-bill and other important messages, tick the box																				

**Section F: Aadhaar Details of all existing DRC holders of the family\* (in case of marriage/divorce, the family in which the applicant is entering)(Aadhaar details mandatory)**

<b>Name of Member 1 (Head of Family)*</b>																					
<b>Digital Ration Card No.*</b>																					
<b>Card Category*</b>	AAY			PHH			SPHH			RKSY-I			RKSY-II			GEN					
<b>Aadhaar number* (attach copy)</b>																					
<b>Whether Person with Disability (PWD)</b>											Yes						No				
<b>Name of Member 2</b>																					
<b>Digital Ration Card No.*</b>																					
<b>Card Category*</b>	AAY			PHH			SPHH			RKSY-I			RKSY-II			GEN					
<b>Aadhaar number* (attach copy)</b>																					
<b>Whether Person with Disability (PWD)</b>											Yes						No				
<b>Name of Member 3</b>																					
<b>Digital Ration Card No.*</b>																					
<b>Card Category*</b>	AAY			PHH			SPHH			RKSY-I			RKSY-II			GEN					
<b>Aadhaar number* (attach copy)</b>																					
<b>Whether Person with Disability (PWD)</b>											Yes						No				

**Section G: Address details**

<b>District*</b>																				
<b>Sub-division*</b>																				
<b>Block/Municipality/ Mun. Corp*</b>																				
<b>Gram Panchayat/ Ward No*</b>																				
<b>Village/Road/ Street *</b>																				
<b>Post Office*</b>																				
<b>Police Station</b>																				

[ ] I agree that all inputs given above are true to the best of my knowledge. I agree that the application may be rejected, or the Ration Card if issued, may be cancelled if any information furnished here is found to be false. I also acknowledge that other legal action may be taken against me for furnishing wrong information, hiding any relevant information, either at the time of application or at later stage.

Date: \_\_\_\_\_ Signature /LTI of the applicant

<b>Checklist of documents for FPS Change</b>
<b>Copy of DRC of any member</b>
<b>Address proof of any of the applicants (Copy of Aadhaar/EPIC/Passport/Postpaid Mobile Bill/landline Phone Bill/Electricity Bill/Bank account statement/Driving Licence).</b>
<b>Address in the document should be clearly legible.</b>

Receipt

Received Application vide Barcode Number \_\_\_\_\_ for Form \_\_\_\_\_

Date..... Signature and seal