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PART I-Orders and Notifications by the Governor of West Bengal, the High Court, Government Treasury, etc.

GOVERNMENT OF WEST BENGAL

Department of Food & Supplies 11A, Mirza Galib Street, Kolkata-700 087

NOTIFICATION

No. 3156–FS.–Kolkata, the 25th November, 2016.— WHEREAS it has been considered necessary to amend the West Bengal Public Distribution System (Maintenance & Control) Order, 2013 (hereinafter referred to as the said Control Order), in the manner hereinafter appearing;

NOW, THEREFORE, in exercise of the power conferred by section 3 of the Essential Commodities Act, 1955 (10 of 1955) read with the Government of India, Ministry of Consumer Affairs, Food & Public Distribution (Department of Food & Public Distribution) Order No. G.S.R. 630(E), dated 31st August, 2001, the Governor is pleased hereby to make, with immediate effect, following amendment in the said Control Order, namely:—

Amendment

In the said Control Order,-

- (1) for clause 3 and clause 4, substitute the following clauses:—
 - "3. Entitlement.— The State Government in the Food and Supplies Department shall issue ration cards only to citizen of India who is resident of the State of West Bengal as per the procedure laid down in clause 4 for the purpose of using it under the Targeted Public Distribution System, or schemes mentioned in the National Food Security Act, 2013 (20 of 2013) or a specific scheme of the State Government for distribution of essential commodities for following categories of people:—
 - (a) enlisted under Antyodaya House Hold and Priority Household;
 - (b) enlisted under the Rajya Khadya Suraksha Yojana Scheme,
 - (c) Any other welfare schemes, as the State Government may, by notification publish in the *Official Gazette*, declare for distribution of essential commodities.

- 4. Procedure for issue of ration card.—(1) Any person, who is a resident of the State having no ration card anywhere in India may apply to the Ration Card Issuing Authority, having jurisdiction—
 - in Form III-U or Form III-R, as the case may be, for inclusion of his name in the eligible beneficiary list mentioned in clause 3; or
 - (ii) in Form IV-U or Form IV-R, as the case may be, for inclusion of name of one or more member of a family to the existing beneficiary list already belonging to the respective categories mentioned in clause 3.

Explanation.— For the purpose of this Order, the Form with specification of letter "U" is applicable to urban areas and the Form with specification of letter "R" is applicable to rural areas of State of West Bengal.

(2) On receipt of the application under clause (1), the concerned Ration Card Issuing Authority shall cause an enquiry with respect to entitlement of the ration card of such person in a particular category keeping in view the particulars furnished by the applicant and after having been satisfied with the categorization may issue a ration card:

Provided that if the concerned Ration Card Issuing Authority does not find the application suitable for issue of ration card after the enquiry, he shall, after recording the reasons in writing, refuse to issue ration card, and communicate its decision to the applicant within the period stipulated in sub-clause (3).

- (3) Every application made under clause (1) shall be disposed of within 30 days from the date of application.";
- (2) omit clause 7;
- (3) for clause 12, substitute the following clause:—
 - "12. Correction of name, address etc. in a ration card.— In the event of any spelling mistake in name on the Ration Card in use, address etc., the holder of the ration card may apply to the Ration Card Issuing Authority in Form V-U or Form V-R, as the case may be, and the authority concerned shall after making such enquiry as he may think fit, allow the changes as prayed for by the holder.";
- (4) after clause 12, insert the following clauses:—
 - "12A. Change of Fair Price Shop.— A person may apply for change of location of the Fair Price Shop as recorded in his Ration Card in Form VI-U or Form VI-R, as the case may be, and the Ration Card Issuing Authority may after examining the application form, allow the changes as prayed for.
 - 12B. Exclusion of name from eligible beneficiaries list.— A person may apply for exclusion of his name or name of any member of his family from a beneficiary list in Form VII-U or Form VII-R, as the case may be, and the Ration Card Issuing Authority may, after verification as he may thinks fit, allow the exclusion as prayed for.";
- (5) omit "Form-1" and "Form-2" and after the "Form-2", so omitted, insert the following Forms:

Signature of Authority (with Seal)

, Ward no.

[see overleaf]

"Government of West Bengal

me of the ers of Family are of Family mber in the first	Father's Name	Mother's Name Ge	Gender EPIC no. or Aadhaar no.	Mobile No. (of any family member) – r EPIC no. or Relation Date of Aadhaar no. with Head Birth/Age	Reason(s) for inclusion (please mention
me of the ers of Family	Father's Name		- 40 - 80		Reason(s) for inclusion (please mention
imber in the first				of the (as on 1st case of case of of current Head of year) the family, please mention as "Head")	sl. no. of Deprivation. Index (s) as noted on the reverse side)
Imber in the first					
mber in the first					
ımber in the first					
Shop** and no., type of Ration Card ** AHL 11N. I do hereby also declare and affirm that —	he first column. In case of other members of the family mention Ration Card no., Folio no., name of the Ration	members of the	family mention Ration	Card no., Folio no., na	ime of the Ration
ble. e between (1) & (2)]	indices as referred on the reverse page is/are applicable in case of my family (write the SI. No. of the	e reverse page is	s/are applicable in cas	of my family (write t	he SI. No. of the
Doring this mortion to the	Dotrum this montion to the Auntionst	10001	>	Signature of Applicant	pplicant

Sl. No.	Deprivation Criteria
1	The family lives in house with wall and roof made of grass/straw/bamboo/
	wood/mud
2	The family lives in house with roofs covered with Tali/GI/Tin/Asbestos and
	having earthen wall or wall made of un-burnt brick or wood/stone
3	There is no source of drinking water near the house
4	The family does not have any electric connection
5	The family has no concrete latrine
6	Such family that does not have any male member within the age group be-
	tween 16-59 years and head of the family is a female
7	The family belongs to SC category
8	The family belongs to ST category
9	Such family having no literate adult member
10	Such family that does not have any adult member having primary education
11	Such family having one of the members is handicapped/suffering from pro-
	longed diseases
12	a)Peddler/Cobbler/Hawker b) Construction worker/ Plumber / Mason / Labour
	/Dyer / Welder / Security Guard c)Maid Servant / Worker /Tailor d) Helper
	Transport labour / Driver / Conductor / Helper of the Driver and Conductor
	Garowan / Rickshaw Puller e) Washerman/Chowkider f) Coolie/Porter
13	Head of the family: Staff of a shop / Sahayak / Helper /Peon of a small
	concern / Ardali / Waiter / Electric mechanic / Mechanic/Repairing work-
	men
14	Head of the family works on daily wage or weekly wage
15	Such family that has no permanent job & source of income is mainly from
	Pension/interest and/or rent
16	Shelter less family
17	Such family living in a single room with Kachha wall and Kachha roof
18	One who lives on Destitution or mendicancy (begging) / Rag-picking / Sweep-
2043	ing / Scavenging /Gardening
19	Such family who does not have income
20	All adult members who work on irregular or daily wage basis
21	The Head of the family is minor
22	All members of a family within the age group between 18-60 years are either
	handicapped or have been suffering from prolonged diseases
23	All members of a family above 65 years or either handicapped or have been
	suffering from prolonged diseases
24	Not any of the above but the family is insolvent, want to have food-grains
27	through Ration
	and a supply

The indices for Auto Exclusion — For Urban areas

- (1) Such family having house with 3 or more than 3 rooms made of concrete wall and roof.
- (2) Such family having one of the following consumer goods
 - a) Four-wheeler Motorized Car
 - AC Machine
 - c) Computer or Laptop with internet facilities
- (3) Such family having any 3 of the following consumer goods
 - a) Refrigerator
 - Landline Telephone
 - Washing Machine
 - Two-wheeler Motorized Vehicle
- (4) Such family of which any member is a Gazetted or non-Gazetted employee of State / Central / Govt. Undertaking / Govt. Aided / Statutory / Autonomous bodies
- (5) Any person who pays Income Tax or Professional Tax

Government of West Bengal Form: III-R (Application form for Inclusion in NFSA/RKSY eligible Family List in rural area) [see clause 4(1)(i)]

То									
The Inspector Food &S	Supplies,								
	Block, District								
Sir,									
None of the member of	my family has been	n included in the Rajya	Khadya Suraksha Y	ojana (RKSY) / Natio	nal Food	Security Act (N	FSA) List. I a	apply for in	clusion of names.
Block -		Gran	n Panchayet -			Enumaratio	on Block No.	-	
Village Samsad -		Village -	N	1ouza -		Mobile no.	(of any fami	ly member)) -
If Ration Card is possessed/held at present, please mention present Ration Card no., Folio no., Name & No. of the Ration Shop** and Type of Ration Card (APL/BPL/AAY)**	AHL TIN**	Name of the Members of Family	Father's Name	Mother's Name	Gender	EPIC no. or Aadhaar no.	Relation with Head of the Family (in case of Head of the family, please mention as "Head")	(as on 1st January of current year)	Reason(s) for inclusion (please mention the appropriate sl. no. of Deprivation. Index (s) as noted on the reverse side)
	ы								
10 10 10				1	Ormit des				
							A	= 1	
Shop** and no., type o I do hereby also declare	f Ration Card ** A e and affirm that — exclusion	ble.							
							Sig	nature of A	pplicant
		I							
		n the NFSA/RKSY elig							,
[see overleaf]						:	Signature	of Authori	ity (with Seal)

Sl. No.	Deprivation Criteria
1	Households without shelter
2	Destitute / living on alms
3	Manual scavengers
4	Primitive Tribal Groups
5	Legally released bonded labourers
6	Households with only one room with kucha walls and kucha roof.
7	Households with no adult member between age 16 to 59.
8	Female headed households with no adult male member between age 16 to 59.
9	Households with any disabled member and no able bodied adult member.
10	SC/ST households.
11	Households with no literate adult above 25 years.
12	Landless households deriving the major part of their income from manual casual labour.
13	Not any of the above but the family is insolvent, want to have food-grains through Ration

The indices for Auto Exclusion — For Rural areas

- (1) Motorized Two / Three / Four Wheelers / Fishing boats (which require registration).
- (2) Mechanized Three / Four wheeler agricultural equipment such as tractors harvesters etc.
- (3) Kisan Credit Card with the credit limit of Rs. 50,000 and above.
- (4) Households with any member as Government Employee: Gazetted/ non-gazetted / Central / State Government / PSU government-aied autonomous bodies and local bodies.
- (5) Households with non-agricultural enterprise registered with the Government.
- (6) Any member in the family earning more than Rs. 10,000 per month
- (7) Paying income tax or professional tax.
- (8) Households with three or more rooms with all rooms having pucca walls and pucca roof.
- (9) Owning refrigerator.
- (10) Owning landline phones.
- (11) Households owning 2.5 acres or more irrigated land with at least one irrigation equipment such as diesel / electric operated bore well/ tubewell.
- (12) 5 acres or more land irrigated for two or more crop seasons.

Form: IV-U (Application form for Inclusion of name(s) of one or more than one member of the already Included family in NFSA/RKSY Eligible beneficiaries' List in urban area)

[see clause 4(l)(ii)]

Sub Divisional Controller Food & Supplies, / Rationing Officer,

To

District -

ard No. — numeration Block No	0.—		Address	_	Corporation	/Municipality	Mobile 1	No. (of any	family member) -	
Mention the name / names of the members of the family for whom Ration card are being sought for	Father's Name	Mother's Name	Gender	Epic no. or Aadhaar no.	Date of Birth/Age (as on 1st January of current year)	Name of the Head of the family / member of the family who possesses the card of NFSA / RKSY	NFSA / RKSY Card No.	Type of Card (AAY / PHH/ SPHH / RKSY-I / RKSY-II)		State reason for not inclusion in the NFSA/RKSY list (in case of new born baby/change of places due to marriage/non enlistment in the SECC list/in case of other reasons, state in details) *
In case of new born andatory.	n baby / change of	place due to mar	riage or a	ny other reaso	n - birth reg	istration no. or b	oirth certif	icate or Ca	rd surrender and to	ransfer certificate ar
						**************************************			Signature o	of Applicant

Signature of Authority (with Seal)

Carramanant	of Wlast	D1
Government	or west	Bengal

Form: IV-R (Application form for Inclusion of name(s) of one or more than one member of the already Included family in NFSA/RKSY Eligible beneficiaries' List in rural area) [see clause 4(1)(ii)]

To,

Block - Village Samsad -		Village -	Gram Pa	anchayet -	Mouza -				n Block No of any family men	nher) -
Mention the name / names of the members of the family for whom Ration card are being sought for	Father's Name	Mother's Name	Gender	Epic no. or Aadhaar no.	Date of Birth/Age (as on 1st January of current year)	Name of the Head of the family / member of the family who possesses the card of NFSA / RKSY	NFSA / RKSY Card No.	Type of		State reason for no inclusion in the NFSA/RKSY list (in case of new born baby/change of places due to marriage/non enlistment in the SECC list/in case of other reasons, state in details) *
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In case of new born andatory.	baby / change of	place due to marr	riage or a	ny other reaso	n - birth reg	istration no. or b	irth certifi	icate or Ca	rd surrender and to	ransfer certificate ar

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Form: V-U (Application form for C	Correction of Name &		ore than one members of the al	ready included families und	er NFSA/RKSY in urban area)
То		[Se	e clause 12]		
Sub Divisional Controller Food ⋑	oplies	/ Rationing Officer,			
District —		,			
Sir,					
The names of the members, as noted l	nere-in-under, have al	ready feature in the Raj	ya Khadya Suraksha Yojana (I	RKSY) / National Food Secu	arity Act (NFSA) List. I /we apply
for change of name / father's or husba	nd's name / address in	n the Ration Card.			
Ward No. —			Corporation / Municipality		
Enumeration Block No		Address –		Mobile No. (of any family	/ member) –
Name as recorded in the card at present	Card No.	Type of Card (AAY/PHH/ SPHH/ RKSY-I/ RKSY-II etc.)	Name that requires to be recorded after correction	Father's or Husband's Name that requires to be recorded after correction	Address that requires to be recorded after correction
I /We submit the following document					
Birth Certificate/ Aadhaar Card/ Vote Photocopy of Passport/ Ration card is			Card/Photocopy of the first p	age of Bank Pass Book/ Ph	otocopy of the Driving Licence /
				-	Signature of Applicant
×	×	Return this portion	on to the Applicant	×	
The application form V-U for Correct Shri / Smt.	tion of Name & Addr	ess for one or more that	in one member of the already i	included families under NFS	SA/RKSY has been received from
[see overleaf]				Sign	nature of Authority (with Seal)

Government of West Bengal

Form: V-R (Application form for Correction of Name & Address for one or more than one members of the already included families under NFSA/RKSY in rural area)

[see clause 12]

To The Inspector Food & Supplies,					
Block,	District				
Sir,	· wear				
The names of the members, as noted he for change of name / father's or husbar	ere-in-under, have alr nd's name / address in	eady feature in the Rajy the Ration Card.	ya Khadya Suraksha Yojana (F	RKSY) / National Food Secu	rity Act (NFSA) List. I /we apply
Block -		Gram Panchayet -		Enumaration B	lock No
Village Samsad -	Village -		Mouza -	Mobile no. (of a	any family member) -
Name as recorded in the card at present	Card No.	Type of Card (AAY/PHH/ SPHH/ RKSY-I/ RKSY-II etc.)	Name that requires to be recorded after correction	Father's or Husband's Name that requires to be recorded after correction	Address that requires to be recorded after correction
		= ž 1			
		deci			
I /We submit the following documents	(s) for correction of	name / father's name / h	nusband's name / address.		
Birth Certificate/ Aadhaar Card/ Voter Photocopy of Passport/ Ration card is:			Card/Photocopy of the first p	age of Bank Pass Book/ Pho	otocopy of the Driving Licence /
				- Money Sunger to Warner	Signature of Applicant
	×	Return this portio	n to the Applicant	×	
The application form V-R for Correction	on of Name & Address	s for one or more than o	ne member of the already incl	uded families under NFSA/R	KSY has been received from Shri
/ Smt					
[see overleaf]				Sign	ature of Authority (with Seal)

Form: VI-U (Application form for Change of Ration Shop (FPS) in respect of families already Included in NFSA/RKSY eligible family List)

(Please fill PART-I or PART-III whichever is applicable)

[see clause 12A]

		[
To Sub Divisional Controller Food &5	Supplies	, / Rationing Officer,
District —		
Sir, The names of the members, as not change of the Fair Price Shop (FPS		peared in the Rajya Khadya Suraksha Yojana (RKSY) / National Food Security Act (NFSA) List. I / We apply for tion Card.
Ward No		Corporation / Municipality-
Enumeration Block No	Address -	Mobile No. (of any family member) -

PART-I: FPS shifting for all members of family

Name of the beneficiary	Card No.	Type of Card (AAY/PHH/ SPHH/ RKSY-I/ RKSY-II)	Father's/Husband's name	Name of the Head of the family	Mention the name & no. of Ration Shop as recorded in the Ration Card	Mention the name and no. of the Dealer of the Ration Shop of your Choice / Preference	Reason for chang of Ration Shop

OR

PART-II: Change of FPS due to shifting of a member from one family to another family due to marriage etc.

Name of the applicant	Ration Card No. of the applicant	Type of Card (AAY/PHH/SPHH/RKSY-I/RKSY-II)	Ration Card no. of Head of the Family where the applicant has been shifted	Relationship of the applicant with of Head of the Family where shifting is requested
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PART
1
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Name of the applicant Ration Card No. of the applicant	of the Type of Card (AAY/PHH/SPHH/RKSY-I/RKSY-II)	KSY-II)	Ration Card no. of Head of the Samily * is applied for	Name of FPS where shifting is applied for
	The state of the s			
			j.	

Signature of Applicant

, Address

The application form VI-U (for Change of Ration Shop in respect of families already Included in NFSA/RKSY eligible family list) has been received from Shri / Smt.

....., Ward no.

Signature of Authority (with Seal)

[see overleaf]

ct of families already Included in NFSA/RKSY eligible family List) hever is applicable) of Pation Shon (FDS) in m

	[see clause 12A]
To	
The Inspector Food & Supplies,	

The names of the members, as noted here-in-under has appeared in the Rajya Khadya Suraksha Yojana (RKSY) / National Food Security Act (NFSA) List. I / We apply for change of the Fair Price Shop (FPS) as recorded in the Ration Card.

Block - Village Samsad - Village -

Gram Panchayet - Village -

Mouza -

Mobile no. (of any family member) -

Enumaration Block No.-

PART-I: FPS shifting for all members of fam

Reason for change of Ration Shop	
Mention the name and no. of the Dealer of the Ration Shop of your Choice / Preference	
Mention the name & no. of Ration Shop as recorded in the Ration Card	
Name of the Head of the family	
Father's/Husband's name	
Type of Card (AAY/PHH/ SPHH/ RKSY-I/ RKSY-II)	
Card No.	
Name of the beneficiary	
	Card No. Type of Card (AAY/PHH/ name the family & no. of Ration as recorded RKSY-I) RKSY-I) RKSY-II)

OR

PART-II: Change of FPS due to shifting of a member from one family to another family due to marriage etc.

Relationship of the applicant with of Head of the Family where shifting is requested		
Ration Card no. of Head of the Relationship of the applicant Family where the applicant with of Head of the Family has been shifted where shifting is requested		
Type of Card (AAY/PHH/SPHH/RKSY-I/RKSY-II)		
Ration Card No. of the applicant		
Name of the applicant		

OR

PART-III: Change of FPS for shifting more than one member to a new address

Name of the applicant	Ration Card No. of the applicant	Type of Card (AAY/PHH/SPHH/RKSY		Ration Card no. of Head of the Family *	Name of FPS where shifting is applied for
		CONTRACTOR LONG			January P. Market
			- Herekuin	To your State of the State of t	
		(1)			
ease write "Head" against H	Head of the Family.				
				-	Signature of Applicant

The application form VI-R (for Change of Ration Shop in respect of families already Included in NFSA/RKSY eligible family List) has been received from Shri / Smt.......

Address...., Village....., Village.....

[see overleaf]

Signature of Authority (with Seal)

Form: VII-U (Application form for exclusion of name from Ration Card NFSA/RKSY Eligible beneficiaries' List in urban area)

[see clause 12B]

District -				
		f my family member name from Rajya	a Khadya Suraksha Yojana (RKSY) / N	ational Food Security Act (NFS)
Ward No	C	orporation / Municipality -		
Enumeration Block No	A	ddress -	Mobile No. (of any	family member) -
NFSA/RKSY card no.	Card type (AAY/PHH/ SPHH/ RKSY-I/ RKSY-II etc.)	Name of Head of the Family	Name of the other family member of the family who possesses the card of NFSA / RKSY	Reason for exclusion from the NFSA/RKSY *#.
If surrender application submi	itted due to death of any family	member, please mention date of death	n. Submission of death registration cer	ificate is mandatory
			A Micera an Infe	the first teacher
ж	×	. Return this portion to the Applicant	×	Signature of Applicant
The application form VII-U for	Exclusion of name(s) from NFS	SA/RKSY Eligible beneficiaries' List	has been received from Shri / Smt	
		, Ward no		

- (1) Death of family member
- (2) Other reasons.

THE KOLKATA GAZETTE, EXTRAORDINARY, NOVEMBER 25, 2016

Government of West Bengal

Form: VII-R (Application form for exclusion of name from Ration	Card NFSA/RKSY Eligible beneficiaries' List in rural area)
[see clause	

То				
The Inspector Food & Supplies	S,			
	Block, District		e	
Sir, I would like to request you to p (NFSA) List.	lease exclude My name/ Name	e of my family member name fro	m Rajya Khadya Suraksha Yojana (RK	
Block -	Gram Par	nchayet -	Enumaration Bloc	
Village Samsad -	Village -	Mouza -	Mobile no. (of any	family member) -
NFSA/RKSY card no.	Card type (AAY/PHH/ SPHH / RKSY-I / RKSY-II etc.)	Name of Head of the Family	Name of the other family member of the family who possesses the card of NFSA / RKSY	State reason for exclusion from the NFSA/RKSY *#.
				= 4 (15), 1
17.7%		5 60		
Company of the Company		317	3 C V S - 1	
* If surrender application subn	nitted due to death of any fam	ily member, please mention date	e of death. Submission of death registra	
× × × × × × × × × × × × × × × × × × ×	×	Return this portion to the Applica	ant×	nature of Applicant
The application form VII-R	for Exclusion of name(s)	from NFSA/RKSY Eligible b	peneficiaries' List has been receive	ed from Shri / Smt
# Reason for Surrender — (1) Death of family me	mbor		Signature	of Authority (with Seal)

(6) Omit "Form-A"

Other reasons.";

By order of the Governor,

ANIL VERMA

Principal Secy. to the Govt. of West Bengal & Food Commissioner, Food and Supplies Department.