



**Government of West Bengal**  
**Food & Supplies Department**  
**Khadyashree Bhawan**  
11 A, Mirza Ghalib Street, Kolkata-700087  
<https://food.wb.gov.in>



File No. FS/Sectt./SUP/4M-30/2022 (Pt- III)

Dated: 26/12/2025

No.: 5610

**ORDER**

**Sub: -Introduction of Online Module for application of dealership on compassionate ground as Partnership Firm.**

In continuation of this Department's GO No. 2095-PS Dated: 02.06.2025 and 4231-PS Dated: 22.08.2025, whereby the Online Module for application of FPS Dealership on compassionate ground due to death and incapacitation of the dealer respectively were operationalized, the undersigned is directed to state that the module for online application of dealership on compassionate ground as Partnership Firm, has now been developed and made operational in the login of the existing dealer in case of incapacitation and in the public domain of the departmental portal in case of death of the dealer.

This module will enable submission of application of dealership online by the incapacitated FPS Dealer and/or his family members and the family members of the deceased dealer by way of constituting a Partnership Firm, along with necessary documents, Aadhaar validation and prescribed application fee.

The Licensing Authorities and all other concerned officers, the District Controllers (F&S) in the Directorate of DDP&S and Deputy/Joint Directors of Rationing in the Directorate of Rationing are requested to strictly adhere to the process flow and guidelines prescribed in the Standard Operating Procedures (SoPs) for online applications (Copies enclosed).

Consequently, **Forms C1 and C2 (Application Forms)** and **Formats L1 and L2 (Enquiry Report)** have been revised. The revised formats are enclosed herewith for ready reference.

Encl: As stated above.

*N. G. S.*  
Deputy Secretary  
Food & Supplies Department

Memo No. 5610- FS/Sectt./Sup/4M-30/2022 (Pt-III)

Dated: 26/12/2025

Copy forwarded for information and necessary action to:

1. The Special Secretary (IT & Reforms), Food & Supplies Department.
2. The Director, Directorate of DDP&S/ Rationing/ Consumer Goods/ I&QC.
3. The DCFSs and DDRs/JDRs (All)

*N. G. S.*  
Deputy Secretary  
Food & Supplies Department

*S.*



<p align="center"><b>GOVERNMENT OF WEST BENGAL</b></p> <p align="center"><b>Application for Issue of Licence for FPS Dealership under Compassionate Ground in respect of Individual person along with Checklist</b></p> <p align="center"><b>[Vide clause 39 of the WBTPDS (M&amp;C) order, 2024]</b></p>	<p align="center"><b>FORM – C1</b></p> <p align="center">Photograph(s) of the applicant(s) in Aadhaar</p>
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**No field should be left blank. If not applicable, write “Not Applicable”**

**Authentication**

Aadhaar	(eKYC to be done through OTP to Aadhaar-linked mobile)
Mobile No.	(to be validated through OTP)
E-Mail ID	(to be validated through OTP)

**Select type of application**

<b>A. Individual to Individual</b>	
<b>B. Partnership to Individual</b>	

**In case selected B. Partnership to Individual the qualifying details to enter as follows-**

- Name of Removed Partner -
- Reason (Death/Incapacitation/Retirement) -
- Date of Demise/Incapacitation/Retirement -
- Reason of incapacitation (if applicable) –(Disease/ailment)
- Upload Death/Incapacitation Certificate/Declaration of retirement in affidavit form and enter details
- Upload Legal Heirs Certificate
- Upload NOC from Non-Participating Eligible Family Members if any

**Part-I (Details of previous dealership)**

1. Code and Place of existing FPS dealership:
2. Existing/Old license No.
3. Licence renewed till which year:
4. Name of deceased/incapacitated dealer:
5. Date of demise/date of certificate regarding incapacitation:
6. In case of incapacitation, reason and details:

**Part II (Details of applicant)**

7. Name of the candidate/ applicant (as in Aadhaar):
8. Name of father/mother/husband:
9. Relation with deceased/incapacitated proprietor:
10. Date of birth:
11. Gender:
12. Caste :
13. Citizenship:
14. PAN of the candidate:
15. Aadhaar No.
16. Mobile Phone No.
17. eMail ID:
18. Residential address(es):
19. Permanent address(es):
20. Whether physically and mentally fit:
21. Highest Educational qualification:

**Part- III (Financial details)****22. Financial solvency of the candidate****a. In case account held in a Bank/Post Office**

IFSC	Bank Name	Branch Name	A/C type (Single/Joint)	Deposit type (Savings/FD/TD/RD/Flexi)	A/C. No.	Balance on the Date of application (INR)

(Add row for multiple accounts)

**b. In case of Joint account enter the name of all joint account holders**

Joint A/C. holder's Name	Is NOC given?

23. Family income per month from all sources other than FPS:

**Part-IV (Existing Storage Godown and Office/Shop-Counter Details)**

24. Full address of the Shop-cum-Godown as reflected **Auto fetch**

in last renewed license with

Dag No., Khatian No., Mouza, J.L. No., Village, Gram

Panchayat, Block, Police Station and PIN Code

(in case of rural area) or

Holding No., Street Name, Ward No.

Municipality, Police Station and PIN

Code (in case of Municipal Area):

25. Whether the same Shop-cum-godown would be in use now: Yes/ No

a) If no, then reason for such change:

b) Distance of offered shop-cum-godown from the existing shop-cum-godown:

(If 'Yes' then no further details is required.)

**Details of the proposed shop-cum-godown:**

(If answer to point 25. is 'No' then to fill this)

26. Godown with separate Office/Shop Space: Yes/No

(If yes, then fill 26a, 26b., 26c., 26d.)

a. Full address of the Shop-cum-Godown with :

Dag No., Khatian No., Mouza, J.L. No., Village,

Gram Panchayat, Block, Police Station and Pin

Code (in case of rural area) or

Holding No., Street Name, Ward No.

Municipality, Police Station and Pin

Code (in case of Municipal Area)

b. In case of multiple compartments of godown (not more than 2):

Enter No. of godowns/chambers excluding shop-counter/office

Sl. No.	Length (in ft)	Breadth (in ft)	Height (in ft)	Area (in Sq. ft.)	Plinth height (in inches)

Total Area-

c. Size of the shop-counter/office :

Length (in ft)	Breadth (in ft)	Area (in Sq. ft.)	Plinth height (in inches)

d. Whether godown and shop-counter/office are adjacent & connected: Yes/No

e. Whether the godown or shop is opening to any other room/ premises, passage etc. : Yes/No

**If answer to point 26. is 'No' then to fill 26e. & 26f.**

f. Full address of the Shop-cum-Godown :

with Dag no., Khatian No., Mouza, J.L. No.,  
Village, Gram Panchayat, Block, Police Station and  
PIN Code (in case of rural area) or Holding No.,  
Street Name, Ward No., Municipality,  
Police Station and PIN Code (in case of Municipal Area)

g. Size of the shop-cum-godown (Area in sq.ft.):

Length (in ft)	Breadth (in ft)	Height (in ft)	Area (in Sq. ft.)	Plinth height (in inches)

27. Boundary of the godown:

<b>East</b>	
<b>West</b>	
<b>North</b>	
<b>South</b>	

28. Whether the Shop-cum-godown has a verandah with shed to accommodate at least 5 (five) people, who may wait in the queue: Yes/No

29. Structure of roof of the godown:

	Structure of roof	Select
a	Made of concrete slab/brick slab	
b	Made of asbestos/tin sheet with coating of bitumen	
c	Made of asbestos/tin sheet without coating of bitumen	

*Note: Kutcha or thatched roof is not allowed.*

30. Structure of floor :

	Structure of floor	Select
a	Complete in all respect including cement/tile finishing	
b	Floor is otherwise ready but tiles/cement finishing is not done	
c	Floor is not ready at all	

31. Structure of wall:

	Structure of wall	Select
a	Complete in all respect with brick/mortar/stone including plaster	
b	Complete but all inner walls do not have plaster	
c	Wall is made of material other than brick/mortar/stone	
d.	Incomplete wall	

32. Structure of Door:

	Structure of door	Select
a	Complete in all respect including shutter	
b	Incomplete	

33. Whether delivery truck can reach the godown for unloading: Yes/No

If not, whether the godown is accessible by small carts for loading: Yes/No

34. Character of land of the premises :“Dokan or Godown/ Bastu or Vita(Homestead Category)/ convertible to Dokan or Godown under land Law/ Other than as mentioned’.

**Part-V (Nature of Possession of the Storage Godown and Office/Shop-Counter)**

35	Nature of possession	Select
a	Sole Ownership	
b	Shared/Family property	
c	Long term rental/ Lease agreement	

**36. In case of ownership:**

- a. Mode of acquisition(Gift/Purchase/Inheritance/Others) :
- b. No. and date of execution of Registered deed of conveyance/purchase/gift in the name of applicant/  
Mutation Certificate/Property tax receipt :

**37. In case of property owned by a family member of the applicant(including shared ownership):**

- a. Name of the owner:
- b. Relationship with the applicants/s:
- c. Ownership document No. : ROR/Deed/Property Tax Receipt/Mutation Certificate/Others
- d. Whether family member(s) has/have given NOC?
- e. If shared, whether other co-owners have given NOC?

**38. Leased/Rental Possession**

- a. Name(s) of owner(s) of the premises :
- b. No. and date of execution of Registered deed of conveyance / purchase /gift in the name of applicant/ Mutation Certificate:
- c. Extent of ownership: Absolute / Shared :
- d. No. and date of execution of Registered or Notarized Lease Deed/ Tenancy or Rental Agreement for at least 4 years/ leave & licence Agreement:
- f. Period of lease/tenancy under registered agreement deed :
- g. Whether expressly rented/leased for FPS as per deed :

**Part-VI (Other details)**

Prior experience of business, if any :

39. If yes, give details with nature and area of business:

40. Whether applicant is holding a license of FPS Dealer or Distributor :

or wholesaler in his name or he is a relative to a person as per clause 2(1)(x) of the WBTPDS (M&C) Order, 2024, who already have a dealer or Distributor or Wholesaler license.

If yes, give details.

41. Whether the applicant is a Flour Mill or a Rice Mill and its Owner in any capacity:

42. Whether applicant is a member of local bodies, local authority, Panchayati Raj Institutions, Board or corporation, Commission or Member of Legislative Assembly or a Member of

Parliament during his tenure as such capacity:

43. Whether the applicant is a Dealer, whose License has been cancelled / terminated for contravention of the provisions of the Act or the Control Order:
44. Whether the applicant is a Dealer, who earlier has resigned or voluntarily surrendered his license:
45. Whether applicant is a person holding a post in the establishment of any :  
State Government or Central Government or any authority  
or body or institution of Local self-government established or  
constituted by or under the Constitution or by any other law  
made by the Parliament or a State Legislature or by notification  
issued or order made by the Central Government or a State  
Government
46. Whether applicant, partners, etc. ever been convicted under EC Act, 1955 :  
or in any other criminal proceedings connected with essential  
commodities or has/have litigation against the Department/Govt.  
(If so, details thereof, else declaration in Annexure-I)
47. Whether involved in litigation against Govt. of WB or of India in :  
any court of law
48. If yes, give details with case no. and name of court of law:

#### **Declaration**

I/We certify that the statements above are true to the best of my/our knowledge and that for any suppression of fact(s) detected later on, the licence granted to /us is liable to be cancelled.

Date:

Place:

.....  
Signature of Applicant/Authorized Signatory



**Part-VII (Uploading section)**

<b>Checklist to Form C1</b> <b>Checklist of documents to be uploaded with Application Form for engagement</b> <b>on compassionate ground in respect of individual person</b>
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**Part-I: Application fees**

1. Application fees deposit challan	(to be fetched from GRIPS)
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**Part-II: Details of the Applicant**

2. Identity proof of the Individual [EPIC(S)/ Passport(s)]	Upload- Preview
3. Proof of residential address of the Individual [EPIC/ Passport/recent Electricity Bill/Driving License]	Upload- Preview
4. PAN Card of Individual	Upload- Preview
5. Proof of educational qualification of individual [Certificate or Marksheet]	Upload- Preview
6. Medical certificate of fitness of Individual from a Govt. Hospital	Upload- Preview
7. Family income certificate issued by the local authority	Upload- Preview
8. Caste Certificate (SC/ST/OBC)	
9. Misc. Document (Adoption Deed/ Declaration/Old Partnership deed etc.)	

**Part-III: Details of the deceased/incapacitated dealers**

10. Death certificate of the deceased dealer	Upload- Preview
11. Legal heirs certificate of the deceased/incapacitated Dealer issued by competent Authority and affidavit from the 1 <sup>st</sup> Class Magistrate	Upload- Preview
<ul style="list-style-type: none"> <li>12. NOC in the form of affidavit from other eligible family members in Annexure II./ Upload NOC from Non-Participating Eligible Family Members if any</li> </ul>	Upload- Preview
13. Medical certificate of incapacitation in favour of the dealer issued by a Govt. Hospital, certifying reason of incapacitation in proper format, in case of transfer of licence due to incapacitation.	Upload- Preview

**Part-IV: Details of shop-cum-godown**

14. A layout map showing clear boundary with dimensions showing offered godown, office, shed for persons in queue, space for unloading of stock of PDS commodities and approach road.	Upload- Preview
15. In case of ownership (including NOC from family members)/shared ownership: <ul style="list-style-type: none"> <li>a) Photocopy of Record of Rights (Porcha)/ Registered Deed of Conveyance/purchase/gift in the name of applicant/ Mutation Certificate,</li> <li>b) Document showing character of land as “Dokan or Godown/ Bastu or Vita (Homestead Category)/convertible to Dokan or Godown under land Law/ Other than as mentioned”. if Record of Rights is not produced</li> <li>c) NOC of other co-owners (in case of shared ownership/family members of the offered shop- cum-godown) in the form of affidavit sworn before a Magistrate.</li> </ul>	Upload- Preview
16. For leased/rented property: <ul style="list-style-type: none"> <li>a) Registered/Notarized Lease Deed or Tenancy or Rental Agreement for at least 4 years or leave &amp; licence Agreement,</li> <li>b) Latest rent receipts,</li> <li>c) Registered Deed/RoR in the name of the land owner (or lessor),</li> <li>d) Any other proof of ownership, if ROR/Deed is not submitted.</li> </ul>	Upload- Preview

**Part V: Financial solvency**

17. Proof of financial solvency [Account statement/Deposit Certificate (FD/TD/ RD/Flexi)]/updated passbook issued by a recognized bank/or Post Office as reflected on the date of application.	Upload- Preview
18. In case the aforesaid account/deposit is held jointly, NOC of such joint holder for investment in FPS Dealership	Upload- Preview

**Part VI: Affidavit and others**

19. Affidavit in Annexure-I format	Upload- Preview
20. Income Tax Return for last 3 FYs, if applicable	Upload- Preview

I/We certify that the statements above are true to the best of my/our knowledge and that for any suppression of fact(s) detected later on, the application or offer letter or license granted to /us is liable to be cancelled at any stage without assigning any reasons.

Date:

Place:

Signature of Applicant

## Acknowledgment

(System-generated pdf will also be sent to the email ID of the applicant)

Vacancy ID :	Notification no.:
Application ID :	Time of Application:
	Date of Application:

Name of the Applicant:

Mobile no.:

Residential Address: Village / Municipality / Municipal Corporation ..... P.O. ....,  
P.S. ...., District.....

Place of vacancy: (Detailed location of the vacancy as published in the notification)

Type of vacancy: FPS (Compassionate) <pre-filled>

The application with above mentioned details has been submitted.

(This is a system-generated acknowledgment with no signature required)

<p align="center"><b>GOVERNMENT OF WEST BENGAL</b></p> <p align="center"><b>Application for Issue of Licence for FPS Dealership under Compassionate Ground in respect of <b>Partnership Firm</b> along with Checklist</b></p> <p align="center"><b>[Vide clause 39 of the WBTPDS (M&amp;C) order, 2024]</b></p>	<b>FORM – C2</b>
	<p align="center">Photograph(s) of the applicant(s) in Aadhaar</p>

**Revised**

**Type of application : Individual to Partnership firm due to incapacitation/death**

**No field should be left blank. If not applicable, write “Not Applicable”**

**Authentication**

Aadhaar	(eKYC to be done through OTP to Aadhaar-linked mobile)
Mobile No.	(to be validated through OTP)
E-Mail ID	(to be validated through OTP)

**Part-I (Details of previous dealership)**

1.	Code and Place of existing FPS dealership :	
2.	License renewed till which year :	
3.	Name of deceased/Incapacitate dealer :	
4.	Date of demise/incapacitation :	
5.	Details of incapacitation a) Reason b) Certificate issuing Govt. Hospital	

**Part II (Details of partners)**

<b>Partner 1 Details :-</b>		
6.	Name of the partner :	
7.	Name of guardian:	
8.	Relation of the partner with deceased dealer :	
9.	Date of birth :	
10.	Citizenship :	
10.	Caste :	
11.	Aadhaar No :	
13.	Residential address :	
14.	Permanent address :	
15.	Whether Physically and mentally fit :	
16.	Mobile No :	
17.	Educational qualification :	
<b>Partner 2 Details :-</b>		

6.	Name of the partner:	
7.	Name of guardian:	
8.	Relation of the partner with deceased dealer :	
9.	Date of birth :	
10.	Citizenship :	
10.	Caste :	
11.	Aadhaar No :	
13.	Residential address :	
14.	Permanent address :	
15.	Whether Physically and mentally fit :	
16.	Mobile No :	
17.	Educational qualification :	

**NB: For more partner Sl. No. 6-17 is to be repeated.**

**Part- III (Financial details)**

18.	Bank/Post Office Name	Branch Name	Account No	IFSC	Deposit Type	Balance as on the date of Application (Rs.)
					Total	
19.	Family income per month from all sources other than Fair price shop (FPS) :					
20.	Name of Firm :					
21.	Name of Authorised signatory partner					
22.	PAN of Firm :					
23.	Firm Registration No :					
24.	Firm Registration Date :					
25.	Email :					

**Part-IV (Existing Storage Godown and Office/Shop-Counter Details)**

<p>26. Full address of the Shop-cum-Godown as reflected in last renewed license with  Dag No., Khatian No., Mouza, J.L. No., Village, Gram Panchayat, Block, Police Station and PIN Code  (in case of rural area) or  Holding No., Street Name, Ward No.  Municipality, Police Station and PIN Code (in case of Municipal Area):</p>	<b>Auto fetch</b>																										
<p>27. Whether the same Shop-cum-godown would be in use now: Yes/ No</p> <p>a) If no, then reason for such change:</p> <p>b) Distance of offered shop-cum-godown from the existing shop-cum-godown: (If 'Yes' then no further details is required.)</p>																											
<p><b>Details of the proposed shop-cum-godown:</b></p>																											
<p><b>(If answer to point 27. is 'No' then to fill this)</b></p> <p>28. <u>Godown with separate Office/Shop Space:</u> Yes/No</p> <p><b>(If yes, then fill 28a, 28b., 28c., 28d.)</b></p> <p>a. Full address of the Shop-cum-Godown with :  Dag No., Khatian No., Mouza, J.L. No., Village, Gram Panchayat, Block, Police Station and Pin Code (in case of rural area) or  Holding No., Street Name, Ward No.  Municipality, Police Station and Pin Code (in case of Municipal Area)</p> <p>b. In case of multiple compartments of godown (not more than 2):  Enter No. of godowns/chambers excluding shop-counter/office <span style="border: 1px solid black; display: inline-block; width: 40px; height: 15px; vertical-align: middle;"></span></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 5%;">Sl. No.</th> <th style="width: 15%;">Length (in ft)</th> <th style="width: 15%;">Breadth (in ft)</th> <th style="width: 10%;">Height (in ft)</th> <th style="width: 15%;">Area (in Sq. ft.)</th> <th style="width: 20%;">Plinth height (in inches)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> <p style="text-align: center; margin-top: 5px;">Total Area- <span style="border: 1px solid black; display: inline-block; width: 60px; height: 15px; vertical-align: middle;"></span></p> <p>c. Size of the shop-counter/office :</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 20%;">Length (in ft)</th> <th style="width: 20%;">Breadth (in ft)</th> <th style="width: 20%;">Area (in Sq. ft.)</th> <th style="width: 20%;">Plinth height (in inches)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> <p>d. Whether godown and shop-counter/office are adjacent &amp; connected: Yes/No</p> <p>e. Whether the godown or shop is opening to any other room/ premises, passage etc. : Yes/No</p>		Sl. No.	Length (in ft)	Breadth (in ft)	Height (in ft)	Area (in Sq. ft.)	Plinth height (in inches)													Length (in ft)	Breadth (in ft)	Area (in Sq. ft.)	Plinth height (in inches)				
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**If answer to point 28. is 'No' then to fill 28e. & 28f.**

- f. Full address of the Shop-cum-Godown :  
 with Dag no., Khatian No., Mouza, J.L. No.,  
 Village, Gram Panchayat, Block, Police Station and  
 PIN Code (in case of rural area) or Holding No.,  
 Street Name, Ward No., Municipality,  
 Police Station and PIN Code (in case of Municipal Area)

- g. Size of the shop-cum-godown (Area in sq.ft.):

Length (in ft)	Breadth (in ft)	Height (in ft)	Area (in Sq. ft.)	Plinth height ( in inches)

29. Boundary of the godown:

<b>East</b>	
<b>West</b>	
<b>North</b>	
<b>South</b>	

30. Whether the Shop-cum-godown has a verandah with shed to accommodate at least 5 (five) people, who may wait in the queue: Yes/No

31. Structure of roof of the godown:

	<b>Structure of roof</b>	<b>Select</b>
a	Made of concrete slab/brick slab	
b	Made of asbestos/tin sheet with coating of bitumen	
c	Made of asbestos/tin sheet without coating of bitumen	

*Note: Kutcha or thatched roof is not allowed.*

32. Structure of floor :

	<b>Structure of floor</b>	<b>Select</b>
a	Complete in all respect including cement/tile finishing	
b	Floor is otherwise ready but tiles/cement finishing is not done	
c	Floor is not ready at all	

33. Structure of wall:

	<b>Structure of wall</b>	<b>Select</b>
a	Complete in all respect with brick/mortar/stone including plaster	

b	Complete but all inner walls do not have plaster	
c	Wall is made of material other than brick/mortar/stone	
d.	Incomplete wall	

34. Structure of Door:

	<b>Structure of door</b>	<b>Select</b>
a	Complete in all respect including shutter	
b	Incomplete	

35. Whether delivery truck can reach the godown for unloading: Yes/No

If not, whether the godown is accessible by small carts for loading: Yes/No

36. Character of land of the premises :“Dokan or Godown/ Bastu or Vita(Homestead Category)/ convertible to Dokan or Godown under land Law/ Other than as mentioned’.

**Part-V (Nature of Possession of the Storage Godown and Office/Shop-Counter)**

<b>37</b>	<b>Nature of possession</b>	<b>Select</b>
a	Sole Ownership	
b	Shared/Family property	
c	Long term rental/ Lease agreement	

**38. In case of ownership:**

a. Mode of acquisition(Gift/Purchase/Inheritance/Others) :

b. No. and date of execution of Registered deed of conveyance/purchase/gift in the name of applicant/ Mutation Certificate/Property tax receipt :

**39. In case of property owned by a family member of the applicant(including shared ownership):**

a. Name of the owner:

b. Relationship with the applicants/s:

c. Ownership document No. : ROR/Deed/Property Tax Receipt/Mutation Certificate/Others

d. Whether family member(s) has/have given NOC?

e. If shared, whether other co-owners have given NOC?



**40. Leased/Rental Possession**

- a. Name(s) of owner(s) of the premises :
- b. No. and date of execution of Registered deed of conveyance / purchase /gift in the name of applicant/ Mutation Certificate:
- c. Extent of ownership: Absolute / Shared :
- d. No. and date of execution of Registered or Notarized Lease Deed/ Tenancy or Rental Agreement for at least 4 years/ leave & licence Agreement:
- f. Period of lease/tenancy under registered agreement deed :
- g. Whether expressly rented/leased for FPS as per deed :

**Part-VI (Other details)(For all partners)**

41. Prior experience of business, if any : Yes/No  
If yes, give details with nature and area of business:
42. Whether applicant is holding a license of FPS Dealer or Distributor :  
or wholesaler in his name or he is a relative to a person as per clause 2(1)(x) of the WBTPDS (M&C) Order, 2024, who already have a dealer or Distributor or Wholesaler license.  
If yes, give details.
43. Whether the applicant is a Flour Mill or a Rice Mill and its Owner in any capacity:
44. Whether applicant is a member of local bodies, local authority, Panchayati Raj Institutions, Board or corporation, Commission or Member of Legislative Assembly or a Member of Parliament during his tenure as such capacity:
45. Whether the applicant is a Dealer, whose License has been cancelled / terminated for contravention of the provisions of the Act or the Control Order:
46. Whether the applicant is a Dealer, who earlier has resigned or voluntarily surrendered his license:
47. Whether applicant is a person holding a post in the establishment of any :  
State Government or Central Government or any authority  
or body or institution of Local self-government established or constituted by or under the Constitution or by any other law made by the Parliament or a State Legislature or by notification issued or order made by the Central Government or a State Government
48. Whether applicant, partners, etc. ever been convicted under EC Act, 1955 :  
or in any other criminal proceedings connected with essential commodities or has/have litigation against the Department/Govt.  
(If so, details thereof, else declaration in Annexure-I)
49. Whether involved in litigation against Govt. of WB or of India in :  
any court of law
50. If yes, give details with case no. and name of court of law:

**PART -VII (Payment )**

51. Application Fees

Through integrated GRIPS portal

### Declaration

I/We certify that the statements above are true to the best of my/our knowledge and that for any suppression of fact(s) detected later on, the licence granted to /us is liable to be cancelled.

Date:

Place:

.....  
Signature of Applicant/Authorized Signatory

### Part-VI (Uploading section)

<b>Checklist to Form C2</b> <b>Checklist of documents to be uploaded with Application Form for engagement</b> <b>on compassionate ground in respect of Partnership Firm</b>
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### Part-I: Application fees

1. Application fees deposit challan	(to be fetched from GRIPS)
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### Part-II: Details of the Applicant ([All partners](#))

2. Identity proof of the Individual [EPIC(S)/ Passport(s)]	Upload- Preview
3. Proof of residential address of the Individual [EPIC/ Passport/recent Electricity Bill/Driving License]	Upload- Preview
4. Proof of educational qualification of all partners [Certificate or Marksheet]	Upload- Preview

5. Medical certificate of fitness of all partners from a Govt. Hospital	Upload- Preview
6. Affidavit in Annexure-I format	Upload- Preview
7. Caste Certificate (SC/ST/OBC)	Upload- Preview
8. Misc. Document (Adoption Deed/ Declaration etc.)	Upload- Preview

**Part-III: Details of the deceased/incapacitated dealers**

9. Death certificate of the deceased dealer	Upload- Preview
10. Legal heirs certificate of the deceased/incapacitated Dealer issued by competent Authority and affidavit from the 1 <sup>st</sup> Class Magistrate	Upload- Preview
11. NOC in the form of affidavit from other eligible family members in Annexure II.	Upload- Preview
12. Medical certificate of incapacitation in favour of the dealer issued by a Govt. Hospital, certifying reason of incapacitation in proper format, in case of transfer of licence due to incapacitation.	Upload- Preview
13. Nomination of the applicant by the incapacitated Dealer	Upload- Preview

**Part-IV: Details of shop-cum-godown**

14. A layout map showing clear boundary with dimensions showing offered godown, office, shed for persons in queue, space for unloading of stock of PDS commodities and approach road.	Upload- Preview
15. In case of ownership (including NOC from family members)/shared ownership: a) Photocopy of Record of Rights (Porcha)/ Registered Deed of Conveyance/purchase/gift in the name of applicant/ Mutation Certificate, b) Document showing character of land as “Dokan or Godown/ Bastu or Vita(Homestead Category)/convertible to Dokan or Godown under land Law/ Other than as mentioned”. if Record of Rights is not produced c) NOC of other co-owners (in case of shared ownership/family members of the offered shop- cum-godown) in the form of affidavit sworn before a Magistrate.	Upload- Preview

16. For leased/rented property: a) Registered/Notarized Lease Deed or Tenancy or Rental Agreement for at least 4 years or leave & licence Agreement, b) Latest rent receipts, c) Registered Deed/RoR in the name of the land owner (or lessor), d) Any other proof of ownership, if ROR/Deed is not submitted.	Upload- Preview
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**Part V: Financial solvency**

17. Proof of financial solvency [Account statement/Deposit Certificate (FD/TD/ RD/Flexi)]/updated passbook issued by a recognized bank/or Post Office as reflected on the date of application.	Upload- Preview
18. Family income certificate issued by the local authority	Upload- Preview

**Part VI: Affidavit and others**

19. Partnership Registration Certificate	Upload- Preview
20. Partnership Deed (Notarized/Registered)	Upload- Preview
21. PAN of the Partnership Firm	Upload- Preview
22. Affidavit regarding authorised signatory	Upload- Preview
23. Income Tax Return for last 3 FYs, if applicable	Upload- Preview

I/We certify that the statements above are true to the best of my/our knowledge and that for any suppression of fact(s) detected later on, the application or offer letter or license granted to /us is liable to be cancelled at any stage without assigning any reasons.

Date:

Place:

Name of Applicant

## Acknowledgment

(System-generated pdf will also be sent to the email ID of the applicant)

Vacancy ID :	Notification No.: FPS Code
Application ID :	Time of Application:
	Date of Application:

Name of the Applicant:

Mobile No.: (SMS updates will be sent to this mobile regarding this application.)

Residential Address: Village / Municipality / Municipal Corporation ..... P.O.  
....., P.S. ...., District.....

Place of vacancy: FPS address

Type of vacancy: FPS (Compassionate) <pre-filled>

The application with above mentioned details has been submitted.

*(This is a system-generated acknowledgment with no signature required)*

## GOVERNMENT OF WEST BENGAL

## FORM L1

## Enquiry Report

## into Application for FPS Dealership of Individual Ownership under Compassionate Ground

[Vide clause 39 of the WBTPDS (Maintenance &amp; Control) Order, 2024]

Type of application: Individual to Individual / Partnership to Individual

Name and Designation of the Enquiry  
Officer :

Date of Enquiry:

Sl. No.	Particulars	Details provided by the applicant	Findings of Enquiry Officer			Remarks
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**Part-I (Details of previous dealership)**

1	Code and Place of existing FPS dealership:		System	No comment		
2	Existing/Old license No.		System			
3	Licence renewed till which year:		System			
4	Partnership registration No.		System			
5	Name of deceased/incapacitated dealer/partner:		System			
6	Date of demise/date of certificate regarding incapacitation:		System			
7	In case of incapacitation, reason and details:		Correct	Incorrect	Need correction	Remarks
8	Name of removed partner (s)		Correct	Incorrect	Need correction	Remarks
9	Reason (Death /Incapacitation /Retirement)		Correct	Incorrect	Need correction	Remarks
10	Whether NOC from Non-Participating Eligible Family Members, if any is submitted		Yes	No	Proper document to be uploaded	Remarks
11	Whether any proceedings initiated by the licensing authority is kept pending against the deceased/incapacitated dealer		Yes	No		If yes, then details

**Part-II (Details of the applicant)**

12	Name of the candidate		System	No comment		
13	Relation with the deceased dealer(proprietor)		Correct	Incorrect	Need correction	
14	Name of guardian and relation		Correct	Incorrect	Need correction	Remarks
15	Date of Birth		Correct	Incorrect	Need correction	Remarks
16	Gender		Correct	Incorrect	Need correction	Remarks
17	Caste		Correct	Incorrect	Need correction	Remarks
18	Citizenship		Correct	Incorrect	Need correction	Remarks
19	Aadhaar No.		No action			
20	PAN		Correct	Incorrect	Need correction	
21	Residential address of the applicant		Correct	Incorrect	Need correction	
22	Mobile No.		System verified			
23	eMail ID.					
24	Educational Qualification		Correct	Incorrect	Need correction	Remarks
25	Whether identity of the applicant is verified with the uploaded document		Yes	No		Remarks
26	Whether the applicant is physically and mentally fit as per the Govt. Hospital certificate		Yes	No		Remarks

**Part-III (Financial details)**

27	Whether the applicant has submitted Bank Details and you have verified		Correct	Incorrect	Need correction	Remarks
28	Whether the applicant is financially solvent as per Govt. order in force		Yes	No		Remarks
29	In case the aforesaid account/deposit is held jointly, NOC of such joint holder for investment in FPS Dealership		Correct	Incorrect	Need correction	Remarks
30	Monthly family income of the applicant as per certificate from competent authority		Correct	Incorrect	Need correction	Remarks

**Part-IV (Storage godown and Office/ Shop-Counter Details)**

31	Full address of the shop-cum-godown under previous Dealership		System	No comment		
32	Whether the same shop-cum-godown would be in use now		Yes	No	Need correction	Remarks
33	If no, then reason for change		Correct	Incorrect	Need correction	Remarks
34	In case a new shop-cum-godown is being proposed, distance of it from previous FPS (Please comment on convenience of the beneficiaries against the shifting of FPS in Remarks section)		Correct	Incorrect	Need correction	Remarks

**In case Godown with separate Office Space: (verify)**

35	Full address of the Shop-cum-Godown with Dag No., Khatian No., Mouza, Village, Gram Panchayat, Block, Police Station and PIN Code (in case of rural area) or Holding No., Street Name, Ward No. Municipality, Police Station and PIN Code (in case of Municipal Area)		Correct	Incorrect	Need correction	Remarks
36	In case of multiple compartments number of compartments/godowns		Correct	Incorrect	Need correction	Remarks
37	Measurement of the godown/compartments(L,B,H, Plinth and Area)		Correct	Incorrect	Need correction	Remarks
38	Measurement of the shop-counter/office (Area in sq. ft).		Correct	Incorrect	Need correction	Remarks
39	Whether godowns and shop-counter/office is adjacent/connected?		Yes	No		Remarks
40	Whether the godown or shop is opening to any other room/ premises, passage etc.		Yes	No		Remarks

**Godown without separate Office Space: (Verify)**

41	Full address of the Shop-cum-Godown with Dag No., Khatian No., Mouza, Village, Gram Panchayat, Block, Police Station and PIN Code (in case of rural area) or Holding No., Street Name, Ward No. Municipality, Police Station and PIN Code (in case of Municipal Area)		Correct	Incorrect	Need correction	Remarks
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42	Measurement of the Shop-cum-Godown (L,B,H, Plinth & Area)		Correct	Incorrect	Need correction	Remarks
43	Boundary of the godown		Correct	Incorrect	Need correction	Remarks
44	Whether the Shop-cum-godown has a verandah with shade to accommodate at least 5 (five) people, who may wait in the queue.		Yes	No		Remarks
45	Status of construction of roof		Correct	Incorrect	Need correction	Remarks
46	Status of construction of floor		Correct	Incorrect	Need correction	Remarks
47	Status of construction of wall		Correct	Incorrect	Need correction	Remarks
48	Structure of Door		Correct	Incorrect	Need correction	Remarks
49	Whether delivery truck can reach the godown for loading/unloading		Yes	No		Remarks
50	If not, whether the godown is accessible by small carts for loading/unloading		Yes	No		Remarks
51	Character of land of the premises "Dokan/ Godown/ commercial/ homestead/ non-agricultural land/ convertible to Dokan or Godown/ Others'.		Correct	Incorrect	Need correction	Remarks
52	Whether the premise is free from encumbrances		Yes	No		Remarks
53	Whether lay out plan has been tallied		Yes	No		Remarks
54	Comments on suitability of the premises					

**Part-V (Possession of the Storage Godown)**

55	Nature of possession		Correct	Incorrect	Need correction	Remarks
56	<b>In case of Sole ownership</b>					
57	a. Mode of acquisition: Gift/Purchase/ Inheritance/Others		Correct	Incorrect	Need correction	Remarks
58	b. No. and date of execution of Registered deed of conveyance/purchase/gift in the name of applicant/Mutation Certificate		Correct	Incorrect	Need correction	Remarks
59	c. Details of ROR/Property Tax/Mutation certificate		Correct	Incorrect	Need correction	Remarks
60	<b>In case of family property</b>					
	a. Name of the owner(s)		Correct	Incorrect	Need correction	Remarks
	b. Relation(s) with the applicant		Correct	Incorrect	Need correction	Remarks
	c. No. ROR/Registered deed/property tax receipt/Mutation Certificate/others		Correct	Incorrect	Need correction	Remarks
	d. Whether the owner has/all owners have given NOC?		Yes	No	Need correction	Remarks
61	<b>Leased/Rental Possession</b>					
	a. Name(s) of owner(s) of the premises		Correct	Incorrect	Need correction	Remarks
	b. No. and date of execution of Registered or Notarized Lease Deed/Tenancy or Rental Agreement for at least 4 years/leave & licence Agreement		Correct	Incorrect	Need correction	Remarks
	c. Period of lease/tenancy under registered agreement deed		Correct	Incorrect	Need correction	Remarks



	d. Whether expressly rented/leased for FPS as per deed		Yes	No		Remarks
	e. Whether RoR of the owner, lease/tenancy agreement and current rent receipt have been verified with original and signatures tallied		Yes	No		Remarks
62	Whether details of the godown corroborate with the aforesaid documents		Yes	No		Remarks
63	Whether the premises is under physical possession of the applicant		Yes	No		Remarks
64	Comment	Remarks				

**Part-VI (Other details)**

65	Whether the applicant has any other means of subsistence (SKO Dealership, if has got any, is not to be taken into account)		Yes	No		Remarks
66	Prior experience of business, if any : If yes, verify details with nature and area of business:		Correct	Incorrect	Need correction	
67	Whether the applicant is a Flour Mill or a Rice Mill and its Owner in any capacity		Yes	No		Remarks
68	Whether the applicant is a Dealer, whose License has been cancelled / terminated for contravention of the provisions of the Act or the Control Order		Yes	No		Remarks
69	Whether the applicant is a Dealer, who earlier has resigned or voluntarily surrendered his license:		Yes	No		Remarks
70	Whether a person holding a post in the establishment of any State Government or Central Government or any authority or body or institution of Local self-government established or constituted by or under the Constitution or by any other law made by the Parliament or a State Legislature or by notification issued or order made by the Central Government or a State Government		Yes	No		Remarks
71	Whether the applicant has ever been convicted under E.C. Act, 1955 or has/have litigation against the Department/Govt. (If so, details thereof, else whether affidavit declaration in Annexure-I has been submitted)		Yes	No		Remarks
72	Whether the applicant has any other FPS Dealership / Distributorship in his / her/ their own name / name of any relative as per clause 2(1) (x) of the WBTPDS (M&C) Order, 2024.(If so, give details)		Yes	No		Remarks

73	Whether the applicant is a member of local bodies, local authority, Panchayati Raj Institutions, board or corporation, or Member of Legislative Assembly or a Member of Parliament during his tenure as such capacity		Yes	No		Remarks
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**Part- VII( Final comments)**

74	Local reputation of the applicant	Remarks
75	Any document not submitted by the applicant	Remarks
76	Overall comments with positive/negative recommendation	Remarks

Declaration: Certified that enquiry has been conducted by the undersigned. All the documents have been verified with original by me. Physical inspection is also done by me. All columns have been filled.

Date:

Signature of Enquiry Officer with seal

Name:

Designation:

**Verification of documents submitted with Application Form for engagement on compassionate ground in respect of individual person**

Sl. No.	Name of document	Uploaded doc	Comment of EO on verification(To press appropriate response & to enter remarks)			
1	Application fees deposit challan	View	System generated			
2	Identity proof of the Individual [EPIC/ Passport]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
3	Proof of residential address of the Individual [ EPIC/ Passport/recent Electricity Bill/Driving License]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
4	PAN Card of Individual	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
5	Proof of educational qualification of individual [Certificate or Marksheet]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
6	Medical certificate of incapacitation from Govt. Hospital(scanned from original)		Correct	Proper document to be uploaded	Proper document not available	
7	Medical certificate of fitness of Individual from a Govt. Hospital (scanned from original)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
8	Family income certificate issued by the local authority	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
9	Death certificate of the deceased dealer	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
10	Legal heirs certificate of the deceased/incapacitated Dealer issued by competent Authority and affidavit from the 1 <sup>st</sup> Class Magistrate	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

11	NOC in the prescribed format from the other eligible family members in the form of affidavit from magistrate(not required in case the applicant is the spouse of the deceased dealer)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
12	A layout map showing clear boundary with dimensions showing offered godown, office, shed for persons in queue, space for unloading of stock of PDS commodities and approach road.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
13	In case of ownership (including NOC from family members)/shared ownership:					
	a) Record of Rights (Porcha)/ Registered Deed of Conveyance/purchase/gift in the name of applicant/ Mutation Certificate,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	b) Document showing character of land as "Dokan or Godown/ Bastu or Vita (Homestead Category)/convertible to Dokan or Godown under land Law/ Other than as mentioned". if Record of Rights is not produced	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	c) NOC of other co-owners (in case of shared ownership/family members of the offered shop- cum-godown) in the form of affidavit sworn before a Magistrate.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
14	For leased/rented property:					
	a) Registered/Notarized Lease Deed or Tenancy or Rental Agreement for at least 4 years or leave & licence Agreement,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	b) Copies of rent receipts for current month from the date of agreement till date of application,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	c) Registered Deed/RoR in the name of the land owner (or lessor),	View	Correct	Proper document to be	Proper document not	Remarks
	d) Any other proof of ownership, if ROR/Deed is not submitted.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
15	Proof of financial solvency [Account statement/Deposit Certificate (FD/TD/ RD/Flexi)]/updated passbook issued by a recognized bank/or Post Office as reflected on the date of application.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
16	In case the aforesaid account/deposit is held jointly, NOC of such joint holder for investment in FPS Dealership	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
17	Affidavit in Annexure-I format	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

18	Income Tax Return for last 3 FYs, if applicable	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
19	Copy of last renewed license	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
20	NOC from the other eligible non-participating family members (partnership to individual)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

Date:

Signature of Enquiry Officer with seal

Name:

Designation:

**FORM L2**  
**Enquiry Report**  
**into Application for FPS Dealership as Partnership Firm under Compassionate Ground**  
 [Vide clause 39 of the WBTPDS (Maintenance & Control) Order, 2024]

**(Individual to Partnership due to death or incapacitation of dealer)**

Name and Designation of the Enquiry  
Officer :

Date of Enquiry:

Sl. No.	Particulars	Details provided by the applicant	Findings of Enquiry Officer			Remarks
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**Part-I (Details of previous dealership)**

1	Code and Place of existing FPS dealership:		System	No comment		
2	Existing/Old license No.		System			
3	Licence renewed till which year:		System			
4	Name of deceased/incapacitated dealer:		System			
5	Date of demise/date of certificate regarding incapacitation:		System			
6	In case of incapacitation, reason and details:		Correct	Incorrect	Need correction	Remarks
7	Whether any proceedings initiated by the licensing authority is kept pending against the deceased/incapacitated dealer		Yes	No		If yes, then details

**Part-II (Details of the applicant)**

**(Sl. No. 8 to 22 are to be repeated for all partners.)**

8	Name of the candidate		System	No comment		
9	Relation with the deceased dealer(proprietor)		Correct	Incorrect	Need correction	Remarks
10	Name of guardian and relation		Correct	Incorrect	Need correction	Remarks
11	Date of Birth		Correct	Incorrect	Need correction	Remarks
12	Gender		Correct	Incorrect	Need correction	Remarks
13	Caste		Correct	Incorrect	Need correction	Remarks
14	Citizenship		Correct	Incorrect	Need correction	Remarks
15	Aadhaar No.					Remarks
16	Residential address of the applicant		Correct	Incorrect	Need correction	Remarks
17	Mobile No.		System verified			Remarks
18	eMail ID.					Remarks
19	Educational Qualification		Correct	Incorrect	Need correction	Remarks
20	Whether identity of the applicant is verified with the uploaded document		Yes	No		Remarks
21	Whether the applicant is physically and mentally fit as per the Govt. Hospital certificate		Yes	No		Remarks

**Part-III (Financial details)**

22	Whether the applicant has submitted Bank Details and you have verified		Correct	Incorrect	Need correction	Remarks
23	Whether the applicant is financially solvent as per Govt. order in force		Yes	No		Remarks
24	Monthly family income of the applicant as per certificate from competent authority		Correct	Incorrect	Need correction	Remarks

25	Name of the Firm		Correct	Incorrect	Need correction	Remarks
26	PAN of the Firm		Correct	Incorrect	Need correction	Remarks
27	Firm Registration No.		Correct	Incorrect	Need correction	Remarks
28	Firm Registration Date		Correct	Incorrect	Need correction	Remarks
29	Email ID of the Firm		No comment			

**Part-IV (Storage godown and Office/ Shop-Counter Details)**

30	Full address of the shop-cum-godown under previous Dealership		System	No comment		
31	Whether the same shop-cum-godown would be in use now		Yes	No	Need correction	Remarks
32	If no, then reason for change		Correct	Incorrect	Need correction	Remarks
33	In case a new shop-cum-godown is being proposed, distance of it from previous FPS (Please comment on convenience of the beneficiaries against the shifting of FPS in Remarks section)		Correct	Incorrect	Need correction	Remarks

**In case Godown with separate Office Space: (verify)**

34	Full address of the Shop-cum-Godown with Dag No., Khatian No., Mouza, Village, Gram Panchayat, Block, Police Station and PIN Code (in case of rural area) or Holding No., Street Name, Ward No. Municipality, Police Station and PIN Code (in case of Municipal Area)		Correct	Incorrect	Need correction	Remarks
35	In case of multiple compartments number of compartments/godowns		Correct	Incorrect	Need correction	Remarks
36	Measurement of the godown/compartments(L,B,H, Plinth and Area)		Correct	Incorrect	Need correction	Remarks
37	Measurement of the shop-counter/office (Area in sq. ft).		Correct	Incorrect	Need correction	Remarks
38	Whether godowns and shop-counter/office is adjacent/connected?		Yes	No		Remarks
39	Whether the godown or shop is opening to any other room/ premises, passage etc.		Yes	No		Remarks

**Godown without separate Office Space: (Verify)**

40	Full address of the Shop-cum-Godown with Dag No., Khatian No., Mouza, Village, Gram Panchayat, Block, Police Station and PIN Code (in case of rural area) or Holding No., Street Name, Ward No. Municipality, Police Station and PIN Code (in case of Municipal Area)		Correct	Incorrect	Need correction	Remarks
41	Measurement of the Shop-cum-Godown (L,B,H, Plinth & Area)		Correct	Incorrect	Need correction	Remarks
42	Boundary of the godown		Correct	Incorrect	Need correction	Remarks
43	Whether the Shop-cum-godown has a verandah with shade to accommodate at least 5 (five) people, who may wait in the queue.		Yes	No		Remarks

44	Status of construction of roof		Correct	Incorrect	Need correction	Remarks
45	Status of construction of floor		Correct	Incorrect	Need correction	Remarks
46	Status of construction of wall		Correct	Incorrect	Need correction	Remarks
47	Structure of Door		Correct	Incorrect	Need correction	Remarks
48	Whether delivery truck can reach the godown for loading/unloading		Yes	No		Remarks
49	If not, whether the godown is accessible by small carts for loading/unloading		Yes	No		Remarks
50	Character of land of the premises "Dokan/ Godown/ commercial/ homestead/ non-agricultural land/ convertible to Dokan or Godown/ Others'.		Correct	Incorrect	Need correction	Remarks
51	Whether the premise is free from encumbrances		Yes	No		Remarks
52	Whether lay out plan has been tallied		Yes	No		Remarks
53	Comments on suitability of the premises					

**Part-V (Possession of the Storage Godown)**

54	Nature of possession		Correct	Incorrect	Need correction	Remarks
55	<b>In case of Sole ownership</b>					
	a. Mode of acquisition: Gift/Purchase/ Inheritance/Others		Correct	Incorrect	Need correction	Remarks
	b. No. and date of execution of Registered deed of conveyance/purchase/gift in the name of applicant/Mutation Certificate		Correct	Incorrect	Need correction	Remarks
	c. Details of ROR/Property Tax/Mutation certificate		Correct	Incorrect	Need correction	Remarks
56	<b>In case of family property</b>					
	a. Name of the owner(s)		Correct	Incorrect	Need correction	Remarks
	b. Relation(s) with the applicant		Correct	Incorrect	Need correction	Remarks
	c. No. ROR/Registered deed/property tax receipt/Mutation Certificate/others		Correct	Incorrect	Need correction	Remarks
	d. Whether the owner has/all owners have given NOC?		Yes	No	Need correction	Remarks
57	<b>Leased/Rental Possession</b>					
	a. Name(s) of owner(s) of the premises		Correct	Incorrect	Need correction	Remarks
	b. No. and date of execution of Registered or Notarized Lease Deed/Tenancy or Rental Agreement for at least 4 years/leave & licence Agreement		Correct	Incorrect	Need correction	Remarks
	c. Period of lease/tenancy under registered agreement deed		Correct	Incorrect	Need correction	Remarks
	d. Whether expressly rented/leased for FPS as per deed		Yes	No		Remarks

	e. Whether RoR of the owner, lease/tenancy agreement and current rent receipt have been verified with original and signatures tallied		Yes	No		Remarks
58	Whether details of the godown corroborate with the aforesaid documents		Yes	No		Remarks
59	Whether the premises is under physical possession of the applicant		Yes	No		Remarks
60	Comment	Remarks				

**Part-VI (Other details)**

(Sl. No. 61 to 69 are to be repeted for all partners.)

61	Whether the applicant has any other means of subsistence (SKO Dealership, if has got any, is not to be taken into account)		Yes	No		Remarks
62	Prior experience of business, if any : If yes, verify details with nature and area of business:		Correct	Incorrect	Need correction	
63	Whether the applicant is a Flour Mill or a Rice Mill and its Owner in any capacity		Yes	No		Remarks
64	Whether the applicant is a Dealer, whose License has been cancelled / terminated for contravention of the provisions of the Act or the Control Order		Yes	No		Remarks
65	Whether the applicant is a Dealer, who earlier has resigned or voluntarily surrendered his license:		Yes	No		Remarks
66	Whether a person holding a post in the establishment of any State Government or Central Government or any authority or body or institution of Local self-government established or constituted by or under the Constitution or by any other law made by the Parliament or a State Legislature or by notification issued or order made by the Central Government or a State Government		Yes	No		Remarks
67	Whether the applicant has ever been convicted under E.C. Act, 1955 or has/have litigation against the Department/Govt. (If so, details thereof, else whether affidavit declaration in Annexure-I has been submitted)		Yes	No		Remarks
68	Whether the applicant has any other FPS Dealership / Distributorship in his / her/ their own name / name of any relative as per clause 2(1) (x) of the WBTPDS (M&C) Order, 2024.(If so, give details)		Yes	No		Remarks



69	Whether the applicant is a member of local bodies, local authority, Panchayati Raj Institutions, board or corporation, or Member of Legislative Assembly or a Member of Parliament during his tenure as such capacity		Yes	No		Remarks
70	Local reputation of the applicant	Remarks				
71	Any document not submitted by the applicant	Remarks				
72	Overall comments with positive/negative recommendation	Remarks				

Declaration: Certified that enquiry has been conducted by the undersigned. All the documents have been verified with original by me. Physical inspection is also done by me. All columns have been filled.

Date:

Signature of Enquiry Officer with seal

Name:

Designation:

### Verification of documents submitted with Application Form for engagement on compassionate ground in respect of individual person

Sl. No.	Name of document	Uploaded doc	Comment of EO on verification(To press appropriate response & to enter remarks)			
1	Application fees deposit challan	View	System generated			
(For all partners)						
2	Identity proof of the Individual [EPIC/ Passport]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
3	Proof of residential address of the Individual [ EPIC/ Passport/recent Electricity Bill/Driving License]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
4	Proof of educational qualification of individual [Certificate or Marksheet]	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
5	Medical certificate of fitness of Individual partner from a Govt. Hospital (scanned from original)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
6	Caste Certificate(SC/ST/OBC)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
7	Affidavit in Annexure-I format	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
8	Adoption deed in case of adopted son/daughter	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
Common Documents						
9	Death certificate of the deceased dealer	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

10	Legal heirs certificate of the deceased/incapacitated Dealer issued by competent Authority and affidavit from the 1 <sup>st</sup> Class Magistrate	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
11	NOC in the prescribed format from the other eligible family members in the form of affidavit from magistrate(not	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
12	Medical certificate of incapacitation from Govt. Hospital(scanned from original)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
13	Nomination of the existing dealer due to incapacitation	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
14	Family income certificate issued by the local authority	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
15	PAN Card of Partnership Firm	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
16	Partnership Registration Certificate	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
17	Partnership Deed(Notarized/Registered)	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
18	A layout map showing clear boundary with dimensions showing offered godown, office, shed for persons in queue, space for unloading of stock of PDS commodities and approach road.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
19	In case of ownership (including NOC from family members)/shared ownership:					
	a) Record of Rights (Porcha)/ Registered Deed of Conveyance/purchase/gift in the name of applicant/ Mutation Certificate,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	b) Document showing character of land as "Dokan or Godown/ Bastu or Vita (Homestead Category)/convertible to Dokan or Godown under land Law/ Other than as mentioned". If Record of Rights is not produced	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	c) NOC of other co-owners (in case of shared ownership/family members of the offered shop- cum-godown) in the form of affidavit sworn before a Magistrate.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
20	For leased/rented property:					
	a) Registered/Notarized Lease Deed or Tenancy or Rental Agreement for at least 4 years or leave & licence Agreement,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

	b) Copies of rent receipts for current month from the date of agreement till date of application,	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	c) Registered Deed/RoR in the name of the land owner (or lessor),	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
	d) Any other proof of ownership, if ROR/Deed is not submitted.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
21	Proof of financial solvency [Account statement/Deposit Certificate (FD/TD/RD/Flexi)]/updated passbook issued by a recognized bank/or Post Office as reflected on the date of application.	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
22	Affidavit regarding authorised signatory	View	Correct	Proper document to be uploaded	Proper document not available	Remarks
23	Income Tax Return for last 3 FYs, if applicable	View	Correct	Proper document to be uploaded	Proper document not available	Remarks

Date:

Signature of Enquiry Officer with seal

Name:

Designation: