

**DELHI TOURISM & TRANSPORTATION DEVELOPMENT CORPN.
18-A, DDA SCO COMPLEX DEFENCE COLONY NEW DELHI-24.**

FAMILY DECLARATION FORM

1. Name of the Employee
2. Employee code No.
3. Designation
4. Place of posting
5. Residential address
6. Name of spouse
7. If spouse is working furnish following details; -
 - a) Name of office & Address; -
 - b) Post held
 - c) From where the spouse will avail Medical /LTC facility
 - d) If availing from DTDC provide NOC from the office of the spouse
8. Name & Date of Birth of Dependent Children
 - a)
 - b)
 - c)
- 9) Name & age of dependent parents
 - a)
 - b)
- 10) Residential address of parents;-
- 11) Income of parents from all sources:-
- 12) Name of the office and post held by dependent parents before retirement

13) Name & age of dependent sisters /brothers

a)

b)

c)

14) Name & age independent sisters /brothers

a)

b)

c)

15) Name of office / post held /business of independent sisters /brothers

a)

b)

c)

16. If dependent parents availing the medical /LTC facilities from DTTDC provide the NCC from the working place of independent sisters /brothers regarding non-availing such facilities by parents from their office.

NOTE

1. The documentary proof of residence and income of dependent parents should be provided along with declaration form.
2. Passport size photographs of a) spouse b) children c) Dependent parents d) dependent sisters and brothers should be enclosed.

Declaration

I hereby declare that the above that the above information is correct to the best of my knowledge and belief and nothing has been concealed or suppressed. In case any information given above is found false, incorrect or concealed by me, I shall be held liable to face disciplinary action under rules.

Signature

Name & Designation

DELHI TOURISM & TRANSPORTATION DEVELOPMENT CORPORATION LTD.
18-A, SCO COMPLEX, DEFENCE COLONY, NEW DELHI - 110 024.

LEAVE TRAVELLING CONCESSION BILL FOR THE BLOCK YEAR

NAME..... DESIGNATION..... EMP CODE NO..... PAY SCALE.....

PARTICULARS OF JOURNEY

STATION	DATE OF JOURNEY	STATION	DATE OF RETURN	NO. OF TICKETS	CLASS	AMOUNT	PERIOD OF LEAVE	NAME OF THE MEMBERS
				2				

SIGNATURE