## THE BRIHANMUMBAI ELECTRIC SUPPLY & TRANSPORT UNDERTAKING

(of the Brihanmumbai Mahanagarpalika)

## **ELECTRIC SUPPLY OFFICE**

To, The Deputy General Manager (Electric Supply) BES&T Undertaking.

Sub: (i) Allotment of Officers Quarters under Electric Supply Branch Reserved Quota.

- (ii) Transfer of Officer's Quarters from General Quota to Electric Supply Branch Reserve Quota.
- (ii) Transfer of Officer's Quarters from City Limit to City Limit of Electric Supply Branch Reserve Quota.

I would like to enroll my name for Allotment of Officers Quarters / Transfer of quarters under Electric Supply Branch Reserved Quota. My particulars are as under :-

1)	Full Name	:	
2)	Designation & Grade	:	
3)	Department/Division	:	
4)	Check No. & P.S.No.	:	
5)	Date of joining	:	
6)	Date of promotion/ confirmation in previous grade	:	
7)	Date of promotion in present grade	:	
8)	Date of confirmation in present Grade	:	
9)	Due date of superannuation	:	
10)	Residential Address	:	
11)	Details of accommodation in his/her	:	

	own name or in the name of his/her		
	spouse		
	a) Location		
	b) Carpet area in Sq.Ft.		
	c) Whether own/rented etc.		
	(please specify)		
	d) On whose name		
12)	Date of application registered with	:	
	Civil Engineering Department.		
	Payment Receipt No. and date.		
	•		
13)	Location of Officers Quarters	:	
	preferred		
14)	Other instructions, if any	:	
	, ,		
			<u> </u>

I declare that the above particulars are true to the best of my knowledge.

In case I am allotted a flat in the Undertaking's Officers' Quarters, I am prepared to attend emergency duties on Sundays, Holidays & beyond regular working hours as and when required, irrespective of my grade and/or department where I am working. I may also be transferred to Departments where emergency duties are required to be performed.

**Encl:** As above.

Date:		Signature of Officer				
Certified that the particu	lars furnished above have	e been duly verified wherever possible.				
Nature of work	:					
Duty hours	:					
Whether on shift duty	:					
Applicable group	:					
Reason for recommendation	:					

(Head of Department)
Designation with stamp

Ssg/d/oagen/allotqrts/quarters-form