

## 204. Application Letter For Subsidy

सेवा में

पशुचिकित्सक महोदय,  
राजकीय पशुचिकित्सालय,  
.....

विषय:- मिनी डेयरी से संबंधित सब्सिडी लेने के लिए कागजात जमा करवाने बारे।

श्रीमान् जी,

निवेदन है कि मैं मिनी डेयरी से संबंधित निम्नलिखित सभी कागजात (तीन फाईलें) आपके कार्यालय में जमा करवा रहा हूँ। कृपया मुझे पशुपालन एवं डेयरी विभाग की ओर से दी जा रही सब्सिडी दिलवाने का कष्ट करें।

| Sr. No. | Particulars   | File No. 1 For SDO Office | File No. 2 For DD Office | File No. 3 For Vety Hospital |
|---------|---|---------------------------|--------------------------|------------------------------|
| 1.      | Application Letter for Release of Subsidy (Form No. 204 page 1) |                           |                          | 1                            |
| 2.      | Forwarding Letter to SDO AH&D (Form No. 204 page 2)             | 1                         | 1                        | 1                            |
| 3.      | Beneficiary Biodata Proforma (Form No. 204 page 3)              | 1                         | 1                        | 1                            |
| 4.      | Sanction Letter (verified by Bank)                              | 1                         | 1                        | 1                            |
| 5.      | Purchase Letter (photocopy)                                     | 1                         | 1                        | 1                            |
| 6.      | Health Certificates (original copy)                             | 1                         | 2                        | 1                            |
| 7.      | Insurance Policy (photocopy)                                    | 1                         | 1                        | 1                            |
| 8.      | Adhar Card (photocopy)  | 1                         | 1                        | 1                            |
| 9.      | PAN Card (photocopy)  | 1                         | 1                        | 1                            |
| 10.     | Ration Card (photocopy)   | 1                         | 1                        | 1                            |
| 11.     | Bank account (photocopy)  | 1                         | 1                        | 1                            |
| 12.     | Purchased Animal's photo  | -                         | -                        | 2                            |

निवेदक  
(हस्ताक्षर)

## 204. Application Letter For Subsidy

Des No.....

Dated.....

From

Veterinary Surgeon

GVH.....

To

SDO AH&amp;D

.....

Subject:

**Request for release of subsidy.**

Ref. No. (Purchase Order Letter No.....Dated.....)

R/ Sir,

In reference to the above subject, the following mini dairy units have been established.

| Sr. No. | Name | Father's Name | Village | Scheme (3MA/5MA) | Category GEN/SC | Animals Purchased | Amount of Subsidy |
|---------|------|---------------|---------|------------------|-----------------|-------------------|-------------------|
|         |      |               |         |                  |                 |                   |                   |
|         |      |               |         |                  |                 |                   |                   |
|         |      |               |         |                  |                 |                   |                   |
|         |      |               |         |                  |                 |                   |                   |
|         |      |               |         |                  |                 |                   |                   |

The following documents (2 Files) are being submitted for n/a & information please.

| Sr. No. | Particulars   | File No. 1 For SDO Office | File No. 2 For DD Office |
|---------|---|---------------------------|--------------------------|
| 1.      | Forwarding Letter to SDO AH&D (Form No. 204 page 2) | 1                         | 1                        |
| 2.      | Beneficiary Biodata Proforma (Form No. 204 page 3)  | 1                         | 1                        |
| 3.      | Sanction Letter (verified by Bank)                  | 1                         | 1                        |
| 4.      | Purchase Letter (photocopy)                         | 1                         | 1                        |
| 5.      | Health Certificates (original copy)                 | 1                         | 2                        |
| 6.      | Insurance Policy (photocopy)                        | 1                         | 1                        |
| 7.      | Adhar Card (photocopy)                              | 1                         | 1                        |
| 8.      | PAN Card (photocopy)                                | 1                         | 1                        |
| 9.      | Ration Card (photocopy)                             | 1                         | 1                        |
| 10.     | Bank account (photocopy)                            | 1                         | 1                        |

Veterinary Surgeon

GVH.....

No.....

Dated.....

मूलरूप में फाईल नं0 2, उपनिदेशक पशुपालन एवं डेयरी विभाग .....की सेवा में सब्सिडी हेतु भेजी जाती है।

उपमंडल अधिकारी  
पशुपालन एवं डेयरी विभाग

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**204. Application Letter For Subsidy  
Proforma For Biodata of Beneficiaries of Mini Dairy, NLM, IMDP Schemes**

From

The Bank Manager  
.....

To

Deputy Director  
Animal Husbandry & Dairying Deptt.  
.....

| Sr. No. | Particulars                                | (Please Fill in Capitals) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|         |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|         | Mobile No.                                 |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|         | Email ID                                   |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.      | Name of Owner                              |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.      | Father's Name                              |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.      | Mother's Name                              |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.      | Date of Birth                              |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5.      | a) Village                                 |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|         | b) Tehsil                                  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|         | c) Distt.                                  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.      | Caste                                      |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.      | Pan No.                                    |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8.      | Bank A/c No.                               |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.      | IFSC Code                                  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10.     | Aadhar Card No.                            |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11.     | Date of Purchase                           |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12.     | a) Type of Unit                            |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|         | b) Insu. Policy No.                        |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13.     | Animals Pur. (No.)                         |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14.     | Purchase 1 <sup>st</sup> / 2 <sup>nd</sup> |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15.     | Unique Code                                |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

.....

**Beneficiary  
(Sign)**

.....

**Bank  
(Sign)**

.....

**Vety Surgeon  
(Sign)**

.....

**SDO (AH&D)  
(Sign)**