

Diary No...3441

Date...3-6-18

4436

27.8.18

**DELHI DEVELOPMENT AUTHORITY  
COORDINATION (HOUSING)  
VIKAS SADAN INA NEW DELHI**

F. No. F1(364)/2018/Coordn./H/DDA/1309

Dated: 26.09.18

**CIRCULAR**

In pursuance of circular No. F4(39)2018/P&C(P)/330 dated 07.09.2018 issued by Pr. Commissioner (Personnel) regarding simplification of forms to be used in DDA in r/o conversion cases from lease hold to free hold, it has been decided to use the newly simplified forms in Housing Department.

Accordingly, all the Dy. Directors (H) are directed to use the simplified forms in r/o allottee cases/ attorney cases with immediate effect and application forms for "DDA AAWASIYA YOJANA" (copy enclosed) for all future Housing Schemes of DDA.

This issue with the approval of competent authority

**Encl: As above.**

Dy. Director (H) Coordn.

**Copy forwarded to: -**

1. PS to VC, DDA for later information to VC.
2. PS to PC (Personnel), DDA for later information to PC-(P).
3. PS to PC (Housing) DDA for later information to PC-(H).
4. PS to Commissioner (H), DDA for later information to Commr. (H).
5. Director (H) Coordn.
6. Director (H)-II, DDA.
7. Director (H)-III, DDA.
8. Director (Vig.), DDA.
9. S.L.O. (Housing), DDA.
10. FA-(Housing), DDA.
11. All Dy. Director (Housing)
12. Dy. Director (System)-H, DDA with request to upload the circular on DDA website.

Dy. Director (H) Coordn.

Pl mail softcopy at  
ddalender@dda.org.in

Joshi  
DD(S)

**APPLICATION FORM FOR DDA AAWASIYA YOJANA**

Upload here Applicant's / Joint Applicant's Photograph

UPLOAD

**Details of Applicant**

Name of the Applicant \_\_\_\_\_

Name of  Mother or  Father or  Spouse \_\_\_\_\_

Gender  Male  Female  Transgender

Date of Birth DD - MM - YYYY

Category —Select—

Nationality —Select—

Aadhaar No. \_\_\_\_\_

PAN No. \_\_\_\_\_

**Details of Address**

House No./Street/Road \_\_\_\_\_

City —Select—

Pin Code \_\_\_\_\_

E-mail ID \_\_\_\_\_

State —Select—

District —Select—

Mobile/ Phone \_\_\_\_\_

**Details of Joint/ Second Applicant (If Applicable)**

Name of Joint/ Second Applicant \_\_\_\_\_

Relation (In case of reserved category) (As per Clause 2 (XI) or 2 (XII) of Eligibility) \_\_\_\_\_

Name of the Spouse (If both husband & wife apply separately) \_\_\_\_\_

Application No. of Spouse (If applied separately) \_\_\_\_\_

**Preference of Locations (with code)**

1.   2.   3.   4.   5.   6.   7.

**Details of Bank**

Name of the Bank \_\_\_\_\_ Name of the Branch \_\_\_\_\_

Account No. \_\_\_\_\_

IFS Code \_\_\_\_\_

**Payment of Application**

Select Bank: —Select—

Mode of Payment:  DEBIT CARD  CREDIT CARD  INTERNET BANKING

**PAY NOW**

**Declaration**

I/we hereby declare that I/we have carefully read and understood the terms and conditions as in the brochure for alongwith the instructions and hereby agree to abide them. I/we fulfil the eligibility criteria given in the brochure to apply under the scheme. I/we know if it is found that if I/we am/are not eligible as per conditions laid down in clause 2 of the brochure or have falsely claimed the benefit of reservation or has given false affidavit/ information including quoting wrong PAN number or suppressed any information, the application/ allotments will therefore be rejected/ cancelled summarily without issuing any show cause notice for the same. In case, of such cancellation/ rejection all payments deposited against the application(s)/ allotment(s) shall be forfeited.

Date: DD - MM - YYYY Place: \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Signature of Joint Applicant \_\_\_\_\_

UPLOAD

# Delhi Development Authority

Application No.

118

Form: C-2 (ATTORNEY CASES)  
**APPLICATION FORM FOR CONVERSION INTO FREEHOLD  
OF FLATS ALLOTTED BY  
DELHI DEVELOPMENT AUTHORITY**

Upload here  
coloured  
Photograph of  
the Attorney/  
Applicant

UPLOAD

File No.

### Details of Allottee

Name of the first  Allottee or  Lessee

Name of  Mother or  Father or  Husband

Name of the Second/ Joint Allottee, if applicable

Name of  Mother or  Father or  Husband

Name of the Attorney

Name of the person in favour of whom conversion is sought

### Details of Address

#### Correspondence:

House No./Street/Road  State

City  District

Pin Code  Mobile/ Phone

E-mail ID

Whether the correspondence address is same as permanent address  YES  NO (If No, then provide the details below)

#### Permanent:

House No./Street/Road  State

City  District

Pin Code  Mobile/ Phone

E-mail ID

### Details of Flat allotted by DDA

Name of the Colony

Flat No.  Category  Floor

Sector  Block  Pocket

Whether property is Mortgaged? YES  NO

If yes, then No Objection Certificate to be uploaded

Whether there is any dispute pending in the court of law or otherwise regarding the title of the property/flat under reference YES  NO

**Documents Enclosed** (Please DOWNLOAD and fill the following document, then UPLOAD the same)  
(Manual copy should also be send to the authority in case of the time of allotment)

Affidavit	DOWNLOAD	UPLOAD
Indemnity Bond	DOWNLOAD	UPLOAD
Undertaking	DOWNLOAD	UPLOAD

Date:  DD - MM - YYYY

Mobile No.

Signature of Attorney

UPLOAD

**Form: C-1 (ALLOTTEE CASES)**  
**APPLICATION FORM FOR CONVERSION INTO FREEHOLD OF**  
**FLATS ALLOTTED BY**  
**DELHI DEVELOPMENT AUTHORITY**

Upload here  
coloured  
Photograph of  
the Allottee/  
Lessee/ Mutatee

UPLOAD

File No.

<b>Details of Allottee</b>	
Name of the first <input type="checkbox"/> Allottee or <input type="checkbox"/> Lessee or <input type="checkbox"/> Mutatee	<input type="text"/>
Name of <input type="checkbox"/> Mother or <input type="checkbox"/> Father or <input type="checkbox"/> Husband	<input type="text"/>
Name of the Second/ Joint <input type="checkbox"/> Allottee <input type="checkbox"/> Lessee <input type="checkbox"/> Mutatee (If Applicable)	<input type="text"/>
Name of <input type="checkbox"/> Mother or <input type="checkbox"/> Father or <input type="checkbox"/> Husband	<input type="text"/>

**Details of Address****Correspondence:**

House No./Street/Road	<input type="text"/>	State	<input type="text" value="Select"/>
City	<input type="text" value="Select"/>	District	<input type="text" value="Select"/>
Pin Code	<input type="text"/>	Mobile/ Phone	<input type="text"/>
E-mail ID	<input type="text"/>		

Whether the correspondence address is same as permanent address  YES  NO (If No, then provide the details below)

**Permanent:**

House No./Street/Road	<input type="text"/>	State	<input type="text" value="Select"/>
City	<input type="text" value="Select"/>	District	<input type="text" value="Select"/>
Pin Code	<input type="text"/>	Mobile/ Phone	<input type="text"/>
E-mail ID	<input type="text"/>		

**Details of Flat allotted by DDA**

Name of the Colony	<input type="text"/>		
Flat No.	<input type="text"/>	Category	<input type="text"/>
Sector	<input type="text"/>	Block	<input type="text"/>
		Floor	<input type="text"/>
		Pocket	<input type="text"/>

Whether property is Mortgaged?

If yes, then No Objection Certificate to be uploaded

YES  NO

UPLOAD

Whether there is any dispute pending in the court of law or otherwise regarding the title of the property flat under reference

YES  NO

**Documents Enclosed (Please DOWNLOAD and fill the following document, then UPLOAD the same)**  
 (Manual copy should also be send to the authority in case of the time of allotment)

Affidavit

DOWNLOAD

UPLOAD

Indemnity Bond

DOWNLOAD

UPLOAD

Undertaking

DOWNLOAD

UPLOAD

Date:

DD - MM - YYYY

Mobile No.

Signature of Allottee/ Lessee/ Mutatee

UPLOAD



# Delhi Development Authority

120

## Resident Welfare Association Maintenance Request Form

Registered Mobile No. of the Resident

GET.OTP

### Details of Resident

Name

### Details of Address

Area

—Select—

Road

Building

Flat No.

Room No.

Pin Code

Mobile/ Phone

E-mail ID

### Details of Maintenance

Type of Problem (Tick (v) whichever is applicable)

- Electrical
  Security
  Heating
  Plumbing
  Internet
  Pest Control
  External Grounds
  Gas (LPG)

Date occurred

DD-MM-YYYY

Problem caused by

Description (Optional)

Item to be fixed

If any other problem is to be fixed, then mention here

SUBMIT