

FORM W/S 01
(See sub-rule (1) of rule-3)



Application Form-1
GOVERNMENT OF SIKKIM
PUBLIC HEALTH ENGINEERING DEPARTMENT
REVENUE CELL, Toll Free Number.....
Water Supply Connection Application Form

To,
The divisional Engineer
Revenue Cell,
Public Health Engineering Department
Government of Sikkim, Gangtok

No.:

Dated:.....

Sir,

I/We Request for your kind permission to allow one water supply line from State Government main(s).
I/We shall abide by the standing rules/regulation and directives as may be applicable.

Yours faithfully,

(Signature/Seal of the Applicant)

(To be filled-in capital letters)

1. Name/ Designation of the applicant:.....
2. Aadhar No. :.....with Xerox copy
3. Voter's ID :.....with Xerox copy
4. Email-ID :.....
5. Mobile no. :.....
6. Father's/ Husband's name :.....
7. Correct mailing address :

Tel : Pin Code :

8. Detail address of Premises/ House name :.....
Location where connection is sought Flat No. :.....
House No :.....
Street /Road name :.....
Ward :.....
Bazar Name / RMC :
City : Pin Code :

9. Premises within (Tick Mark) : GMC RMC BAZAR
10. Ownership status (Tick mark) : Purcha holder Power of Attorney Mutation
 Allotment Court Order

11. Under BPL Category (Tick Mark): Yes No
12. Having Sewerage Connection (Tick Mark): Yes No (if Yes; User ID.....)
13. No. of Water Connection in the same premises (if any)
- a. Con. No.....Name.....Relation..... Bill clearance Yes/No
- b. Con. No.....Name.....Relation..... Bill clearance Yes/No
- c. Con. No.....Name.....Relation..... Bill clearance Yes/No
- d. Con. No.....Name.....Relation..... Bill clearance Yes/No
14. Water Connection other than PHED W/S Distribution line: Yes No (if Yes; from.....)
15. Water is required for (Tick Mark)
- Domestic Commercial Contractor's labour Estab. Bulk Supply Public hydrant
16. Category Type (Tick mark)
- State Government central Government Private & Other
17. Type of premises (Tick Mark)
- Residence Shop Hotel Office Quarter Institution Commercial Complex
18. Details of premises (Tick mark)
- R.C.C. Non R.C.C. No. of Storey.....
19. Period of connection (Tick Mark)
- Permanent Temporary (if temporary, duration in months.....)
20. per day requirement:..... Kilo Litre (for both Permanent & Temporary)
- a. No. of taps in the Premises:.....Nos.
- b. No. of Rooms in the premises:.....Nos.
- c. No. of Toilets/Water Closets in the Premises:.....Nos.
- d. No. of Users in the premises:.....Nos.

1. I/We hereby certify that the above information and date provided are true to the best of my / our knowledge and any subsequent changes that taken place or contemplated so shall be notified to the Department immediately.
2. I/WE hereby fully agree that apart from other reasons prescribed in the 'Sikkim Water Supply and Water Tax Act 1986' and the 'Sikkim Water Supply Rule 1990' water connection to my premises may be disconnected in the event, I violate any rules of regulation of the Local self Government, Urban Development and Housing Department, Municipal Corporation or that of Public Health Engineering Department and/ or fail to pay Water Tax/ Charges or Sewerage Tax/ Charges, Fees, Fines (as may required under the prescribed Act rules).
3. I/We hereby declare that I/ We/ am/ are the owner (s) of the premises mentioned in the application and entire liability of payment of water charges, tax, dues and fines shall rest on me/us, OR on the person whomsoever/the ownership/liability of above premises is legally transferred.
4. I/We have no objection if the PHED install water meter along the distribution main leading to the reservoir of My/Our premises.
5. I/We hereby undertake that the Meter installed by the department shall be under my custody and I shall be responsible for its damage and loss. However, I shall inform the Department about any visible defect and loss of the meter installed.
6. I/We shall report to Customer Care Cell for receives the Intimation/ Connection Approval / rejection letter the 10th day of receipt of this application

Attested Mandatory Enclosures (Tick Mark):

- A. Attested copy of B.P. Plan of the house approved by the concern authority
 - B. Ownership Certificate/ Land property document (attested by LRDD) Parcha
 - C. Cost of Form Rs. 25/- (State bank of Sikkim under head : 0215-01-103 Urban Water Supply)
BR. No..... Date.....Rs. 25/-
 - D. Passport Photo and copy of Photo ID proof.
6. Addhar Card Xerox
7. Voter ID card Xerox

Signature / Seal of the Applicant

For Office use only

1. Submission of incomplete application forms shall not be accepted. Reason for rejection (if any, may be informed and recorded.....)
2. **If application accepted**, Receipt issued against application vide No.....
Dated.....and submitted for feasibility approval to Assistant Engineer (Mtc.) on.....
.....and recorded in the Customer care register.

Desk-I(Customer Care)

A. Feasibility Columns Desk-I)

Premises has been inspected. This is certified that the above information given by the applicant in the Application Form is complete and correct. Therefore, site verification data sheet is enclosed and site plan is prepared. The proposal based on site verification Date sheet as per actual site condition.

- a Location of proposed connection point.....
- b Proposed pipeline size.....
- c Proposed distribution Chamber No.....(if applicable)
- d Proposed Connection ID No.....
- e Proposed Sub-Trunk ID No.....
- f Proposed main Trunk ID No.....
- g Proposed Lateral ID No.....
- h Proposed Zonal ID No.....
- l Proposed Main Tank ID No.....

Submitted for approval of the Divisional Engineer, please.

J.E. in charge

Assistant Engineer (Mtc.)

Approved/Not Approved

Divisional Engineer (Rev.)

(Intimation letter for approval/ rejection prepared and issued vide no.....Date.....File forwarded to Desk-1 Customer Care for Record keeping to wait for the response from applicant.

(Desk-2). Customer Care
Consumer paid the New Connection fees Rs.....vide B.R. No.....Dated.....and reported that pipe laying work completed. Submitted for Connection approval to Assistant Engineer (Mtc.) on.....

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