

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
DEPARTMENT OF FOOD, SUPPLIES & CONSUMER AFFAIRS  
'K'-BLOCK, VIKAS BHAWAN, NEW DELHI-110002  
Website: <http://fs.delhigovt.nic.in>

**Form -B**

*Application forms of Addition of Name/Deletion of Name/Modification/Surrender of Card/Duplicate Card/Card Transfer/FPS Change [Tick (√) whichever is applicable].*

Warning- Submission of wrong information is a legal offence and liable to penalty, punishment and cancellation of Ration Card.

- (1) NFS Card No.....  
 (2) Name of Head of Family (HoF).....  
 (3) Name of Father/Husband.....  
 (4) Current Annual Income of the family \_\_\_\_\_ Occupation \_\_\_\_\_  
 (5) If the Application is for change of Head of the family then.

If application for  
change of HoF  
then photo of new  
HoF

- (i) Name of New Head of Family.....  
 (Reason of change of HoF (Death of HoF/ Marriage/Becoming major of New HoF/ other)  
 (ii) Name of Father/Husband of new HoF  
 (iii) Mobile No.           E-mail:- \_\_\_\_\_  
 (iv) Name of all family members & their relationship with new HoF (write the name of new HoF at Sr. No.1)

| Sr. No. | Name | Relationship with HoF | Aadhaar/NPR No. |
|---------|------|-----------------------|-----------------|
| 1       |      | Self                  |                 |
|         |      |                       |                 |
|         |      |                       |                 |
|         |      |                       |                 |

In Sr. No. 6 to 11 give information related to required modification. Tick (√) whichever is applicable.

- (6) Reason of Duplicate Ration Card: Lost  Damage   
 (7) Reason of Deletion/Addition Birth  Death  Marriage  Surrender of  Ration Card.

| Sr. No. | Name | Relation with HoF | Aadhaar No./ EID/NPRN | Addition/Deletion | Remark. |
|---------|------|-------------------|-----------------------|-------------------|---------|
|         |      |                   |                       |                   |         |
|         |      |                   |                       |                   |         |

- (8) Reason of FPS Change.....  
 License No of present FPS  Name.....  
 License No. of proposed FPS  Name.....

(9) Card Transfer: Address where the Card is to be transferred.....

(10) Modification in Card:-

| Current Details (Name & Address) | Modification Required |
|----------------------------------|-----------------------|
|                                  |                       |
|                                  |                       |

- (11) Reason of Card Surrender:-  
 (i) Shifting out of Delhi  (ii) Not fulfilling the eligibility Criteria as per NFS Act

**Declaration: -**

I hereby declare that I fulfil all the eligibility conditions issued by the department under NFS Act 2013. I also declare that in case of any information is found false or incorrect then I will be responsible for punishment or penalty and cancellation of Ration Card under Essential Commodities Act 1955 and Indian Penal Code 1973.

Name of Applicant

Signature of Applicant

.....

Department of Food, Supplies and Consumer Affairs, Govt. of NCT of Delhi.

**Receipt**

Received from Sh./Smt. \_\_\_\_\_ on \_\_\_\_\_ the application form for Addition of Name/Deletion of Name/Modification/Surrender of Card/Duplicate Card/ Card Transfer/FPS Change.

Dated: \_\_\_\_\_

NFS ID No. \_\_\_\_\_

Food & Supply Circle  
Circle No. \_\_\_\_\_

Document to be attached with application:-

- (1) For Duplicate Ration Card:- FIR/Copy of NCR
- (2) For Change of HoF:- Copy of Aadhaar Card of HoF
- (3) For Addition of Member:-
  - (i) Surrender Certificate or Deletion Certificate (If member name is already available in other Ration Card)
  - (ii) Aadhaar Card/EID No/NPR No. of the person whose name is to be added.
- (4) For Deletion of Name:- If the reason is Death, the Death Certificate
- (5) Change of Address:- Proof of address for change of Address within the circle or outside the circle: Rent Agreement or Electricity Bill/Water Bill/Telephone Bill or copy of Aadhaar Card issued on New Address or other Govt. Certificate.
- (6) For Modification: - Copy of Related Document for required Modification.

For office use

Report of Inspection:-

Physical Verification: Yes  No  Not applicable

Recommended  Not Recommended

Reason for not recommending \_\_\_\_\_

Signature of Inspector \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

Food & Supply Officer Report:-

Approved  Not Approved

Reason for not approving \_\_\_\_\_

Signature of FSO \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

**ONLY HoF OR NEW PROPOSED HEAD OF FAMILY CAN APPLY IN THIS APPLICATION FORM.**