

Government of India
Directorate of Estates

Request for NO DEMAND CERTIFICATE (NDC)

<p>INSTRUCTIONS:</p> <ul style="list-style-type: none"> ➤ Please fill up the form in BLOCK LETTERS only. ➤ Fill dates as day (01-31), month (01-12) & year (2002) in the format DD-MM-YYYY. ➤ Please tick (✓) wherever required to do so. ➤ Please submit this form to the Directorate of Estates two years before the anticipated Date of Superannuation. 	<p>To:</p> <p style="text-align: center;">Directorate of Estates Government of India Nirman Bhawan New Delhi - 110108</p>
---	--

Registration Number of Allottee	Allottee Account Number (AAN) (To be filled up if allotted)	Date of Receipt (To be filled by Directorate of Estates)

Personal Details												
1. Allottee	Shri / Smt. / Km / Ms. / Dr.											
2. Designation												
3. Office with Address												
4.	a) Date of Birth						b) Date from which continuously employed in Govt. Service					
5. Please tick (✓) the relevant option and give the date of event							Date of Event					
Superannuation	Resignation	Voluntary Retirement	Death									

Government Accommodation allotted by Directorate of Estates during entire Service period							
S.No.	Type	Locality	Sector	Block	House No	Occupied on	Vacated on
1.							
2.							
3.							
4.							
5.							
6.							

Offices in which remained employed during entire service period					
S.No.	City	Office	Address of Office	Period of Posting	
				From	To
1.					
2.					
3.					
4.					
5.					
6.					

Signature of the Applicant : _____

6. If entitled for free accommodation, mention the relevant period(s):			7. In case you stood surety for other Govt. Servants, give details:			
From	To	Period of continuous leave of more than 30 days			Name	Govt. Accommodation
8. Address of Place of Duty of the Applicant			9. Permanent / Home Town address			
Phone			Phone			
Mobile						
E-mail						

Date: _____

Signature of the Applicant : _____

TO BE FILLED IN BY THE FORWARDING OFFICE

Office ID		Endorsement No.		Date	
Office					

Certified that all information mentioned in this application are verified from the records and have been found to be correct.

Signature with Date : _____

Office Seal

Name _____

Designation _____

Phone _____

E-mail _____