

Swachh Bharat Mission
Format I : For Data on Toilet

[This form to be downloaded/printed and duly filled in and signed copy to be scanned and submitted on the website]

(A) Geographical Particulars		
1.	State	:
2.	District	:
3.	Municipality	:
4.	Town/City	:
5.	Ward	:
(B) Toilet Owner's Particulars		
1.	Name of the Applicant	:
2.	Profession	:
3.	Father's Name	:
4.	Mother's Name	:
5.	Address	:
6.	Contact No. Land Line	:
	Mobile	:
7.	Adhar Card No.	:
8.	Bank A/c details: A/C No.	:
	IFSC Code:	:
	Name of the Bank	:
	Bank Branch	:
<i>Note : The funds will be transferred through Electronic Transfer</i>		
9.	Status of the Existing Toilet : i) Not Existing	<input type="checkbox"/>
	ii) Dry Latrine	<input type="checkbox"/>
	iii) Bahao type Latrine	<input type="checkbox"/>
	iv) Unsanitary latrine base on single pit latrine	<input type="checkbox"/>
(C) Undertaking		
<p>I undertake that the particular given above are true to the best of my knowledge and belief and in case of any information is found to be false/suppressed, State Government/Government of India will initiate suitable action against me.</p> <p align="right">Signature of the Applicant</p>		
(C) Reference of Two Persons Vouching for the Toilet Owner		
	(I)	(II)
Name:		Name:
Father's Name :		Father's Name :
Contact Address :		Contact Address :
City :		City :
State :		State :
Contact No. Land Line:		Contact No. Land Line:
Mobile:		Mobile:
Date :	Signature	Date :
		Signature
Open Defecation the Shame on the Nation		