

FORM

STATEMENT OF IMMOVABLE PROPERTY FOR THE YEAR ENDING DECEMBER 20231. NAME OF OFFICER/OFFICIAL (IN FULL) ANURAG GOYALEMPLOYEE CODE NO 200195272. FATHER'S NAME MADAN LAL GOYALPRESENT PAY(BP+GP) ₹2000 + 46003. PRESENT POST HOLD C/o AE(C&M) 4. DATE OF BIRTH 25-07-19954..DATE OF BIRTH 25-07-1995

NAME OF DISTRICT SUBDIVISION TEHSIL VILLAGE IN WHICH PROPERTY IS SITUATED	NAME & DETAIL OF PROPERTY HOUSING AND OTHER BUILDING	LANDS	PRESENT VALUE	IF NOT IN OWN NAME STATE IN WHOSE NAME HELD AND HIS/HER RELATIONSHIP IF ANY TO THE GOVT SERVANT	How acquired (whether by purchase mortgage lease inheritance gift or otherwise) with date of acquisition & name with details of person/persons from whom acquired	ANNUAL INCOME FROM THE PROPERTY	Remarks
1.	2.	3.	4.	5.	6.	7.	8.

NIL

Dy. Director CR Cell
 DELHI JAL BOARD
 Dy. No.1199
 Date02/02/2024

Anurag
 Signature.....30-01-2024
 Dated.....30-01-2024
 Mobile No.....9650202034

NOT APPLICABLE CLAUSE TO BE STRUCK OUT
 IN CASE WHERE IT IS NOT POSSIBLE TO ASSESS THE VALUE ACCURATELY THE APPROXIMATE VALUE IN RELATION TO PRESENT CONDITIONS MAY BE INDICATED.

NOTE:- THE DECLARATION FORM IS REQUIRED TO BE FILLED IN AND SUBMITTED BY EVERY MEMBER OF CLASS I & II (GROUP 'A&B') SERVICES UNDER RULE 18-(1) OF THE CCS (CONDUCT) RULES, 1964 ON 1ST APPOINTMENT TO THE SERVICE AND THEREAFTER AT THE INTERVAL OF 12 MONTHS GIVING PARTICULARS OF ALL IMMOVABLE PROPERTY OWNED, ACQUIRED OR INHERITED BY HIM OR HELD BY HIM ON LEASE OR MORTGAGE EITHER IN HIS OWN NAME OR IN THE NAME OF ANY MEMBER OF HIS FAMILY OR IN THE NAME OF ANY OTHER PERSON.