FORM

EMPLOYEE CODE NO 20018923

STATEMENT OF IMMOVABLE PROPERTY FOR THE YEAR ENDING DECEMBER 2023

1. NAME OF OFFICER/OFFICIAL (IN FULL) RAJMANI SINGH 2. FATHER'S NAME HARENDRA PRATAP SINGH

3. PRESENT POST HOLD AE(E&M) C/O Dir (S&DM) 4..DATE OF BIRTH 01/08/1988 PRESENT PAY(BP+GP) PB-II + 5400/-

NAME OF DISTRICT SUBDIVISION TEHSIL VILLAGE IN WHICH PROPERTY IS SITUATED	NAME & DETAILOF PROPERTY HOUSING AND OTHER BUILDING	LANDS	PRESENT VALUE	IF NOT IN OWN NAME STATE IN WHOSE NAME HELD AND HIS/HER RELAHON SHIP 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 FORM THE PROPERTY	Remarks
1.	2.	3.	4.	5.	6.	7.	8.
				NIL			

Dy. Director CR Cell
DELHI JAL BOARD
Dy. No. 296
Date 12/01/24

DD(CR)

Signature 02/01/2024

Dated 02/01/2024

Mobile No. 9650063709

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 DECALARTION 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 APOINTMENT TO THE SERVICE AND THERE AFTER AT THE INTERVAL OF 12 MONTHS GIVING PERTICULARS 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 FAMLY OR IN THE NAME OF ANY OTHER PERSON.

Office of the ACE (P)-5
(Safety & Disaster Management)
Dairy No. 17
Date 03/01/2024