

**ANNEXURE – ‘H’**

**PRIOR INTIMATION (P1) LETTER FROM THE GOVERNMENT/PSU/STATUTORY BODY  
EMPLOYEE TO HIS/HER ADMINISTRATIVE OFFICE FOR SUBMISSION OF PASSPORT  
APPLICATION FOR HIMSELF/HERSELF (ON PLAIN PAPER)**

Place.....

Date.....

{To be addressed to the Controlling/Administrative Authority with full postal address }

**To,**

The Vice Chairman & Housing Commissioner,

Telangana Housing Board,

Gruhakalpa, M.J.Road,

Hyderabad

PIN- 500 001

Telephone.....

Fax.....

Email:.....

**Subject: Prior Intimation for Submission of Passport Application.**

Sir/Madam,

I hereby give prior intimation that I am applying for an ordinary Passport to Regional  
Passport Office .....

This is for your kind information and record.

Yours faithfully,

Signature.....

Name.....

Date of Birth.....

Designation.....

Name of Office Where Working.....

.....

.....

Name of Organisation.....

.....

Address of Present Office.....

.....

Residential Address.....

.....

**Note:** The Prior Intimation Letter (under this Annexure) shall be accepted by the Passport  
Authority for processing the passport application if the same bears the signature and  
seal of the employer of the applicant acknowledging its receipt.

(NOC for obtaining passport)

**PROFORMA – I**

(To be furnished by the Government Employee duly counter signed by the \_\_\_\_\_)

(Affix)  
PHOTO

To be Attested by  
the Officer  
concerned

1	Name of the Government Employee in Capital Letter <b>(With full form of Initials).</b>	
2	Father's Name	
3	Date of First Appointment (Joining)	
4	Designation of present post	
5	Place of Working	
6	Whether post is permanent. If so date from which he is working	
7	Name of the Spouse	
8	Name of the dependent family members with age and marital status	
9	Permanent Address	
10	Present Address	
11	Purpose of seeking NOC	
12	Employee ID No. (with copy of ID proof)	
13	Mobile No.	

**Signature of the Applicant**

**Name:**

**Designation:**

**Place of Working:**

//Attested//

(Signature)

Officer Concerned

**Note:- Please provide three passport photos + copy of Identity card and forward duly attested by the Officer concerned along with application for seeking NOC.(Name should be confirmed with service register and certified by the officer concerned & copy of service register showing date of birth and date of appointment)**

**FORM FOR APPLICATION FOR LEAVE**  
**(See Supplementary Rule 216)**

**Note: Item 1 to 11 must be filled in by all applicants whether gazetted or Non- Gazetted.**

1. **Name of the applicant** :
2. **Leave Rules applicable** :
3. **Post held** :
4. **Department, Office & Section** :
5. **Pay** :
6. **HRA, Conveyance Allowance or other Compensatory Allowances drawn in the present post.** :
7. **Nature and period of leave applied for & date from which required** :
8. **Sundays & Holidays, if any proposed to be pre-fixed/suffixed to leave** :
9. **Ground on which leave is applied for:**
10. **Date of return from last leave and the nature and period of that leave** :
11. **I proposed / do not propose to avail myself of Leave Travel Concession in the Block year \_\_\_\_\_ during the ensuring leave.**
12. **I undertake to refund the difference between the leave salary draw during leave on average pay / Commuted leave and that admissible during leave on half average pay / Half Pay Leaves, which would not have been admissible had the provision to F.R.81 (b) (11) Rule 11 (c) (111) of the leave rules 1933, not been applied in the event of my retirement from service at the end of during the currency of the leave.**
13. **(b) I under take to refund the leave salary drawn during leave not due which would not have been admissible and F.R.81 (c) Rule 11 (c) of the Revised Leave Rules, 1993 and been applied in the event of my voluntary retirement or resignation from service at any time until I earn half pay leave not less than the amount of leave not due availed of by me**

**Date:**

**Signature of the Applicant**

: 2 :

14. **Remarks and / or recommendation** :  
**of the Controlling Officer**

**Date:**

**Signature & Designation**

**CERTIFICATE REGARDING ADMISSIBILITY OF LEAVE  
(By Accountant General in the case of the Gazetted Officers)**

15. **Certified that** \_\_\_\_\_ **( Nature of**  
**leave for** \_\_\_\_\_ **from** \_\_\_\_\_ **to**  
\_\_\_\_\_ **is admissible under Rule** \_\_\_\_\_ **of**  
**the** \_\_\_\_\_ **Rules.**

**Signature:**

**Signature & Designation**

16. **Orders of the Sanctioning Authority**

**Date:**

**Signature & Designation.**

**\* If the applicant is drawing any compensation allowances the sanctioning Authority should state whether on the expiry of leave he is likely to return to the same post or to another post carrying a similar allowance.**

**APPLICATION FOR AVAILMENT OF  
OPTIONAL HOLIDAY**

To,

Date:-.....

The .....

.....

Telangana Housing Board,  
Hyderabad.

Sir,

**Sub:- Request to accord permission to avail Optional Holiday-Regarding.**

-000-

I request you kindly to permit me to avail Optional Holiday on the eve of  
.....(Name of the Festival), which falls on  
(date).....and oblige.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

**APPLICATION FOR  
EARNED LEAVE ON PRIVATE AFFAIRS**

To,

Date:-.....

The .....  
Telangana Housing Board,  
Hyderabad.  
Sir,

//Through Proper Channel//

**Sub:- Request to sanction Earned Leave on Private Affairs for a period of ( )  
days w.e.f. ....to..... Regarding.**

-000-

I request you kindly to sanction Earned Leave on Private Affairs for a period of  
( ) days with effect from ..... to ..... with permission to avail  
Public Holiday on ....., as I have to ..... and  
the prescribed form of application for leave is enclosed herewith.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

**Encls:- Form for application for leave**

**APPLICATION FOR  
EARNED LEAVE ON MEDICAL GROUNDS**

To,

Date:-.....

The .....

Telangana Housing Board,

Hyderabad.

Sir,

//Through Proper Channel//

**Sub:- Request to sanction Earned Leave on Medical Grounds for a period of  
(     ) days w.e.f. ....to..... Regarding.**

-000-

I request you kindly to sanction Earned Leave on Medical Grounds for a period of  
(     ) days with effect from ..... to ..... with permission to avail  
Public Holiday on ....., as I am suffering from.....and doctor has  
advised me to take bed rest.

Further, I am enclosing the necessary Medical Certificate and filled prescribed  
form of application for sanction of leave.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

Encls:- (1) Form for application for leave  
(2) Medical Certificate.

**APPLICATION FOR**  
**COMMUTED LEAVE ON MEDICAL GROUNDS**

To,

Date:-.....

The .....  
Telangana Housing Board,  
Hyderabad.  
Sir,

//Through Proper Channel//

**Sub:- Request to sanction Commuted Leave on Medical Grounds for a period of (     ) days w.e.f. ....to..... – Regarding.**

-000-

I request you kindly to sanction Commuted Leave on Medical Grounds for a period of (     ) days with effect from ..... to .....on full pay with permission to avail Public Holiday on ....., as I am suffering from ..... and doctor has advised me to take bed rest.

Further, I am enclosing the necessary Medical Certificate and filled prescribed form of application for sanction of leave.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

Encls:- (1) Form for application for leave  
(2) Medical Certificate.



**APPLICATION FOR**  
**HALF PAY LEAVE ON PRIVATE AFFAIRS**

To,

Date:-.....

The .....,  
Telangana Housing Board,  
Hyderabad.  
Sir,

//Through Proper Channel//

**Sub:- Request to sanction Half Pay Leave on Private Affairs for a period of  
(     ) days w.e.f. ....to .....- Regarding.**

-000-

I request you kindly to sanction Half Pay Leave on Private Affairs for a period of  
(     ) days with effect from ..... to ..... with permission to avail  
Public Holiday on ....., as I have to .....  
..... I am submitting the filled prescribed form of application for  
sanction of leave.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

Encls:- (1) Form for application for leave

**APPLICATION FOR SANCTION OF  
SURRENDER LEAVE**

To,

Date:-.....

The .....  
Telangana Housing Board,  
Hyderabad.  
Sir,

//Through Proper Channel//

**Sub:- Request to sanction Surrender Leave for a period of (    ) days from  
..... to ..... for the Financial Year of ..... -  
Regarding.**

-000-

I request you kindly to sanction Earned Leave for Encashment (Surrender Leave)  
for a period of (    ) days with effect from ..... to ..... without  
actually going on leave for the Financial Year of .....

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

**DUTY JOINING REPORT**

To,

Date:-.....

The .....,  
.....,  
Telangana Housing Board,  
Hyderabad.  
Sir,

//Through Proper Channel//

Sub:- Submission of Duty Joining report – Regarding.

-000-

After the availment/Expiry of the Earned Leave on Private Affairs/Earned Leave on Medical Grounds/Half Pay Leave on Private Affairs/Commutated Leave on Medical Grounds from..... to ....., I am reporting for duty today i.e., on .....(FN).

Further, I am submitting the necessary Medical & Fitness Certificate.

This is for favour of information and taking further necessary action.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....  
Name of the Employee.....  
Designation and name of  
the section/Division.....

Encls:- Medical and Fitness Certificate

**APPLICATION FOR**  
**CASUAL LEAVE**

To,

Date:-.....

The .....,

.....

Telangana Housing Board,  
Hyderabad.

Sir,

**Sub:- Request to sanction Casual Leave for (    ) days -Regarding.**

-000-

I request you kindly to sanction Casual Leave for (    ) days from ..... to  
..... with permission to avail Public Holiday(s) on ....., as I have  
to attend some personal work/enable to .....

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....

**APPLICATION FORM FOR THE GRANT OF EDUCATION ADVANCE**

(1) (a) Name (in Block Letters) :

(b) Designation, Department & office where employed :

(c) Scale of Pay :

(d) Present Pay including all allowances :

(e) Net Salary received :

(2) Date of Birth :

(3) Where regular, if so, total period of service :

(4) Total number of living Children's with particulars of their names and ages :

(5) Name of the institution (s) Where the Child/Children are studying. :

**DECLARATION**

(i) I solemnly declare that the information furnished by me in reply to the various items indicated above is true to the best of my knowledge and belief.

(ii) I Certified that :

1) My wife/Husband is not a State Government Servant.

2) Whether I nor my wife/Husband who is a State Government Servant has applied for and /or obtained and advance under these rules.

Station :

Date :

**Signature of the Applicant.**

Designation:

Department office  
in which employed.

**Rule (9),A.P.C.S.(Conduct)Rules,1964,**

**Acquiring or Disposing of Movable and Immovable Property**

Provided further that Government employee shall submit the particulars giving prior intimation or seeking prior sanction, in the following format:

1. Name and Designation :
2. Scale of pay and present pay :
3. Purpose of application / sanction for transaction/ :  
Prior intimation of transaction:
4. Whether property is being acquired or disposed of :  
disposed of
5. Probable date of acquisition / Disposal of property :
6. Mode of acquisition / Disposal :
7. a) Full details about location Viz., Municipal No. Street/Village, Mandal, District and State in which situated :  
b) Description of the property, in the case of cultivable land, dry or irrigated land :  
c) Whether free hold or leasehold :  
d) Whether the applicant's interest in the property is in full or part (in case of partial interest, the extent of such interest must be indicated) :  
e) In case the transaction is not exclusively in the name of the Government servant, particulars of ownership and share of each member :
8. Scale/purchase price of the property (market value in the case of gifts) :
9. In case of acquisition source or sources from which financed / proposed to be financed  
a) Personal Savings :  
b) Other sources giving details :
10. In the case of disposal of property, was requisite sanction/ intimation obtained/ given for its acquisition. A copy of the sanction/ acknowledgement should be attached :

11. a) Name and address of the party with whom transaction is proposed to be made :  
b) Is the party related to the application? If so, state the relationship:  
c) Did the applicant have any dealings with party in his official capacity at any time, or is the applicant likely to have any dealings with him in the near future?  
d) How was the transaction arranged? (Whether through any statutory body or a private agency through advertisement or through friends and relatives. Full particulars to be given).
12. Any other relevant fact which the application may like to mention.

**DECLARATION**

I..... hereby declare that the particulars given above are true. I request that I may be given permission to acquire/dispose of property as described above from / to the party whose name is mentioned in item 11 above.

**OR**

I..... hereby intimate the proposed acquisition / disposal of property by me as detailed above. I declare that the particulars given above are true.

Station:

Signature:

Date:

Designation:

**APPLICATION FOR SANCTION OF  
FESTIVAL ADVANCE**

To,

Date:-.....

The .....

.....

Telangana Housing Board,  
Hyderabad.

Sir,

**Sub:- Request to Sanction Festival Advance on the eve of .....  
Regarding.**

-000-

I request you kindly to sanction Festival Advance on the eve of (Name of the Festival), ....., which falls on (date).....and oblige.

Thanking you sir,

Yours faithfully,

Signature of the Employee.....

Name of the Employee.....

Designation and name of  
the section/Division.....



**Attendance Certificate**

This is to certify that Sri/Smt. ....

Designation:-..... working in the office of the  
...../Section, Telangana Housing Board,  
Hyderabad, has attended office regularly from (Date).....to  
.....

Date:-

Signature:-

Name of the Section:-

**Requisition for Photo Copies**

Reference :-

Subject :-

Number of Copies Required :-

Name of the Concerned case worker :-

**S i g n a t u r e**

**Requisition for Photo Copies**

Reference :-

Subject :-

Number of Copies Required :-

Name of the Concerned case worker :-

**S i g n a t u r e**

**Requisition for Photo Copies**

Reference :-

Subject :-

Number of Copies Required :-

Name of the Concerned case worker :-

**S i g n a t u r e**

**PROFORMA FOR REIMBURESEMENT OF TUTION FEES**

\*\*\*

- (1) Name of the Employee  
(in Block Letters) :
- (2) Designation :
- (3) Place of working (Name of the Office/Section) :
- (4) Present Pay (including all allowances) :
- (5) Net Salary received :
- (6) Date of Birth :
- (7) Whether regular, if so, total period of service :
- (8) Total number of living Children's  
with particulars of their names and age :  
(a)  
(b)
- (9) Name of the institution(s) Where the  
Child/Children are studying :
- (10) **Enclosures**:- (Study Certificate, Declaration,  
Fees payment Receipts, all in originals.  
(as per existing rules). :

**SELF DECLARATION**

- (i) I solemnly declare that the information furnished by me in the various items indicated above is true to the best of my knowledge and belief.
- (ii) I Certified that:-
  - (a) My wife/Husband is not a State Government Servant.
  - (b) Whether, I nor my wife/Husband who is a State Government Servant has applied for and /or claimed/paid Reimbursement of Tuition Fees under these rules.
  - (c) Previously, I have not claimed/paid the Reimbursement of Tuition Fees for the Academic Year..... , if it is found in later date that, if any excess payment is paid to me and I have claimed/paid the Reimbursement of Tuition Fees for the same Academic Year, the same can be recovered from me.

Station :

Date :

**Signature of the Employee**

Designation :

Name of the  
office/section: