



Swachh Bharat Mission (Urban)

(Form for Obtaining Incentive for Construction of Individual Household Toilet/
Conversion of Insanitary Latrine and Single Pit Latrine to Sanitary Latrine)

Photograph

a) Geographical Particulars				
1.	State:	2.	District:	
3.	Block:	4.	Tehsil:	
5.	Town/City:	6.	Ward:	
b) Toilet Owner's Particular				
1.	Name of the Applicant:	2.	Profession:	
3.	Father's Name:	4.	Mother's Name:	
5.	Address:	6.	Contact No. (Landline):	
7.	Contact No.(Mobile):	8.	Aadhar Card No:	
9.	Bank Account No:	10.	Name of Bank:	
11.	Bank Branch (Place):	12.	IFSC Code:	
13.	Status of Existing Toilet:			
	(i) Not Existing <input type="checkbox"/>		(ii) Dry Latrine <input type="checkbox"/>	
	(iii) Bahao Type Latrine <input type="checkbox"/>		(iv) Unsanitary Latrine Based on Single Pit Latrine <input type="checkbox"/>	
(C) Undertaking				
I undertake that the particulars given above are true to best of my knowledge and belief and in case of any information are found to be false/suppressed, State Government/ Government of India will initiate suitable action against me.				
Signature of Applicant				
(D) References of Two Persons vouching for the Toilet Owner				
	(I)		(II)	
	Name:		Name:	
	Father's Name:		Father's Name:	
	Address:		Address:	
	City:		City:	
	State:		State:	
	Contact No. (M):		Contact No. (M):	
	Mobile:		Mobile:	
	Date: Signature:		Date: Signature:	
(E) For Office Use only				
It is certified that the information stated above has been verified and it is recommended to release for the first instalment of incentive under SBM (Urban).				
_____ (Signature) Name: Designation:		Office Stamp: Date: Place:		