Application fee: Rs.10

| Application form for seeking information under The Ri  | ght to Inform   | nation A   | ct, 2005  |   |
|--|---|--|---|---|
|  | Date  | 09   | 05 2022   |   |
| The Public Information Officer/ Asstt. Public Information Officer, Greater Noida Industrial Development Authority, 169, Chitvan Estate, Sector Gamma, Greater Noida — 201308 (U.P.)  | Serial No   |  |   |   |
| Sir,   |   |  |   |   |
| I hereby request you to provide following information u respect of Greater Noida Industrial Development Authority  | nder Right to   | Informa  | ation Act, 2005 i   | n   |
| Particulars of information required (All fields are manda  | tory):  |  |   |   |
| (i) Subject matter & Description of information required   | (ii) Th   | e perio  | d to which th   | е   |
| Asper Annexure.  |   | ormation   | n relates<br>2011<br>2022 till de<br>P15 - 2056   | de la |
|  |   | /  | blo pr  | \$6/22                                    |
| (iii) Whether information is required by:  | V (- 5)   |  |   | /3/                                       |
| Post (The actual postal charges shall be included in additional to Ordinary • Registered • Speed (iv) Please enter any one of the following:   | ees) In Pe  | rson   | \   | 7 '                                       |
| DANING -   |   |  |   | 7   |
| PAN card No.:  |   |  |   | 7   |
| Passport No.:  |   |  |   | 7   |
| Ration card No.:   |   |  |   |   |
| I hereby declare and confirm that I am an Indian citize information under RTI Act, 2005. I have attached copy Ration card in support of my citizenship. I shall use this in I assure and conform that in any case or/and under any use/pass on/share/display/keep/circulate the information manner which would be detrimental to/against the interest turns out to be incorrect or false, I shall be responsible to the information.  Signature of applicant Place: Greater State County of the applicant (Fill in Block letters):   | of my PAN of formation for circumstance received, we sof India. If a and liable for | card/Vote<br>my pers<br>es, I shal<br>vith any<br>any inforr<br>conseq | er's card/Passpor<br>onal purpose only<br>I not (allow/cause<br>person or in an<br>mation/ declaratio | t/<br>/.<br>e)<br>y<br>n<br>n             |
| Surname First Name   |   | Name   |   | _   |
| BEDI LT COL SUDHI  | RIKUI   | MAR  |   | _   |
| Address: House No./Bldg.Name Street Name/Area City & Pin Code Telephone E-mail   | 1   |  |   |   |
| (For Office Use)   | las re  |  |   |   |
| Reference: Received Characteristics Received C | oy:<br>alíy ⊡ Post  | □ E-mail   | I   |   |
| Sign and Name of receiving officer   |   |  |   |   |
| Enclosure in Copy of the PAN Card of Lt Cols K Bedi (Retd)  (b) Annexure to the RTI  |   |  |   |   |
| (4) Annexure to the KII  |   |  |   |   |
| (c) Partal Ondow of RS 10/-  |   |  |   |   |