**RTI APPLICATION FORMAT**

To, Date:.............................

Director & Chief Public Information Officer

Central Muga Eri Research and Training Institute,

Central Silk Board, Ministry of Textiles, Govt. of India,

P.O. – Lahdoigarh, Jorhat, Assam (India)

PIN – 785 700.

Sir,

Subject: Request for Information under Right to Information Act 2005.

I Sri / Smt /Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Son/Daughter/wife of Shri/Smt/Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, telephone number (with STD Code) \_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and/or mobile number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ wish to seek information as under

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I hereby inform that following formalities have been completed by me:

1. 1. That I have deposited the requisite fee of Rs. \_\_\_\_\_/- by way of Cash / banker cheque / Draft / Postal Order/ others \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_) favouring Director, CMER&TI dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. I need the photocopy of the documents and I had deposited the cost of the photocopy of Rs. \_\_ \_\_/- for \_\_\_\_\_ (Number of Pages)

or

I had deposited sum of Rs. \_\_\_\_\_/- for the charges of CD. (Strike out whichever is not applicable)

1. That I belong to Category of below Poverty Line (BPL): Yes / No

(Strike whichever is not applicable). If yes, I am attaching the valid photocopy of the certificate. Yes / No

1. That I am ‘Citizen’ of India and I am asking the information as ‘Citizen’.
2. I assure that I shall not allow/ cause to use/ pass/share/display/ or circulate the information received in any case and under any circumstances, with any person or in any manner which would be detrimental to the Unity and Sovereignty or against the Interest of India.

Signature of the Applicant

Dated: