



New Delhi Municipal Council

PALIKA KENDRA: NEW DELHI-110001

DEPARTMENT OF HEALTH APPLICATION FORM FOR RENEWAL/GRANT OF LODGING HOUSE LICENCE IN N.D.M.C.

Section-I

1. Citizen ID :
2. Citizen Name :
3. Citizen Address :
- City : Pin Code :
4. Citizen Phone No :
5. Citizen Email ID :

Section-II

Medical Officer of Health,
New Delhi Municipal Council,
New Delhi.

Dear Sir,

I/we am/are running a lodging house in the premises No..... New Delhi in the name and Style of..... The license for the same may please be Renewed/Granted for the year/years..... Necessary particulars are as under :-

1. Name of the Establishment :
2. Location of premises No :
3. Whether Proprietorship/Partnership :
- (Attach a copy of Partnership Deed in case of Partnership)
4. Name of the Proprietor/Partners :
5. Father's Name :
6. Caste :
7. Residential Address :
- City : Pin Code :

