



Saanjh Services – Acknowledgement of Complaint

Official Use Only

Facilitation Charges: NIL

Application Number		Date of Application	
Name of Block & Tehsil			

Part-1 Personal Details Fields marked with asterisk (*) are mandatory (Note – If user profile is already created, then fill only (Service details))

Details of Person Filling the Application Form				Self-Attested Photo of Beneficiary Live photo will be captured
1. Name				
2. Address				
3. Relation with Beneficiary				
Personal Data of Beneficiary/ Complainant				
4. Name of Person/Organization*				
5. Gender*	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender	
6. Date of Birth*				
7. Father's Name*				
8. Mother's Name*				
9. Region*	<input type="checkbox"/> Urban	<input type="checkbox"/> Rural		
10. Permanent Address of Applicant* (H.No/ Street No./ Mohalla)				
11. Village (Only in case of Rural)*		12. Sub District/ Tehsil*		
13. District*		14. State*		
15. PIN Code*		16. Country		
17. Police station*		18. Nationality		
19. Marital Status*		20. Spouse Name*		
21. Email ID		22. Contact Number*		
<input type="checkbox"/> Tick if Correspondence address is same as Permanent address				
23. Region*	<input type="checkbox"/> Urban	<input type="checkbox"/> Rural		
24. Correspondence Address of Applicant*				
25. Village (Only in case of Rural)*				
26. Sub District/ Tehsil*		27. District*		
28. State*		29. PIN Code*		
30. Voter ID Card Number				
31. Aadhaar card (UID)				
32. Aadhaar Enrollment Number (if Aadhaar not issued)				

Part 2 – Service details

33. Date of Complaint (DD/MM/YYYY)			
34. Subject			
35. Police Station			
36. Complaint Against	(1)	(2)	(3)
Name			
S/o, D/o, W/o			
Address			
37. Any other Details			
38. Documents to be attached	Photo ID proof (Tick whichever is attached) <input type="checkbox"/> Driving License <input type="checkbox"/> Pan Card <input type="checkbox"/> Voter Card <input type="checkbox"/> Passport <input type="checkbox"/> Aadhaar Card <input type="checkbox"/> Ration Card <input type="checkbox"/> Bank Pass Book <input type="checkbox"/> Any Other		

Self-Declaration

I declare that all the above information given by me, is best of my knowledge & belief, in future if any information find false then any legal action can be taken against me.

Signature of the Applicant