

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:01-02/B,99

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	MARRI REDDY	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side																					
1	VATTI TEKLAMMA(84)	Self	Female		Nil	HOUSE WIFE/Nil	890057550758 <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																						

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	Tiled	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:____/DRY____:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

Declaration:

It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following:

1.Eligible for Antyodaya Food Security Card [] 2.Eligible for Food Security Card [] 3.InEligible for Food Security Card []

Name & Signature of the Verification Officer:
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Name & Signature of the Tahsildar:
Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
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NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension
---------------------	-----------------

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-4/4A,99

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	RAMABRAHMAM	Gas Connection(Y/N)/Agen./CNO	YES/Bharath/35751

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	KORVI RATHNAVI LASACHARY(55)	Self	Male		Nil	State GovtEmploy ee/Nil	587814777779 	
2	KORVI SRIVELI VASANTH AKUMARI(63)	Wife	Female		Nil	Nil/State Govt Pension	494207916664 	
3	KORVI VIKAS(25)	Son	Male		Nil	Nil/Nil		
4	KORVI SUBRAHM ANYAM(26)	Son	Male		Nil	Nil/State Govt Pension	430302275361 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Name & Signature of the Tahsildar:

Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

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Name of Benificiary	Type of Pension

NONE ELIGIBLE []

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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-35,MARIAYAPURAM

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	JOJEREDDY	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	SHAYMAL A S JARJEREDY(91)	Self	Male		Nil	AGRICULTURE LABOUR /Nil	550895415045 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:9.48	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

Declaration:

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Name & Signature of the Verification Officer:

Date of Visit:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
NONE ELIGIBLE []					

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Name & Signature of the Tahsildar:

Date:

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Name of Beneficiary	Type of Pension
NONE ELIGIBLE []	

Name & Signature of the MPDO/Municipal Commissioner

Date:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-37/2,MARIAYAPURAM

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	JOJEREDDY	Gas Connection(Y/N)/Agen./CNO	YES/Bharath/50043

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side																					
1	GAMARE G THAMASA MMA(56)	Self	Female		Nil	DO NOTHING/ Nil	603619583416 <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																						

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:1	WET/ID:____/DRY____:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
---	---------	-------	----------	--------------	--------

NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension
---------------------	-----------------

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-40/A,99

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	CHINNAPU REDDY	Gas Connection(Y/N)/Agen./CNO	YES/Indane/25675

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	THIRUMAL REDDY DILEEP KUMAR(31)	Self	Male		Nil	Nil/Nil	397328573631 	
2	THIRUMAL REDDY ARVITHA(26)	Wife	Female		Nil	Nil/Nil	529243915913 	
3	THIRUMAL REDDY CHINNA TRINITY REDDY(0)	Son	Male		Nil	Nil/Nil		

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:_____/DRY____:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

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Name & Signature of the Tahsildar:
Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-40/3,99

District/Mandal	warangal/geesugonda	GP	maraiyapuram	Habitation	maraiyapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	SHOWREDDY	Gas Connection(Y/N)/Agen./CNO	YES/Indane/6159

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	THIRUMAL A REDDY MARRI REDDY(51)	Self	Male		Nil	OTHERS(P ROVIDE DETAILS)/ Nil	953280768669 	
2	THIRUMAL A REDDY AAROGYA MERI(48)	Wife	Female		Nil	HOUSE WIFE/Nil		

Verification Parameters of the household to be verified

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1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:___/DRY___ :
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

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Name & Signature of the Tahsildar:

Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

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Name & Signature of the Tahsildar:
Date:

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Name of Benificiary	Type of Pension

NONE ELIGIBLE []

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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-56,ookal-h

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	mallaiah	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side																					
1	bitla bitla ramaiah(91)	Self	Male		Nil	Nil/Nil	301337741006 <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																						

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2	Total Land Holding(acres)	WET/ID:0.32/DRY:0	WET/ID:_____/DRY_____:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
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Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-79/A,MARIYAPURAM

District/Mandal	warangal/geesugonda	GP	mariyapuram	Habitation	mariyapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	NARSAIAH	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side																					
1	KOUDAGA NI LAXMI(68)	Self	Female		Nil	HOUSE WIFE/Nil	626516745732 <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																						

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2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:____/DRY____:
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4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

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Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
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NONE ELIGIBLE []

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Name of Beneficiary	Type of Pension
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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-88/3/A,MARIYAPURAM

District/Mandal	warangal/geesugonda	GP	mariyapuram	Habitation	mariyapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	NARSINGARAO	Gas Connection(Y/N)/Agen./CNO	YES/Indane/54674

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	KOUDAGA NI RADHABH AI(60)	Self	Male		Nil	DAILY WAGES LABOUR/Nil	814054766677 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	Tiled	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

Declaration:

It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following:

1.Eligible for Antyodaya Food Security Card [] 2.Eligible for Food Security Card [] 3.InEligible for Food Security Card []

Name & Signature of the Verification Officer:
Date of Visit:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver
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NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension
---------------------	-----------------

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-88/5,MARIYAPURAM

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	MALLAIAH	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	RAGUSHA LA SHANKAR AIAH(75)	Self	Male		Nil	DAILY WAGES LABOUR/N il	555423329706 	
2	RAGUSHA LA BUCHAMMA(72)PWD: Y & Sadaran No:2127136 0180223011	Wife	Female		Nil	DAILY WAGES LABOUR/N il	690987737318 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	Tiled	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

Declaration:													
It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following: 1.Eligible for Antyodaya Food Security Card [] 2.Eligible for Food Security Card [] 3.InEligible for Food Security Card []	<table border="1"> <thead> <tr> <th>Name of Beneficiary eligible for pensions</th> <th>Old Age</th> <th>Widow</th> <th>Disabled</th> <th>Toddy Topper</th> <th>Weaver</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver						
Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver								
Name & Signature of the Verification Officer: Date of Visit:	NONE ELIGIBLE []												
It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following: 1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []	<table border="1"> <thead> <tr> <th>Name of Beneficiary</th> <th>Type of Pension</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Name of Beneficiary	Type of Pension										
Name of Beneficiary	Type of Pension												
Name & Signature of the Tahsildar: Date:	NONE ELIGIBLE []												
	Name & Signature of the MPDO/Municipal Commissioner Date:												

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-96/a,mariyapuram

District/Mandal	warangal/geesugonda	GP	mariyapuram	Habitation	mariyapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	narsaiah	Gas Connection(Y/N)/Agen./CNO	YES/Bharath/55062

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	addala gopal(60)P WD: Y & Sadaran No:2127136 0180223008	Self	Male		Nil	DAILY WAGES LABOUR/N il	758158512855 	
2	addala laxmi(50)	Wife	Female		Nil	OWN AGRICULT URE /Nil	998093595624 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:0/DRY:2.66	WET/ID:___/DRY___ :
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

Declaration:

It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following:

1.Eligible for Antyodaya Food Security Card [] 2.Eligible for Food Security Card [] 3.InEligible for Food Security Card []

Name & Signature of the Verification Officer:
Date of Visit:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

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Name & Signature of the Tahsildar:

Date:

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Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner

Date:

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Name & Signature of the Tahsildar:
Date:

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Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
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NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-116,MARIYAPURAM

District/Mandal	warangal/geesugonda	GP	maraiyapuram	Habitation	maraiyapuram
SC/ST/BC/OC	BC	Father/Mother/husband Name	RAJIAH	Gas Connection(Y/N)/Agen./CNO	YES/Bharath/36435

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	BITLA SUDHARS HAN(57)	Self	Male		WEAVERS	Nil/Nil	896902968020 	
2	BITLA SAROJANA (51)	Wife	Female		Nil	DAILY WAGES LABOUR/Nil		

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	RCC	
2	Total Land Holding(acres)	WET/ID:1.12/DRY:1.08	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

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Declaration:

It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following:

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Name & Signature of the Verification Officer:

Date of Visit:

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1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:

Date:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner

Date:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

Household Verification Format

Door No:1-09/1,99

District/Mandal	warangal/geesugonda	GP	mariayapuram	Habitation	mariayapuram
SC/ST/BC/OC	oc	Father/Mother/husband Name	MARREDDY	Gas Connection(Y/N)/Agen./CNO	NIL/-/

Family Details of Family Members

S.No	Name of the Family Member(age)	Relation ship with head of HH	Sex	Land as 1B Register/Field Verification	Present Artisan Status	Status of Employment/ Govt Pensioner Details	Aadhar Card Number	Residing/Dea d/living Out side
1	GOLAMAR I FATHIMA MERI(47)P WD: Y & Sadaran No: Nil	Self	Female		Nil	DAILY WAGES LABOUR/N il	375064140634 	
2	GOLAMAR I THAMAS REDDY(25)	Son	Male		Nil	DAILY WAGES LABOUR/N il	395090544645 	

Verification Parameters of the household to be verified

S.No	Verification Parameters	Data As Per Samagra Kutumba Survey	As Per Field Verification
1	Type of House(thatched/plastic roof/tiled/RCC)	Tiled	
2	Total Land Holding(acres)	WET/ID:0/DRY:0	WET/ID:___/DRY___:
3	4 Wheeler owners	NIL	
4	IT Assessed	NIL	
5	Freedom Fighter Pensioners	0	
6	Nomadic HouseHold(Y/N)	NIL	

Note:Combine the artificial households if any into one household and state the SKS numbers of split households:

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Verification Officer Remarks:

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Declaration:

It is certified that,I have personally visited the above household and verified all the above details.I certify that the household above information is true and recommended one of the following:

1.Eligible for Antyodaya Food Security Card [] 2.Eligible for Food Security Card [] 3.InEligible for Food Security Card []

Name & Signature of the Verification Officer:
Date of Visit:

Name of Beneficiary eligible for pensions	Old Age	Widow	Disabled	Toddy Topper	Weaver

NONE ELIGIBLE []

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

1.Issue for Antyodaya Food Security Card [] 2.Issue for Food Security Card [] 3.Ineligible for Food Security Card []

Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Beneficiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the household as one of the following:

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Name & Signature of the Tahsildar:
Date:

It is certified that,after securitizing the verification parameters with the eligibility criteria,I confirm the following:

Name of Benificiary	Type of Pension

NONE ELIGIBLE []

Name & Signature of the MPDO/Municipal Commissioner
Date:

