



Format for cesspool service for cleaning of septic tank
Balasore Municipality, Balasore

Date of Application (ଦରଖାସ୍ତ ଆବେଦନା ତାରିଖ):

D	D	/	M	M	/	Y	Y
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Name of the Applicant (ଆବେଦନକାରୀଙ୍କ ନାମ): _____

Address (ଠିକଣା): _____

Ward Number (ଓିଆର୍ଡ ନମ୍ବର): _____

Landmark near your home (ଘର ନିରୁପଣ କରୁଥିବା ଚିହ୍ନ) : _____

Mobile No. (ମୋବାଇଲି ନମ୍ବର): _____

Service Delivery Site (କେଉଁ ଅଞ୍ଚଳରେ ସେବା ଦିଆଯିବ):

1. Municipality (ପୌରପାଳିକା ଭିତରେ)

2. Outside the Municipality (ପୌରପାଳିକା ବାହାରେ)

If Municipality Area Holding Tax No. (ହୋଲଡିଙ୍ଗ ଟାକ୍ସ ନମ୍ବର): _____

Holding Tax Clearing Status (ହୋଲଡିଙ୍ଗ ଟାକ୍ସ ଦେବାର ପ୍ରମାଣ): _____

Road Accessibility to Septic Tank: 1. Yes 2. No 3. Do Not Know

Amount Deposit for Services (ଜମାଦାଖିର ପରିମାଣ): _____

Signature of the Applicant with Date

ଆବେଦନକାରୀଙ୍କ ଦରଖାସ୍ତ ଓ ତାରିଖ

FOR OFFICE USE ONLY

Registration Serial Number: _____

Date of Service Provided: _____

Service Provided Cesspool Vehicle No: _____

Number of Trips:

Total Amount Deposit:

1) Advance Amount _____ MR No. _____ Date: _____

2) Post Service Deposit Amount: _____ MR No. _____ Date: _____

Signature of the Operator With Date: _____

Signature of the Verifying Officer