

APPLICATION FOR FINANCIAL ASSISTANCE
(Installation of STP)
(Application along with documents to be submitted)

1. Name of the RWA/NGO :
2. Registered Address :
3. Registration No. under the Society's Registration Act :
4. Address where STP is to be installed :
5. Serial No. of the park (as per the list of parks uploaded in the website of DPGS), Constituency No. & Name :
6. Work Plan Details (per acre) (COSTING) :
7. Documents attached-
 - a) **Copy of Registration Certificate under the Society's Regd. Act.**
 - b) **NOC from Hon'ble MLA of the concerned Constituency.**
 - c) **A Resolution by the RWA/NGO regarding setting up of STP at ____ park.**
 - d) **Affidavit regarding proper utilization of funds.**
 - e) **Permission from DJB for lifting sewage from Sewage Manhole.**
 - f) **Indemnity bond on Rs.100/- non-judicial paper duly attested.**
 - g) **Authenticated detail of office bearers along with date when they were elected.**
 - h) **Certificate from Dy. Director(Hort.)/S.O. pertaining to size/area of the park along with photographs.**
 - i) **In case proposal is from NGO, NOC from the concerned RWA**
 - j) **ECS mandate (photocopy of cancelled Cheque).**
 - k) **Details of the agency engaged for the installation of STP.**
 - l) **Size/volume of the STP to be installed.**
 - m) **Name of the company/manufacturer (if applicable) of the STP to be installed.**
 - n) **Maintenance arrangement after installation.**

Note: - DPGS will seek NOC from the concerned Land Owning Agency.

One time financial assistance towards the cost of STP @ Rs. 2 Lac per acre maximum, while the balance if any will have to be borne by the concerned RWAs/NGOs (50% assistance to be released on application found satisfactory and remaining 50% after half the work has been executed and inspected).

CERTIFICATE

1. I hereby certify that the works shall commence within one month of release of funds and shall be executed as per the work plan submitted above.
2. I undertake to submit the Utilization Certificate on completion of STP on prescribed format within two months period of grant of assistance, along with statement of accounts audited through authorized Chartered Accountant.

(Signature)

**President / Secretary
of the RWA/NGO**

INDEMNITY BOND
(Installation of STP)

I, _____, President / Secretary of _____ (Name of the RWA/NGO), registered at _____ dated _____ and the RWA/NGO have decided to set up STP in the parks _____ (location), which shall water the parks _____

The RWA/NGO is located at _____ (address) and do hereby indemnify to the extent of Rs. _____, which has been sanctioned one time for setting up of STP. I, individually/collectively hereby state that if the RWA/NGO fails to do the work, the amount shall be recovered from me, individually/collectively in part or full, and I, individually/collectively shall be liable for criminal action in case of failure to use the funds for the purpose of setting up of STP in the above park, Delhi Parks and Gardens Society shall be free to take legal action against the RWA/NGO and against me, individually/collectively, in particular, to recover the dues.

Signature

Name of RWA/NGO _____

President/Secretary/Member

Witnesses:

- 1.
- 2.

UTILIZATION CERTIFICATE

(Installation of STP)

Certified that sum of Rs. _____ as Financial Assistance for the setting up of STP was sanctioned by Delhi Parks & Gardens Society Vide letter No. _____ dated _____, has been fully utilized, by the society for the purpose for which it was sanctioned and there is no unspent amount balance / an amount of Rs. _____ has remained unutilized as on _____.

Certified that I have satisfied myself that the condition on which the Financial Assistance was sanctioned have been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

Kinds of checks exercised-

- | | |
|---|----------------------------|
| 1. Photograph | Signature |
| 2. C. A. Report | Name of RWA _____ |
| 3. Physical inspection by Staff | Regd No. _____ |
| 4. Bank statement | President/Secretary/Member |
| | Mob: _____ |
| 5. Audited Accounts Statement
of Expenditure | |

Witness -

- 1.
- 2.

CERTIFICATE

Certified that the work has been completed satisfactorily as per physical verification of the actual work done.

Field Supervisor (DPGS)

Horticulturist (DPGS)