

**TAMIL NADU ADI DRAVIDAR HOUSING AND  
DEVELOPMENT CORPORATION LTD.  
TEYNAMPET, CHENNAI -18.**

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**FORM I**

**FORM OF APPLICATION FOR REGISTRATION AS CONTRACTOR**

**From**

**To**

The General Manager,  
Tamilnadu Adi Dravidar Housing  
and Development Corporation Ltd.,  
Chennai - 18.

**Sir,**

I herewith submit my application for registering name in your register of contractors in classification of works in State/Circle/Division.

A chalan for Rs. (Rupees )  
towards application fees for registration of contractors is enclosed.

Signature of the applicant.

Chalan for Rs.  
Details of the Firms Certificate.  
Details of machinery etc.,  
List of works undertaken in the past.

## FORM 2

### 1. GENERAL

1. Name of the applicant (State whether the registration sought for is for an individual or joint stock company or undivided Hindu Family or registered partnership firm, the names of the partners together with details of financial and other business interests of the partners should be separately furnished (attested copies of Articles of Association for partnership deed, etc., to be enclosed). If a Joint Stock Company, the name of the Director(s) should be furnished.
2. Name of the Registered Office of the individual or company and place of business.
3. Permanent address to which all communications should be sent.
4. Does the individual or company do any business other than the contractor work or supplies?
5. Receipt No. and date in which the prescribed Fee has been paid.
6. Has the Applicant applied previously for registration and if so, with what result?
7. Has the applicant or any one of his partners been removed from the list of contractors or black list of contractors or blacklist ed anywhere at any time? And if so, for what reasons (here give full details).
8. Class and territorial unit in which enlistment is sought.
9. Has the Applicant registered himself as a contractor with any other registering officer of this and other departments? furnished.

## **II DETAILS OF EXPERIENCE**

10. Whether the Applicant is a shareholder or partner of any firm already registered any in the Department?
11. Is the applicant or any of the partners or shareholders of his firm any employee of his firm a Government servant (Past or present) of this Department? if so, particulars to be furnished.
12. The nature of work the applicant propose to undertaken (Whether Road works, building works, public Health works, etc.,)?
13. Experience of the Applicant in the line (testimonials, if any, and list of works with total value should be separately enclosed).

## **III TECHNICAL PERSONNEL AND RESOURCES**

14. Name of names of Technically Qualified and other persons employed together with their qualifications and experience.
15. Does the Applicant maintain an office for preparing design, drawings, catimates, tender documents bills etc.,?
16. Does the Applicant own a workshop for structural fabrication work, and if so, furnish details there of?
17. State particulars of construction machinery and tools and plant owned by the applicant.
18. Does the applicant own a plumbing or any other licence connected with his business?
19. Name or Names of the Banker(s) with whom the applicant maintains accounts.
20. Name of person holding the power of attorney in the case of a partnership firm.

21. Paid up capital and dividend declared if a joint Company.
22. Average cash deposits during the last on year - Certificate of the bank to be produced.
23. Value of properly owned ( a certificate to the produced from to the revenue Department).
24. Name and Designation of the Officer of the Revenue Department (Person) issuing the property certificate.
25. Whether the applicant has enclosed the Income Tax verification Certificate and Sales Tax clearance Certificate?
26. Annual Turnover of the Applicant
27. Money limits of contracts upto which the applicant will be able to undertake work.

I / We declare that the particulars furnished above are true to the best of my / our knowledge.

Place :

Date :

Signature of the Applicant  
(Seal of the Company in the  
case of a firm)

**Form – 1**  
**(See Rue – 5(1))**

**APPLICATION FOR REGISTRATION OF A HINDU MARRIAGE UNDER  
THE TAMILNADU HINDU MARRIAGE (REGISTRATION ) RULES 1967**

We the persons who have signed hereunder as Husband and Wife hereby apply for the Registration of our marriage under the Tamilnadu Marriage (Registration) Rules, 1967 and for that purpose furnish the following particulars

1. Full Name of the Husband :  
(as per records)

a). Religion and caste :

2. Full name and address :                      Father                      Mother  
of Parents of Husband

a) Age & Occupation :

3. Full Name of the Wife :

a) Religion and caste :

4. Full Name and address of Parents:                      Father                      Mother  
of Wife

a) Age & Occupation :

5. Age on the Date of Marriage & : Husband Wife  
Date of Birth

6. Martial Status before the date :  
of marriage

7. Occupation :

8. Permanent place of residence :  
before marriage

9. The date of solemnization :  
of marriage

10. Name of the person who :  
solemnized the marriage

11. Whether the marriage was :  
solemnized

a) In accordance with the :  
customary rules and  
ceremonies of either party  
to the marriage as required  
by section 7 of the Act.

b) In accordance with Section 7A :  
of the Act.

12. The place of solemnization of :  
the marriage

a) Village/ Town / City :  
Full Address

b) Taluk :

c) District :

13. We hereby declare :

- (I). that valued marriage was solemnized between as and that the marriage this capable of being registered under section 8 of the Hindu Marriage Act 1955 (Central Act 25 of 1955)
- (II). that the conditions laid down in section 5&7 of 7 A of the said Act have been satisfied.
- (III). that particulars given in the application are true to the best of our knowledge and belief.
- (IV). that the three witnesses to have signed below where present at the time of the solemnization of the marriage and
- (V). No Dowry was demanded given and taken

Signature of Husband

Signature of Wife

Station :

Date :

14. Name and address of Witnesses :

S.I. No. Name

Fathers name and  
full address

Signature