ROTA FOUNDATION

Reach Out to All

Section 8 License Number: 176331

80G Registered

NITI AAYOG Darpan ID: WB/2026/1001219

HOUSING ASSISTANCE APPLICATION FORM

Application No.: _____ Date: _____ / _____ / _____

1. APPLICANT INFORMATION

Full Name: _____

Father's / Husband's Name: _____

Date of Birth: _____ Gender: ☐ Male ☐ Female ☐ Other

National ID / Passport No.: _____

Mobile Number: _____

Email Address: _____

Current Address: _____

_____

Permanent Address: _____

_____

Monthly Household Income: _____ Number of Family Members: _____

2. CURRENT HOUSING STATUS (Please tick)

☐ Own House ☐ Rental House ☐ Living with Relatives

☐ Temporary Shelter ☐ Homeless ☐ Other: _____

3. TYPE OF HOUSING ASSISTANCE REQUIRED (Please tick)

☐ House Construction ☐ House Repair ☐ Roof Replacement

☐ Sanitation Facilities ☐ Water Connection ☐ Electrical Connection

☐ Other (Please specify): _____

4. DESCRIPTION OF NEED

_____

_____

_____

Estimated Cost: _____ Amount Requested: _____

5. DOCUMENTS ATTACHED (Please tick)

☐ National ID ☐ Income Certificate ☐ Property Documents (if available)

☐ Cost Estimate ☐ Photographs of House ☐ Bank Details

☐ Other (Please specify): _____

6. DECLARATION

I declare that all information provided is true. I understand that ROTA Foundation may verify the information before making a decision.

Applicant Signature: _____ Date: _____

7. FOR OFFICE USE ONLY

Application Received By: _____ Date: _____

Documents Verified: ☐ Yes ☐ No ☐ Yes ☐ No

Committee Decision: ☐ Approved ☐ Rejected ☐ Pending Date: _____

Approved Amount: _____ Officer Signature: _____

Remarks: _____

_____

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