









Deprivation Declaration for Poor Households

(Supplementary KYC Document & Undertaking)

Name c	of the Applica	nt:												
Aadhaar No. of Applicant:														
Dear LPO	king for availing Distributor, of Father/Hu	(1	Name	of a _l	pplica	nt), da	aughte	er/wif	e of		ina			
composi my appli	of applicant), ition) do not p ication for LPG	ossess or connect	mee ion ur	t any nder P	of the	follo	•				-	per n	•	mily
S. No.	Exclusion Criteria								Ye	s/No				
	I.	Sectio	n A: I	ncon	ne / E	mplo	ymen	t Rel	ated					
1	Any of the members of household earning more than ₹10,000/- per month.													
2	Paying professional Tax													
3	Paying Income Tax													
4	Household member is a Government employee.													
5	Household with non-agricultural enterprises registered with government.													
6	Possess Kisan credit card with credit limit of over ₹50,000/-													
		Se	ction	B: As	sset /	Wea	th Re	lated	ı					
7	Own more than 2.5 acres of irrigated land with 1 irrigation equipment.													
8	Own 5 acres or more of irrigated land for two or more crop seasons.													
9	Own at least 7.5 acres of land or more with at least one irrigation equipment.													









10	Own a house of more than 30 square meter carpet area (other than received through any government scheme).				
11	Own motorized 3/4-wheeler / fishing boat.				
12	Own mechanized 3/4-wheeler agricultural equipment.				
Section C: Existing LPG Connection Related					
13	Have Existing LPG Connection				

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief. I undertake that if any of above is found untrue/incorrect/false, the concerned Oil Marketing Company (OMC) would be well within its rights to withdraw the supply of gas/terminate my connection/seize the equipment/recover the subsidy amount transferred to my bank account/take legal action against fraudulent claims and that I would have no claim whatsoever against IOCL/BPCL/HPCL for such withdrawal/termination/seizure/forfeiture/recovery/legal action.

I hereby declare that the above is read out to me and explained by the distributor/his/her authorized person and I have understood the same.

Name & Signature of the Applicant
Name:
Sign:
Date:
Place:

Certification by Distributor

I confirm having received and verified the photocopies of documents submitted by the applicant against their originals.

Signature & seal of distributor: