ANNEXURE - A GOVERNMENT OF TELANGANA – AASARA PENSION SCHEME APPLICATION FOR SANCTION OF NEW OLD AGE PENSION

Dist	rict	
Mar	ndal /Municipality	
Grai	m Panchayat / Ward No.	Applicant Photo
Hab	itation / Street	
1.	Applicant Full Name (As shown in Aadhar)	
2.	Aadhar Number	
3.	Father's/Husband's Name	
4.	Address	
5.	Date of Birth (as per Aadhar) Age	
6.	Gender Male / Female	
7.	Social Category SC / ST / BC / Minority / Others	
8.	Bank Account No. IFSC Code	
	Bank Branch Mobile No	

Documents enclosed: Aadhar Card Xerox Copy

Declaration: I hereby declare that all particulars stated are true to the best of my knowledge and belief, and no material information has been concealed or misstated. I further state that if any inaccuracy is detected in the application, I shall be liable to forfeiture of any benefits derived and other action as per law.

Signature/Thumb Impression of the Applicant