

**APPLICATION FORM FOR RESERVATION OF ACCOMMODATION IN THE HOLIDAY HOME AT \_\_\_\_\_.**

1. Name of the Employee: \_\_\_\_\_
2. Designation: \_\_\_\_\_ A] Class III/IV: \_\_\_\_\_  
B] Gr. Rs. : \_\_\_\_\_ C] Rate of Pay Rs: \_\_\_\_\_
3. Department: \_\_\_\_\_ a] Place of Work: \_\_\_\_\_  
b] Railway : \_\_\_\_\_ c] Railway Tel No.: \_\_\_\_\_  
D] Division : \_\_\_\_\_
4. Date of Appointment : \_\_\_\_\_  
A} Date of Retirement : \_\_\_\_\_  
B} Bill Compelling Unit Office: \_\_\_\_\_
5. Whether coming on leave Yes/No: \_\_\_\_\_
6. Reservation Required from \_\_\_\_\_ to \_\_\_\_\_
7. State if alternative dates are acceptable in case of accommodation is not available for the dates applied for Yes/No \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_.
8. State if accommodation of the above, Holiday Home was availed in the previous year, if yes given year \_\_\_\_\_.
9. Particulars of family member to accompany the applicant:-

Sr. No.	Name (Shri/Smt.)	Relation	Age
1.			
2.			
3.			
4.			
5.			

I, request that on unit in the Holiday Home at \_\_\_\_\_ may be allowed for the bonafide use of self & family as particulars mentioned against Item No. 9 of the above proforma rules and conditions regarding occupation of the Holiday has been ready by me explained to mean and I agree to abide the same.

I also certify that either myself of any member of my family who will be accompanying me to the Holiday Home is not suffering from any infections diseases and the family members.

I agree to pay to the authority concerned prescribed charges in advances and hereby authorize my bill complying office to recover from salary the cost of any breaking of furniture's equipment of loss of any articles in the room that it be allotted for my use.

**Forwarded for necessary action**

**Signature of the Applicant**

**Signature & Design. Of the  
immediate Supervisor with  
Office Stamp**