

AFNHB PROCEDURE FOR TRANSFER OF HOUSE ON DEMISE OF ALLOTTEE

On demise of an Allottee, the widow, successor or the nominee shall forward an application countersigned by appropriate Authority along with the following documents:

- (a) Affidavit by Widow/Widower, Successor or Nominee - Appendix Q.
- (b) Indemnity Bond by Widow/Widower, Successor/Nominee - Appendix R.
- (c) Relinquishment Deed from the other Class I heirs of the deceased - Appendix S
- (d) Death Certificate
- (e) A copy of the pension payment order (for retired personnel)
- (f) No Dues / No Objection certificate from loaning agency, in case of loan availed by the deceased.

INSTRUCTION FOR FILLING UP APPLICATION FORM

1. ALL COLUMNS ARE TO BE MANDATORILY FILLED- UP.
2. COLUMNS THAT ARE NOT APPLICABLE / RELEVANT ARE TO BE CROSSED (X) OR MARKED 'NA'
3. PHOTOGRAPHS OF APPLICANT AND NOMINEE ARE TO BE PASTED ON THE APPLICATION FORM.
4. THE 'DECLARATION' IS TO BE MANDATORILY FILLED BY MARKING () OR CROSSED (X).
5. DETAILS OF EARLIER ALLOTMENT ARE MANDATORILY REQUIRED.
6. APPLICATION FORM FOR SERVING APPLICANTS IS TO BE COUNTERSIGNED BY THE CO.
7. COPY OF PPO IS TO BE ENCLOSED IN CASE OF RETIRED PERSONNEL.
8. WIDOWS ARE TO ENCLOSE CAUSALITY REPORT, COPY OF PPO AND DEATH CERTIFICATE.
9. APPLICATIONS WITH INCOMPLETE/INCORRECT INFORMATION WILL BE REJECTED.
10. REGISTRATION AMOUNT IS TO BE FORWARDED BY CROSSED DEMAND DRAFT ONLY. CHEQUE PAYMENTS ARE NOT ACCEPTABLE.



**USE ONLY THIS APPLICATION FORM
(No photocopy is valid)**

APPENDIX 'A'

(Refer Para 0403 Page 08)

APPLICATION FORM

Regn. No.....

The Director General
Air Force Naval Housing Board
Air Force Station
Race Course
New Delhi-110003.

Affix Passport
Size
Photograph
Applicant
Photo

Nominee's
Photo

Name of Scheme..... Type of DU.....

1. Service No. 2. Rank (Serving/Retired)
3. Name of Applicant.....
4. Father's/Husband's Name.....
5. (a) Correspondence Address.....
.....
.....PIN.....Tel (O).....(R).....(M).....
(b) Permanent Address.....
.....
.....PIN.....Tel (O).....(R).....(M).....
E-mail ID.....
6. (a) Date of Birth..... (b) Place of Birth.....
7. (a) Date and Type of Commission or Enrolment.....
(b) Length of Service..... (c) Likely Date of Retirement.....
8. For Retired Personnel / Widows / NOK of deceased personnel
(a) Date of Retirement / Death..... (b) PPO No. and Date.....
(Attach Proof) (Attach CTC)
(c) Years served..... (d) Nature of demise (harness/action)
9. Bank details : A/c No..... Name of Bank.....
Branch..... Address.....
10. (a) Nominee's Name and Relationship.....
(b) Nominee's Date of Birth.....
(c) Nominee's Signatures.....
11. PAN Card No. (a) Applicant.....(b) Spouse/ Nominee

Signature of Applicant

Place :

Date :

contd...

DECLARATION

1. I hereby declare that the particulars given at S.No. 01 to 11 on page one of Appendix 'A' are correct and that I have not willfully suppressed any material information. I understand that I will be disqualified from registration of my application and or allotment of Dwelling Unit, if at any time, any of the aforesaid particulars are found to be incorrect.
2. I have read the AFNHB Master Brochure, 'K' Broadcast or IG Messages, website, advertisement etc and have fully understood the contents and shall abide by the same.
3. I also declare that neither I nor my spouse or dependent children owns residential property at the city where Dwelling Unit is being sought.
4. I also undertake to acquaint and abide by all rules, instructions, terms and conditions and stipulations issued from time to time by AFNHB and also by the Central or State Government and other concerned authorities in respect of this Scheme.
5. I certify that I have not re-married **(in case of widows)**.
6. I/We certify that my spouse is not a service officer/is a service officer and has not allotted/or registered for any other scheme of AFNHB **(Strike out whichever is not applicable)**.
7. I/We certify that my allotment in any scheme in the past has not been cancelled by the Board.
8. I also declare that:
 - (i) Till date, neither I nor my spouse have been allotted a Dwelling Unit by AFNHB anywhere in India.

OR

(ii) I have been allotted a Dwelling Unit by AFNHB in the following Projects.

<u>Name of the Project</u>	<u>Sold/Retained</u>	<u>Regn. No.</u>
(a).....
(b).....
(c).....

*(Tickmark / Strickout whichever is applicable / not applicable)

9. I also declare that my allotment has not been cancelled in any earlier AFNHB Scheme and I have never been debarred earlier
10. I also declare that I shall participate in the formation of the registered Society or Association in the subject scheme and be a member of same in accordance with the Bye-laws as approved by the Board.

Signature of Applicant.....

.....
.....
.....

(Rank, Name and Service Number)

Place :

Date :

COUNTER SIGNATURE

(by CO / HOD for Serving Personnel only)

Affidavit Q

(to be filled up by the TRANSFEREE on demise)

(To be Notarised and Executed on Rs. 10/- Non-judicial Stamp Paper or such amount as applicable in the State where the individual is executing this document)

AFFIDAVIT

I/we, the deponent Mrs./Mr. _____ Widow / son / daughter of late _____ aged about _____ yrs, resident of _____ do hereby state and declare on solemnly affirm as under:-

1. That my spouse/father/mother late expired on at
2. That the said late during his life time was registered as a Registrant of the Housing Scheme sponsored by the Air Force Naval Housing Board at vide Regn No
3. That the said late is survived by the following Class I heirs:-
 - (a)
 - (b)
 - (c)
4. There are no other Class I heirs except as mentioned above.
5. The said late has nominated me as his nominee in respect of the above said registration.
6. The late had by his WILL dated found on his Service Records, has bequeathed all his property both moveable and immovable whatsoever, whosoever suited in my favour to the exclusion of all other Class I heirs. The deceased did not leave any other WILL.
7. That my latest photograph as well as the thumb impression has been duly attested as required.

Signatures
Thumb impression and signatures

Photograph
DEPONENT

VERIFICATION

I, the above named Deponent do hereby solemnly affirm and state that contents of my above Affidavit are true to the best of my knowledge and belief and no part of it is false and nothing has been concealed therefrom.

Verified at _____ on this _____ day of _____ 20

DEPONENT

I KNOW THE DEPONENT
EXECUTIVE MAGISTRATE or OATH COMMISSIONER or NOTARY PUBLIC

Appendix R

(to be filled up by the TRANSFEREE on demise)

(To be Notarised and Executed on Rs.100/- Non-judicial Stamp Paper or such amount as applicable in the State where the individual is executing this document)

INDEMNITY BOND

This Deed of Indemnity made this day of 20 by Mrs or Mr W/o or S/o or D/o resident of

WHEREAS my husband late was during his life time registered as Registrant of the Housing Scheme sponsored by the Air Force Naval Housing Board atvide Regn No.

That my husband late expired on at.....

That I on my own behalf and on behalf of my minor son or daughterdo hereby and hereunder agree to indemnify Air Force Naval Housing Board and at all time keep indemnified the Air Force Naval Housing Board of any possible claims or demands made or actions and proceedings, if any, commenced by any person or persons claiming through me or through late S/o Or any Class I heir of my late husband in respect of the property and also against all such cost, charges and expenses incurred by AFNHB for defending any such claims, action or proceedings.

Signature of Executor

(On his or her behalf and on behalf of
Master or Miss
Her minor son or daughter)

Witness:

- 1.
- 2.

Photograph

**TO BE ATTESTED BY
Executive Magistrate or oath Commissioner or Notary Public**

Appendix S

(To be Notarised and Executed on Rs.10/- Non-judicial Stamp Paper or such amount as applicable in the State where the individual is executing this document)

RELINQUISH DEED

This Deed of release and relinquishment executed by
son or mother or father or daughter of late aged about
years, resident of witnessed as follows :-

1. That my father or son late expired on
at

2. That the said late was during his life time registered as a
Registrant of the housing Scheme sponsored by the Air Force Naval Housing Board at
..... Schemes vide Regn No.

3. That my said late father or son is survived by the following Class I heirs.

(a)

(b)

(c)

4. That to best of my knowledge, the said late has
nominated Mrs / Mr as his nominee in respect of
the above registration.

5. That the said late was financing payments towards a
Dwelling Unit in the said project. Whereas his wife / son Mrs / Mr
..... she or he has applied to the Air Force Naval
Housing Board for transfer of registration to her or his name for getting the benefits of the said
Dwelling Unit as a legal heirs, and whereas I being one of the Class I heirs of the deceased do hereby
voluntary release and relinquish all my rights in respect of the claim regarding registration of my
deceased as stated above in favour of Mrs / Mr
..... I have absolutely no objection for the said Mrs / Mr
..... Getting transfer of registration and other benefits in respect of
the aforesaid Dwelling Unit in her or his name alone. I fully honour the WILL dated
.....executed by my late..... I will not claim
any right, title and interest in this behalf to that effect. I..... have
executed this Deed of release voluntarily on the day..... at

Executor or Release

Witnesses:

1. (Signature, Name and Full Address)

2. (Signature, Name and Full Address)

Photograph

ATTESTED

TO BE ATTESTED BY
EXECUTIVE MAGISTRATE or OATH COMMISSIONER or NOTARY PUBLIC