

INSTITUTE OF HOME ECONOMICS

(UNIVERSITY OF DELHI)

HRA DECLARATION FORM

1. I, (Name)
..... (Designation and office) declare as under:-
2. That I reside in the house located at
.....
..... (Full postal address), which belongs to me / my spouse / children / father / mother (strike off whichever is inapplicable and if it belong to any one other than self give the name and address of the aforesaid relation to whom it belongs) and I do not pay rent to anybody. I have been living in this house continuously from(date)
3. (i). I am living in a rented house situated within municipal limits of _____
(Name of city/Town) and incurring some expenditure on rent/contributing towards rent.
(ii). The portion of accommodation in respect of which house rent Allowance is claimed has not been sub-let/has been sub-let and the monthly rent which is received is Rs _____ p.m.
4. I am living in a house situated within municipal limits of _____(Name of city/Town) and owned by me/my wife/husband/children/father/mother/Hindu undivided family in which I am co-partner and pay /contributing towards house or property tax or maintenance of the house.
5. I certify that I am not sharing accommodation allotted to my parent (child) by the State/ Central Government, on autonomous public undertaking or semi- government organization such as municipality port etc. allotted rent free to another Government servant.
6. I certify that my husband/ wife/ children/ parents who is / are sharing accommodation with me are employees of the Central/ State Government / Autonomous public undertakings or Semi-Government organizations like municipality, port trust etc. is/ are not in receipt of house rent allowance from the Central/ State Government, autonomous public undertakings or Semi-Government organizations like municipality, port trust etc.
7. I am not living in government accommodation which has been allotted to another government servant.
8. I also certify that my wife/husband has not been allotted accommodation at the same station by the Central State Government organizations such as municipality, port trust etc.

Local Address _____

Dated _____

Signature: _____

Name: _____

Designation: _____

