

Application for New Lift Attendant Authorization

Applicant's Basic Information :

1. Salutation* : _____
2. First Name* : _____
3. Middle Name : _____
4. Last name* : _____
5. Date of Birth* : _____
6. Age : _____
7. Gender* : _____
8. Date of Application* : _____
9. Mobile No. : _____
10. Email : _____
11. Aadhaar Card No : _____

Home Address of Applicant :

12. Address Line 1* : _____
13. Address Line 2 : _____
14. Rural / Urban* : _____
15. Sub-Division* : _____
16. Block/Municipality/Corporation* : _____
17. Block/Municipality/Corporation Name* : _____
18. Village or Ward Name : _____
19. PIN Code* : _____
20. Post Office : _____
21. Police Station : _____
22. District* : _____
23. State* : _____
24. Country* : _____

Local Address of Applicant :

25. Address Line 1* : _____
26. Address Line 2 : _____
27. Rural / Urban* : _____
28. Sub-Division* : _____
29. Block/Municipality/Corporation* : _____
30. Block/Municipality/Corporation Name* : _____
31. Village or Ward Name : _____
32. PIN Code* : _____
33. Post Office : _____
34. Police Station : _____
35. District* : _____
36. State* : _____
37. Country* : _____

Details of experience :

From Date*:	To Date*:	Type and class of Lift operated*:	Nature of experience*:

Personal Description of Applicant:

38.Nationality:_____

39.Religion or caste : _____

40.Height:

Ft. _____

Inch: _____

41.Complexion : _____

42.Marks of peculiarity for identification : _____

Other Details :

Have you obtained any temporary Authorization to work as lift attendant? (Yes or No) * :

Authorization Number * : _____

Authorization Date * : _____

Issuing Authority : _____

Have you made any previous application in Form-III? : _____

Particulars of application (date of application etc.) : _____

List of Documents:

1. Age proof certificate.
2. Photo Identity proof (Voter Id / Aadhaar card).
3. A certificate from a registered medical practitioner regarding the applicant's physical fitness, mentally alert, good eyesight, good hearing.
4. A recent colour photograph (passport size) with applicant's signature.
5. Filled up Form III with signature & seal of authorized signatory of lift maintenance firm.

I hereby declare that the above information is true to the best of my knowledge and belief.

Signature: _____

Date of Application: _____