







## Supplementary KYC Document & Undertaking

## (To be submitted along with PMUY KYC Document)

(PS: To be published in vernacular languages)

Name of the Applicant:															
Aa	adhaar of the Applicant:														
	Undertaking for availing	ng LP	G con	nectio	n unc	ler Pra	dhan	Manti	ri Ujjw	ala Yo	jna				
Dear LPG Distributor,															
I,(Name of Applicant), daughter/wife of															
	(Name of Father/Husband) aged (Age of applicant) years, resident of														
			(Resid	dential	addre	ess of a	applica	ant), c	lo here	eby de	clare	that I a	ind my		
amily members (as per my family composition) do not possess or meet any of the following exclusion criteria.															
14 Point Declaration															
1)	Motorized 2/3/4 wheeler/fishing boat.						9) Household with non-agricultural enterprises								
2)	Pay professional tax.					registered with government.									
3)	Own Mechanized 3/4 - wheeler Agricultural equipment.					<ol><li>Own more than 2.5 acres of irrigated land with 1 irrigation equipment.</li></ol>									
4)	Dwell in 3 or more rooms with pucca walls and roof.					11) Any of the members of household earning more than Rs. 10,000/- per month.									
5)	Possess Kisan credit card with credit limit of over Rs 50,000/					<ol> <li>Own 5 acres or more of irrigated land for two or more crop season.</li> </ol>									
6)	Own a refrigerator.					13) Pay income tax.									
7)	Household member is a government employee.					14) Own at least 7.5 acres of land or more with at									
8)	Own landline phone.					least one irrigation equipment.									
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief. I undertake that if any of above is found untrue/ incorrect /false, the concerned Oil Marketing Company (OMC) would be well within its rights to withdraw the supply of gas /terminate my connection / seize the equipments / recover the subsidy amount transferred to my bank account and that I would have no claim whatsoever against IOCL/BPCL/HPCL for such withdrawal/termination/seizure/forfeiture/recovery.															
I hereby declare that the above is read out to me and explained by the distributor/his/her authorized person and I have understood the same.															
							Name & Signature of the Applicant								
							Name:								
							Sign:								
							Date:								
							Place	:							

**Certification by Distributor** 

I confirm having received & verified the photocopies of documents submitted by the applicant against their Originals.