FORMAT FOR TRANSFER OF DOMESTIC LPG CONNECTION / NAME CAHNGE M/s Jiten Gas (123, Chandra Nagar, Harjinder Nagar, Kanpur - 208007).

From: Name of the Transferor:			
Address of the Transferor:			
Subscription Voucher (SV) number:			No :
To: Name of the Transferee: -			
Address of the Transferee:			
Relationship with Transferor:			
Regularisation Type B:- Tro (Tick the appropriate Box) Type D:- Tro	ransfer by Subscriber to family ransfer Outside family ansfer Outside family ansfer without consent letter fr ansfer to next of kin in case of a agularization of connection (LPG	om Transferor Jeath of Subscriber	out possessing SV).
<u>Declaratio</u>	n by <i>Transferor (Strike off if No</i>	<u>ot applicable)</u>	
I Mr./Mrs/Ms, am to transfer the same to the Transferee. I in my name to Mr./Mrs/Ms at a later date on you in respect of the same	l hereby authorize you to har I her	ndover the security deby confirm that I wil	eposit amount held I not have any claim
Name	Signature	Date	Place
	ons by <i>Transferee / Regularize</i>		
I, Mr./Mrs/Ms that I will submit documents required equipment as per your terms and condit name <u>OR</u> issue Subscription Voucher in whichever is not applicable).	for the LPG connection, dep tions. I request you to transfer	osit security amount the above mentioned I	for loan of the LPG .PG connection in my
I hereby undertake to indemnify M/s respect of the LPG Connection transferr under.			
 I also affirm as under:- That I am not in possession of Li or in name of any of my family m That my household is independe That if any information/declarat availing this LPG connection wl Certificate etc., shall be found up Supply of Gas/Terminate the LP would have no claim, whatsoeved I hereby verify and confirm that what he material has been concealed there from the content of the possession of Li or in page 12. 	nembers residing with me in the ent of other households or kitch ion given by me in this underta hether in support of KYC/Ider ntrue or incorrect or false, IOC G Connection/Seize the Equipmer against the IOC for such with has been stated above is true to	e same dwelling unit. ens if any within the solution or any document of Birth/Release would be within its right ments/Forfeit the Secution/secutio	ame address. submitted by me for sidence Proof/Death this to Withdraw the irity Deposit & that leizure/forfeiture.
Name	Signature	Date	Place
I confirm having physically verified the al household with separate Kitchen at the a			•
Name of Visiting Distributor's Represente	ative		
Signature		— <i>Distributor's Seal &</i> Signature	