

**OFFICE OF THE DEPUTY COMMISSIONER  
TEZU  
JAN SUVIDHA**



**GENERAL :: PHOTO INNER LINE PASS :: GENERAL**

No. \_\_\_\_\_ (For office use only)       New      Date \_\_\_\_\_

1) Full Name (Block Letter)\*  
Shri/ Smt. /Mr. / Miss \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2) Father's/Husband's Name  
Son of / Daughter of / Wife of \_\_\_\_\_ Shri/ Late \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3) Permanent Address

Locality Address \_\_\_\_\_

\_\_\_\_\_

P.O. \_\_\_\_\_ P.S. \_\_\_\_\_

District \_\_\_\_\_

State/UT \_\_\_\_\_ Pin \_\_\_\_\_

3) Present Address

Care of Shri/ Smti \_\_\_\_\_

Locality Address \_\_\_\_\_

Village \_\_\_\_\_

P.O. \_\_\_\_\_ P.S. \_\_\_\_\_

District \_\_\_\_\_

5) Nationality (With Proof) \_\_\_\_\_

6) Age \_\_\_\_\_

7) Present occupation \_\_\_\_\_

8) Place of visit \_\_\_\_\_

9) Purpose of visit \_\_\_\_\_

No 10 for Renewal / Duplicate Cases only

10) Orginal Pass No \_\_\_\_\_

Date \_\_\_\_\_ Day        Month        Year

11) Contact No. ....

(APPLICANT'S NAME) \*\*

(APPLICANT'S SIGNATURE) \*\*  
(With Date)

\* Implies the person who requires the certificate  
\*\* Implies the person who has applied on behalf/self purpose

**UNDERTAKING**  
(To be submitted by the sponsorer / Local Guardian)

I Mr. /Ms. .... owner of T/L No. ....  
 a resident of village ....., Arunachal Pradesh do hereby declare that i have applied for  
 granting one photo Inner Line Prmit in respect of Mr/ Ms .....  
 S/o /W/o/ D/o ....., a resident of village .....  
 PO ....., PS....., District.....  
 State ....., (as per documentary evidence) to work under me as a  
 Shop Asstt. Under T/L No. .... / Cultivator  
 Assistant at my cultivation Land/other private work like .....

I shall bear entire responsibility for him, if he/she shall involve himself in any of antisocial activities under  
 any relevant Section (s) of Law and shall plead guilty as well as violates BEFR Act' 1873 infuture during his sta with  
 me for aforesaid works.

This undertaking is signed by me in good state of mind & sound health on this .....  
 Day of .....20.....

Name of sponsorer/ Local Guardian: .....  
 Village : .....  
 P.O/P.S : .....  
 District : .....  
 Arunachal Pradesh.

(Name of sponsorer/ Local Guardian)

VERIFICATION	
Date :	
Place :	<b>Signature with Seal</b> (ZPM/ASM/GPM/GB/ADMIN OFFICER)

**Enclosures**

1. Copy of 2 recent passport size photographs
2. Proof of Permanent Resident ship/ Citizenship :
  - \* PRC/Domicile Certificate
  - \* Caste/ Tribe Certificate
3. Proof of Identity :
  - \* Voter ID Card
  - \* Ration Card
  - \* Driving Licence
  - \* Passport
4. MINORS
  - \* Birth Certificate
  - \* Student ID Card
  - \* Father's/ Mother's ILP
5. Local Guardian or Sponsor's identity Proof
6. COVID-19 Vaccination certificate