

Subordinate Office Address Details

Note : Please read the Guidelines sent by Department before filling the form, in CAPITAL LETTERS in blue/ black ball point pen only. (Please avoid Short Forms and Abbreviations)

1. Name of the Office	<input type="text"/>
2. Designation of the Head of the Office	<input type="text"/>
Address of the Office	
3 (a) Street/Road/Lane	<input type="text"/>
3 (b) Landmark	<input type="text"/>
3 (c) Area/Locality/Sector	<input type="text"/>
3 (d) District	<input type="text"/>
3 (e) Mandal	<input type="text"/>
3 (f) Village/Town/City	<input type="text"/>
3 (g) PIN code	<input type="text"/>
3 (h) Telephone	<input type="text"/> (STD Code-Telephone No : 040-292010)
3 (i) Mobile number of the Head of the Office	<input type="text"/>
4. E-mail of the Head of the Office:	<input type="text"/>
5. HRA %	30% <input type="checkbox"/> 20% <input type="checkbox"/> 14.5% <input type="checkbox"/> 12% <input type="checkbox"/>