From:

_____,
_____,
_____,
Ph. No._____,
Dated:- _____

To,
The Director,
Directorate of Small Savings & Lotteries,
Altinho, Panaji, Goa.

Sub: Appointment of Agent under Small Savings Scheme.

Sir/Madam,

I would like to request you to kindly appoint me as Agent under Small Saving Scheme. I am an educated unemployed and would therefore like to take this opportunity to avail the agency under your Small Savings Scheme. My Bio-data is as under.

Name. _____

Age: _____

Married/Unmarried: _____

Education Qualification: _____

Language Known: _____

In support to my Bio-date & Education Qualification, I hereby enclose the following:-

1. Qualification Certificate

2. Marriage Certificate

3. Residence Certificate

4. Declaration

5. Birth Certificate

Kindly accept my request and grant me necessary Agency under Small Savings Scheme.

Thanking you,

Yours faithfully,

(_____)

# DECLARATION

**[To be furnished by the applicant for appointment
as SAS/MPKBY Agent alongwith the application]**

I, _____ W/o, S/o and D/o. Shri _____
resident of _____ solemnly affirm as under:-

1. That I am not an employee of the State Government/Central Government and Union Territory and undertake to inform the appointment authority and give up the agency whenever I enter such employment.

2. That none of my near relative is working in the Postal Department, in a non-gazetted capacity in the same Division where the agency falls.

3. That none of my near relative who is dependent on me is working in the Postal Department, in a non-gazetted capacity in the same state or Union Territory where the agency falls.

4. That none of my near relative who working in the National Savings Organisation in the same state or Union territory where the Agency falls.

5. That none of my near relative is working in the Postal Department of the National Savings Organisation in a gazetted capacity any where in India.

6. That I would apply for my renewal of agency in 45 days in advance.

7. That I would procure business myself.

8. That I would not sit in the Post Office. If I am found without any business in the Post Office, my agency may be terminated.

9. I further, declare that none of my near relative (i.e. my wife/husband, legitimate child or step child, father/step father, mother/step mother, brother/step brother, sister/step sister, father-in-law, mother-in-law, brother-in-law, sister-in –law, son-in-law or daughter-in-law), is employed under the Central or State/Union Territory Government.

## OR

10. I give below the particulars of my near relatives (i.e. my wife/husband, legitimate child or step child, father/step father father, mother/step mother, brother/step brother, sister/step sister, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law or daughter-in-law) who are employed under the Central or State/Union Territory Government.

| Sr. No. | Name of relative | Relationship with the applicant | Name and address of office where employed |
|---------|------------------|---------------------------------|-------------------------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

I attach the communications (s) in original form the Head(s) of Office/Department where the above mentioned person(s) is/are employed to the effect that there is no objection to my being appointed as Agent under the Standardised Agency System/MPKBY.

<div align="right">**DEPONENT**</div>

I verify that the affirmation made by me as above are correct to the best of my knowledge and belief and that no material facts have been concealed by me.

<div align="right">**DEPONENT**</div>

Signed in my presence
WITNESSES
1. Name & Address                                   2. Name and Address
   Signature _____                            Signature _____

_____

**[To be furnished by the applicant alongwith the application]**

<div align="center">**CONDUCT CERTIFICATE**</div>

Certified that Shri/Ms. _____ S/o, W/o, D/o _____ r/o _____ is personally known to me for the last_____ years (Not less than 2 years) and to the best of my knowledge and belief she is person of integrity and good conduct. He/She is not related to me.

Signature:
Name and Address:
Date:                                              Seal:

_____

<div align="center">**CONDUCT CERTIFICATE**</div>

Certified that Shri/Ms. _____ S/o, W/o, D/o _____ r/o _____ is personally known to me for the last _____ years (Not less than 2 years) and to the best of my knowledge and belief she is person of integrity and good conduct. He/She is not related to me.

Signature:
Name and Address:
Date:                                              Seal: