DR. KESAR SINGH RAWAT

FORM A

FORM OF APPLICATION FOR SEEKING INFORMATION UNDER RIGHT TO INFORMATION ACT YEAR 2005 (SEE RULE 3)

I.D. NO......

(For official use)

To,

PUBLIC INFORMATION OFFICER

DELHI URBAN ART COMMISSION, CORE 6A UG & FIRST FLOOR INDIA HABITAT CENTRE, LODHI ROAD, NEW DELHI-110003

1	Name of the	DR. KESAR SINGH RAWAT
	Applicant	JIW RESIRC SINGII RAWAI
2	Address of the applicant	CHAMBER NO. 503, LAWYERS BLOCK, SAKET COURT COMPLEX, NEW DELHI 110017
3	Particulars of	
	Information	Please provide the following information for CSDJ552/2020 IN THE COURT OF HON'BLE ADDITIONAL DISTRICT JUDGE SH.SANJEEV KUMAR-II, SOUTH DELHI Indu Rawat & Virender Singh Rawat v/s Kesar Singh Rawat Have some representation(s)/complaint(s)/Joint Complaint(s) been received from 1997 till by the DUAC against Smt. Indu Rawat Sr. Stenographer, DUAC. If yes, please make available duly certified copies of the same.
		2. Has comments/information/reply been
		furnished by DUAC in respect of the representation(s)/complaint(s)/Joint Complaint(s) to any quarter. If yes, please provide duly certified copies of the same along with all annexures. 3. Has any enquiry committee been constituted in the matter. If yes, please provide composition of the committee with full details of the

Chamber No 503, Lawyers Block, Saket Court Complex, New Delhi 110017 Ph:9899070887

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DR. KESAR SINGH RAWAT

		Chairperson/Members of the committee 4. Has the Inquiry Committee submitted its report? If yes, please provide a certified copy of the same.
A	Concerned department	PUBLIC INFORMATION OFFICER DELHI URBAN ART COMMISSION CORE 6A UG & FIRST FLOOR INDIA HABITAT CENTRE, LODHI ROAD, NEW DELHI-110003
В	Particulars of information required	Same as above
С	Period for which information asked for	1997 TILL DATE
4	Address at which the information shall be sent	DR. KESAR SINGH RAWAT CHAMBER NO. 503, LAWYERS BLOCK. SAKET COURT COMPLEX, NEW DELHI 110017

I state that the information sought does not fall within the restrictions contained in Section 6 of the Act and to the best of my knowledge it pertains to your office.

A Fee of Rs. 10/ has been deposited/affixed with this application in the office of the Competent Authority vide Postal Order No. 44 201702 and I undertake to pay the further deficient fee as required by the office.

Place: New Delhi Dated:-01st Mar 2021

> Signature of the Appl cant KESAR SINGH RAWAT

> > ADVOCATE