

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
DEPARTMENT OF TRAINING & TECHNICAL EDUCATION
MUNI MAYA RAM MARG, PITAMPURA
DELHI 110034
(ALLOTMENT BRANCH)

No. F.24 (04)/DTTE/Allot/2021/1143-46

Dated: 28/10/2021

OFFICE MEMORANDUM

Subject: - Inviting applications for Allotment of Type-I to Type-IV, Government Accommodation under DTTE Pool in Offline Mode.

This is for information of all Govt. employees of Department of Training and Technical Education, Govt. of NCT of Delhi that this Department has decided to invite application from eligible officers/officials working in DTTE, GNCTD, for allotment of Govt. Accommodation under DTTE Pool situated at various locations as per detail mentioned below in Offline Mode:-

Sl. No.	Location	Type of Govt. accommodation
1.	Meerabai Institute of Technology Residential Campus, Maharani Bagh Delhi.	Type-I, Type II and Type III.
2.	ITI Arab Ki Sarai, Residential Campus, Delhi, Nizamuddin, Delhi.	Type-I and Type II.
3.	Kasturba Institute of Technology Residential Campus, Pitampura, Delhi.	Type I and Type IV
4.	Ambedkar Institute of Technology Residential Campus, Shakarpur Extn., Delhi.	Type-IV
5.	Aryabhata Institute of Technology Residential Campus, Ashok Vihar, Delhi.	Type-III and Type-IV
6.	GBPIT Residential Campus, Okhla, Delhi.	Type-II, Type III and Type-IV
7.	ITI Shahdara Residential Campus, Delhi.	Type-I, Type II and Type III.
8.	ITI Pusa Residential Campus, Pusa, Delhi.	Type-I, Type II, Type III and Type-V

Terms and Conditions for allotment under DTTE Pool:-

- Allotment will be made on the basis of Allotment Rules of DTTE, as amended time to time/Policy of Allotment of Govt. accommodation as governed by PWD, GNCTD allotment rules.
- All desirous officers/officials of DTTE who are working in eligible offices/institutes can apply in prescribed Performa attached as Annexure-1 for allotment of Government accommodation under DTTE Pool.
- Applications (if any) sent to this office prior to 07.07.2021 i.e. the date of last HAC meeting shall not be considered and employee has to apply afresh.

4. Only those applications, which are received through the concerned Heads of Office in the prescribed enclosed Performa, will be entertained.
5. Applicants may give preference for particular localities. However, accommodation will be allotted subject to availability of accommodation.
6. All the columns of application Performa should be filled up properly, neatly and no column should be left blank.
7. Incomplete applications will not be considered and shall be rejected summarily.
8. Applications received after due date will not be considered.
9. Employees drawing salary in Level 1 to Level 14 in the pay matrix are eligible for allotment.


Last date for receiving application in this office is 26.11.2021. Application received after 26.11.2021 will not be considered.

You are requested to ensure that the contents of this letter are brought into the notice of all the eligible officials working in your institution/office so that interested officers/officials may apply timely for allotment of Government accommodation.

This issue with the prior approval of Competent Authority.

Yours faithfully,

Encl. : Prescribed Proforma


(SRI RAMAN C.)
SECTION OFFICER (ALLOTMENT)/L.O.

No. F.24 (04)/DTTE/Allot/2021/ 1143-46

Dated. 28/10/2021

Copy to:-

1. PS to the Secretary, TTE /Director, TTE
2. All Branch Officers, DTTE (HQ).
3. All Head of Institutions under DTTE
4. System Analyst, Computer Cell, DTTE (HQ) – with the request to upload the letter on the website of this Department for wide publicity.


(SRI RAMAN C.)
SECTION OFFICER (ALLOTMENT)/L.O.

GOVT. OF N.C.T. OF DELHI
DEPARTMENT OF TRAINING & TECHNICAL EDUCATION
ALLOTMENT BRANCH
MUNI MAYA RAM MARG, PITAM PURA, DELHI-88

Application for allotment of government accommodation under Directorate of Training & Technical Education, Allotment of Govt. Residence Rules

Part-I

(For Office use only)

Type for which Applied	Pool under which Applied	Priority Date *	Remark

Part-II

(To be filled up by the applicant)

- Please read instructions carefully before filling the form. Incomplete application will be rejected without any further reference.
- Please fill up the form neatly/preferably in BLOCK LETTERS.
- Fill up dates, e.g. days as (01-31), Months as (01-12) & Year as (20___), in the format.
- Please tick wherever required to do so.

1. Name (Mr./Mrs./Miss)					
2. Designation			GPF No./PRAN No.		
3. Name of Institute/Office from where salary is being drawn.					
4. Level in the Pay Matrix with scale as on date					
5.(a) Basic Pay as on date					
6. Date of Birth					
7(a) Date of regular initial appointment (For Type-I to Type-IV)					
7(b) Date of continuously drawing Level 12 & above in the Pay Matrix (For Type-V Category)					
7(c) Whether belongs to SC/ST/Ex-Service men Category. If yes, attach proof.					
8. Date of retirement on superannuating					
9. Service/Cadre to which employees belongs					
10(a) Are you on deputation	Yes		No.		
10(b) If yes, since the date		Duration of Deputation			
11(a) Marital Status					
11(b) Details of Spouse's employment					
11(c) Do you or your spouse Occupying accommodation allotted by Dte. of Estate / DTTE /Delhi Govt./or any other Govt. body. If yes Please Give details.		Allotter's Name & address			
		Type	Locality	Sector	Block
12. Are you debarred from allotment of Govt. residence?		Yes	No		
If Yes. up to which date					
13. Do you/your spouse/your dependent Children own a house within the jurisdiction of Legal Municipality or any adjoining Municipality? If yes, indicate.					
13(a) Owner			Relationship with the applicant		
13(b) Address of the house			Rental Income		
14. Pools available	General Pool		SC Pool	ST Pool	

Type	Eligible Level in the Pay Matrix Range	Please tick the Type applied for	Mention the Pool(s) under which applied GP/SC/ST
I	Level 1		
II	Level 2,3,4 & 5		
III	Level 6,7 & 8		
IV	Level 9,10 & 11		
V	Level 12 & above		
15. Are you applying on Medical Grounds/ Person with disability? (T.B. Cancer, Heart Ailments, Blind, Deaf, Person with disability). If Yes, enclose the attested photocopies of Ration Card/Latest Medical Certificates from Govt. Hospital/Disability Certificate.			Yes.
16. Address of place of duty of the Applicant:-			17. Permanent Address (If any):-
Phone No:-		Mobile No.:-	
18. Present Address :			
19. If you wish allotment in specific location only, please indicate three options giving Locality where allotment is to be considered.			
A		B	C

Declaration by the Applicants

A. I agree to abide by the Directorate Of Training & Technical Education allotment of Residences Rules-1978 as amended from time to time and relevant allotment rules of the Govt. of India, as applicable.

B. I am aware of the penalties, which can be imposed in the event of refusal of acceptance of allotment of accommodations of the entitled Type under SR-317-B-10 or furnishing of false information, subletting/misuse of the premises under SR-317-B- 21.

Date:-

Signature of the applicant

Part-III

To be forwarded by the employee's office

1. Flat No. _____ Type- _____ at _____ has been allotted by the Directorate of Estate/PWD/ Govt. agency to the applicant whose Level in the Pay Matrix is _____ as on date.

2. Certified that the particulars furnished by the applicant have been verified from records and found correct. It is also certified that the applicant is employed in an eligible office and has not been debarred from allotment of general pool accommodation.

Signature of Head of Office
with date and office seal

Name _____
Designation _____

GOVT. OF N.C.T. OF DELHI
DEPARTMENT OF TRAINING & TECHNICAL EDUCATION
ALLOTMENT BRANCH
MUNI MAYA RAM MARG, PITAM PURA, DELHI-88

Application for change of government accommodation under Directorate of Training & Technical Education,
Allotment of Govt. Residence Rules

Part-I
(For Office use only)

Type for which Applied	Pool under which Applied	Priority Date *	Remark

Part-II
(To be filled up by the applicant)

- Please read instructions carefully before filling the form. Incomplete application will be rejected without any further reference.
- Please fill up the form neatly/preferably in BLOCK LETTERS.
- Fill up dates, e.g. days as (01-31), Months as (01-12) & Year as (20___), in the format.
- Please tick wherever required to do so.

1. Name (Mr./Mrs./Miss)					
2. Designation			GPF No.		
3. Name of Institute/Office from where salary is being drawn.					
4. Level in the Pay Matrix with scale as on date					
5.(a) Basic Pay as on date					
6. Date of Birth					
7(a) Date of regular initial appointment (For Type-I to Type-IV)					
7(b) Date of continuously drawing Level 12 & above in the Pay Matrix (For Type-V Category)					
7(c) Whether belongs to SC/ST/Ex-Service men Category. If yes, attach proof.					
8. Date of retirement on superannuating					
9. Service/Cadre to which employees belongs					
10(a) Are you on deputation	Yes		No.		
10(b) If yes, since the date		Duration of Deputation			
11(a) Marital Status					
11(b) Details of Spouse's employment					
11(c) Do you or your spouse Occupying accommodation allotted by Dte. of Estate / DTTE /Delhi Govt./or any other Govt. body. If yes Please Give details.		Allotter's Name & address			
		Type	Locality	Sector	Block
12. Are you debarred from allotment of Govt. residence?		Yes		No	
If Yes, up to which date					

13. Do you/your spouse/your dependent Children own a house within the jurisdiction of Legal Municipality or any adjoining Municipality? If yes, indicate.					
13(a) Owner		Relationship with the applicant			
13(b) Address of the house		Rental Income			
14. Pools available		General Pool	SC Pool	ST Pool	
Type	Eligible Level in the Pay Matrix Range	Please tick the Type applied for		Mention the Pool(s) under which applied GP/SC/ST	
I	Level 1				
II	Level 2,3,4 & 5				
III	Level 6,7 & 8				
IV	Level 9,10 & 11				
V	Level 12 & above				
15. Are you applying on Medical Grounds/ Person with disability? (T.B. Cancer, Heart Ailments, Blind, Deaf, Person with disability). If Yes, enclose the attested photocopies of Ration Card/Latest Medical Certificates from Govt. Hospital/Disability Certificate.				Yes.	No.
16. Address of place of duty of the Applicant:-		17. Permanent Address (If any):-			
Phone No:-		Mobile No.:-			
18 (a) Details of presently allotted accommodation (Address & Date of Allotment):					
18 (b) Details of change of Government Accommodation, if any, availed in same type accommodation (address & Date of Change)					
19. If you wish allotment in specific location only, please indicate three options giving Locality where allotment is to be considered.					
A		B		C	

Declaration by the Applicants

A. I agree to abide by the Directorate Of Training & Technical Education allotment of Residences Rules-1978 as amended from time to time and relevant allotment rules of the Govt. of India, as applicable.

B. I am aware of the penalties, which can be imposed in the event of refusal of acceptance of allotment of accommodations of the entitled Type under SR-317-B-10 or furnishing of false information, subletting/misuse of the premises under SR-317-B- 21.

Date:-

Signature of the applicant

Part-III

To be forwarded by the employee's office

1. Flat No. _____ Type-_____ at _____ has been allotted by the Directorate of Estate/PWD/ Govt. agency to the applicant whose Level in the Pay Matrix is _____ as on date.
2. Certified that the particulars furnished by the applicant have been verified from records and found correct. It is also certified that the applicant is employed in an eligible office and has not been debarred from allotment of general pool accommodation.

Signature of Head of Office
with date and office seal

Name _____
Designation _____