



भाकृअनुप-राष्ट्रीय पशुरोग जानपदिक एवं सूचना विज्ञान संस्थान
ICAR-National Institute of Veterinary Epidemiology and Disease Informatics
रामगोंडनहल्ली, येलहंका, बेंगलुरु - 560064
Ramagondanahalli, Post Box No: 6450, Yelahanka, Bengaluru - 560064



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F.No.2-194/Estt/Quarters Vol-II/NIVEDI/2018-2019/

Date:28.06.2022

CIRCULAR


Two Type-IV Residential Quarters No. 1 & 2 (Ground floor) and Type-III Quarters No. 1 & 2 (Ground Floor) at ICAR-NIVEDI, Ramagondanahalli, Yelahanka, Bengaluru is lying vacant. The above Residential Quarters will be allotted amongst the eligible employees of this Institute/employees of other ICAR Institutes. Those who are interested to apply for the Residential Quarters may submit their application in the prescribed format to the undersigned on or before 07.07.2022. Incomplete application/applications received after the due date, shall not be entertained.

Eligibility criteria.

Type IV, Quarters No.1 & 2 (Ground Floor)	Level in the 7 th CPC pay matrix Level 9,10, 11 (Grade pay Rs.5400/- to Rs.6600/-)
Type III, Quarters No. 1 & 2 (Ground Floor)	Level in the 7 th CPC pay matrix Level 6,7,8 (Grade pay Rs.4200/- to Rs.4800/-)

Copy to:

1. All the Employees of ICAR-NIVEDI, Bengaluru
2. ICAR-IVRI, Hebbal, Bengaluru-24
3. ICAR-NBAIR, Hebbal, Bengaluru-24
4. ICAR-ATARI, Hebbal, Bengaluru-24
5. ICAR-NAINP, Adugodi, Bengaluru-560030
6. ICAR-NDRI, Adugodi, Bengaluru-560030
7. ICAR-NBSS&LUP, Hebbal, Bengaluru 560024
8. Officer In-Charge, Computer with request to upload in the Institute Website
9. Officer In-Charge, Estate ,ICAR-NIVEDI, Bengaluru
10. Notice Board.


(P. Murleedharan)
Administrative Officer
प्रशासनिक अधिकारी
Administrative Officer
निवेदी / NIVEDI
बेंगलुरु/Bengaluru

ICAR- National Institute of Veterinary Epidemiology And Disease Informatics (NIVEDI), Ramagondahanalli, Yelahanka Bengaluru-560064

Application form for Allotment/Renewal/Change of Government Accommodation

Sl No.	Particulars	Details of Employee
1	Name of the Applicant	
2	Post Held	
3	Office	
4	Basic Pay a) Grade pay	
5	Date of Commencement of Continuous Service a) Total Length of Service b) Date of Posting at the Station	
6	Type of Quarters a) Entitled -Type - b) Desired-Type-	
7	If already occupying quarters, Mention type and number of quarter Type- No-	
8	Reason for out of turn/ adhoc allotment	
9	Whether Married. If so, Whether husband/Wife has been allotted quarters	
10	Whether you have an own house at the station. If so, furnish particulars	

Declaration

I, _____ hereby agree to abide by the rules of allotment and conditions for the use of the accommodation allotted to me.

Station

Date

Signature of the Applicant.

Certified that the entries against column 1 to 5 and 7 to 8 have been verified and found to be correct.

Signature of the Pay Disbursing Officer

Recommendation of the Head of the Office.