

# HRA DECLARATION FORMAT

As on 1st January/July.....(Year)  
(Go. No. 97SE(B), Dt-07.03.2001)

## PART-A

I am Married/Unmarried/Widow/Widower: (Strike out which is not applicable)

1. Name of the office/School:.....
2. Name of the Employee: .....
3. Designation of the Employee: .....
  
- a) Employees' Present Pay (Band Pay+Grade Pay): .....
- b) HRA: .....
- c) Opted for Swasthyasathi? Yes /No
- d) Whether you get Swasthyasathi card? Yes /No
- If, Yes then write the no. of card.....

I do hereby declare that the details furnished in **PART-A** are true at the best of my knowledge.

Date: .....

.....  
Signature of Employee

## PART-B

My wife/husband is/was **not in service** under the Government of India or Government undertaking or any statutory/local body, educational Institute. (Strike out which is not applicable) **Or,**

My wife/husband is/was **in service** and following are the particulars of her/his employment and pay etc drawn by her/him: (Strike out which is not applicable)

- i) Name of the Spouse: .....
  
- a) Name of the office:.....
- b) Address of the Office:.....  
.....
- c) Spouse's Present Pay (Band Pay+Grade Pay):.....
- d) Spouse's HRA: .....
- e) Whether spouse is opted for Govt. Housing:.....
- f) Whether spouse is opted for W.B. Health Scheme:.....
- g) Whether spouse is opted for under Swasthyasathi Scheme: Yes /No

I do hereby declare that the details furnished in **PART-B** are true at the best of my knowledge.

Date: .....

Enclosed: Salary Certificate of Spouse

.....  
Signature of Spouse

Verified by

.....

S.I.S/HOI/HOO

.....  
Sign of HT/TIC with seal  
(In case of Primary Teachers only)