



CHANDIGARH ADMINISTRATION
CHANDIGARH POLICE



CHANDIGARH POLICE
WE CARE FOR YOU

LANDLOARD/TENANT INFORMATION

(To be filled in capital letters only)

1. **Landlord/Owner Information**

House No. _____ Sector/Village _____

Name of Owner _____ Since _____ Phone No. _____

Father/Husband Name _____

Permanent Address _____

_____ Distt. _____ State _____

Police Station _____ Phone No. _____ Occupation _____

Whether landlord residing in the House _____ Yes/No

If yes, furnish the following information.

(A) PARTICULARS OF FAMILY MEMBERS RESIDING WITH THE OWNER

Sr. No.	Name	Age	Sex	Relation	Occupation	Voter I-Card No.
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

(B) PARTICULARS OF VEHICLES OWNED BY LANDLOARD OR HIS/HER FAMILY MEMBERS

Sr. No.	Registration No.	Registered owner	Type	Make	Model
1.					
2.					
3.					
4.					
5.					

(C) WEAPON DETAILS

Sr. No.	Type/Make of Weapon	Bore	Valid Up to	License No,	Name of License Holder	Issue authority
1.						
2.						
3.						



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(D) PASSPORT DETAIL

Sr. No.	Passport No.	Name of Passport Holder	Date of Issue	Issuing Authority	Nationality
1.					
2.					
3.					

Having any servant or not _____(if yes, fill up Servant information form also)

Having tenants _____(if yes, fill up Tenant information form also)

Certified that the information given above is correct to my knowledge and belief and nothing has been concealed therein.

Name _____Signature _____Date _____

FOR KIND ATTENTION OF THE RESIDENTS OF CITY BEAUTIFUL

This form is being used by the Chandigarh Police to collect information from the residents of Chandigarh to help/check crimes and it is mandatory to furnish this information u/s 144 Cr.P.C. by order of district Magistrate Chandigarh and withholding the same is an offence u/s 188 Cr.P.C.

For any clarification contact your respective Police Station.

In case of any changes/addition, please inform in respective Police Station.

FOR USE OF POLICE STATION

Received on _____

PS Dairy No. _____

Authorized Signatory

Name _____

Rank _____

No. _____



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STATEMENT REGARDING TENANTS, FLOOR -1

Address_____ Tenants Name_____

S/o, D/o, W/o _____ Tenants since_____

Occupation_____ Tel. No._____

Vehicle No._____ Licensed Weapon (detail)_____

Originally from (permanent address), R/o Vill._____

Police Station_____ Distt._____ State_____

Both husband wife serving Yes/No. Husband Wife

Place of work_____

Time of day/Night house in unoccupied_____

PRITICULARS OF MAIL FAMILY MEMBER'S

Sr. No.	Name	Age	Sex	Relation	Occupation

STATEMENT REGARDING TENANTS, FLOOR -2

Address_____ Tenants Name_____

S/o, D/o, W/o _____ Tenants since_____

Occupation_____ Tel. No._____

Vehicle No._____ Licensed Weapon (detail)_____

Originally from (permanent address), R/o Vill._____

Police Station_____ Distt._____ State_____

Both husband wife serving Yes/No. Husband Wife

Place of work_____

Time of day/Night house in unoccupied_____



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PRTICULARS OF MAIL FAMILY MEMBER'S

Sr. No.	Name	Age	Sex	Relation	Occupation