

CHANDIGARH ADMINISTRATION **CHANDIGARH HOUSING BOARD**



FORM - XIII

To The Accounts Officer,

Chandigarh Housing Board,

| | Chandigarh. | | |
|-----------------------------|---|--------|------------------------|
| Subject: | - Application for transfer of D.U. to | Spouse | or Blood Relation. |
| 1. | Name of Allottee | : | |
| 2. | Father's/Husband's Name | : | |
| 3. | Detail of D.U. | : | |
| 4. | Registration No. | : | |
| 5. | Name of transferee | : | |
| 6. | His / Her relationship with the proposed transferee. | : | |
| 7. | Whether the D.U. stands mortgaged with a agency. If so, the details thereof | any : | |
| Date: - | | | Signatures of Allottee |
| List of Documents attached: | | | |
| 1 | | | |
| 2 | | | |
| 3. | | | |