## RACHAKONDA POLICE COMMISSIONERATE

## **FORMAT FOR INFORMATION OF TENANTS**

| Name of Landlord (<br>Occupation with   | (House Owner):                                                           |                                                              |                |               |  |  |
|-----------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------|----------------|---------------|--|--|
|                                         | none No:                                                                 |                                                              |                | of            |  |  |
|                                         |                                                                          |                                                              |                | Tella         |  |  |
|                                         | Phone No                                                                 |                                                              |                |               |  |  |
| PARTIC                                  | ULARS OF TENAN                                                           | T TO W                                                       | HOM PREMISES I | S LET OUT     |  |  |
| Name                                    |                                                                          | Father's Name                                                |                |               |  |  |
|                                         |                                                                          | Occupation with details of office Phone and Mobile Phone No. |                |               |  |  |
|                                         |                                                                          |                                                              |                |               |  |  |
| Family Members :                        |                                                                          |                                                              |                |               |  |  |
| Name:                                   |                                                                          | Age:                                                         | Occupation:    | Relationship: |  |  |
|                                         |                                                                          |                                                              |                |               |  |  |
|                                         |                                                                          |                                                              |                |               |  |  |
|                                         |                                                                          |                                                              |                |               |  |  |
|                                         |                                                                          |                                                              |                |               |  |  |
| Present Address                         |                                                                          |                                                              |                |               |  |  |
| Address of Previous and telephone No.   | s residence                                                              |                                                              |                |               |  |  |
| Permanent address a<br>Telephone number |                                                                          |                                                              |                |               |  |  |
| Passport, Driving Li                    | of the following ID pro<br>icense, Arms License,<br>Card, Income Tax (Pa | ,                                                            |                |               |  |  |

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## **FORMAT FOR INFORMATION OF TENANTS**

| Name of Landlord (Ho Occupation with     | use Owner):                                                                |                 |               |  |  |  |
|------------------------------------------|----------------------------------------------------------------------------|-----------------|---------------|--|--|--|
|                                          | e No:                                                                      |                 | of            |  |  |  |
| Address:                                 |                                                                            |                 |               |  |  |  |
|                                          | Phone No:                                                                  |                 |               |  |  |  |
| PARTICUL                                 | ARS OF TENANT TO W                                                         | VHOM PREMISES I | S LET OUT     |  |  |  |
| Name                                     | Fa                                                                         | Father's Name   |               |  |  |  |
|                                          | Occupation with details of office Phone and Mobile Phone No.               |                 |               |  |  |  |
|                                          |                                                                            |                 |               |  |  |  |
| Family Members :                         |                                                                            |                 |               |  |  |  |
| Name:                                    | Age:                                                                       | Occupation:     | Relationship: |  |  |  |
|                                          |                                                                            |                 |               |  |  |  |
|                                          |                                                                            |                 |               |  |  |  |
|                                          |                                                                            |                 |               |  |  |  |
|                                          |                                                                            |                 |               |  |  |  |
| Present Address                          | <u> </u>                                                                   |                 |               |  |  |  |
| Address of Previous re and telephone No. | sidence                                                                    |                 |               |  |  |  |
| Permanent address and Telephone number   |                                                                            |                 |               |  |  |  |
| Passport, Driving Licer                  | ne following ID proofs :<br>nse, Arms License,<br>rd, Income Tax (Pan No.) |                 |               |  |  |  |