



**AGARTALA MUNICIPAL COUNCIL  
CITY CENTRE – PARADISE CHOWMUHANI, AGARTALA  
TRIPURA-799001**

**APPLICATION FOR CLEARANCE CERTIFICATE IN RESPECT OF SANITARY/SULABH PIT LATRINE LOAN.**  
(Downloaded from the official website of Agartala Municipal Council)

To  
The Health Officer,  
Agartala Municipal Council,  
Agartala.

**Sub: -Clearance certificate in respect of Sanitary/Sulabh Pit Latrine Loan.**

Sir,

Kindly issue me a clearance certificate in respect of above subject, details particulars are given below.

- 1. NAME OF THE APPLICANT** :  
(Owner of the Holding)
- 2. FATHER'S/HUSBAND NAME** :
- 3.ADDRESS** :
- 4.MUNICIPAL HOLDING NO** :  
**WARD NO** :  
**HOUSE NO** :
- 5.WHETHER LOAN TAKEN**  
**(WITH DATE)** :
- 6.UPTO DATE TAX CLEARANCE**  
**RECEIPT.(XEROX COPY)** :
- \_\_\_\_\_

**DECLARATION**

I do hereby declare that the above information furnished by me is fully correct, I do hereby further declare that if information is proved to be false by application is liable to be rejected.

**SIGNATURE OF THE APPLICANT**

(Rs. 5/- to be paid during submission of this Application Form)