#### FORM A

#### (See rule 3(1))

# Application form for obtaining Information

#### I.D. No.

#### (For office use)

То

The Public Information Officer,

(Department/Office)

1. Name of the applicant :

2. Full Address

Place:

Date:

3. Particulars of Information required (in brief) :

4. I, hereby, state that the information sought is not covered under the categories which are exempted from disclosure of information under section 8 or under section 9 of the Right to Information Act, 2005 and to the best of my knowledge, it is pertaining to your Department/office.

5	*(1)	I have paid the fees Rs in words rupees
э.	(1)	on dt
		vide receipt no in the Department/office of

\*(2) I enclose herewith Demand draft/Pay order No.\_\_\_\_ Dt. drawn in favour of \_\_\_\_\_ Officer, issued by \_\_\_\_\_ Bank towards the fees payable.

\*(3) Non-judicial stamp of Rs. \_\_\_\_\_\_ is affixed on this application.

\*(4) I belong to B.P.L. family. Xerox copy of my card/required Certificate is enclosed herewith.

Signature of the applicant: e-mail address, if any:

Telephone No. (Office):

(Residence):

Full address of correspondence:

N.B. Person belonging to B.P.L. family need not pay any type of fees.

<sup>\*</sup> Strike out whichever is not applicable.

## FORM B (See rule 3(1)) Receipt of any application

From: The Public Information Officer,

(Department/office)

I.D. No.\_\_\_\_\_ Date:\_\_\_\_\_

 1.
 Received the application dated \_\_\_\_\_\_\_ in Form A, prescribed under sub-rule (1) of rule 3 of the Right to Information Rules, 2006 from Shri/Smt./Kum.\_\_\_\_\_, resident of

2. The information shall be provided within thirty days. In any case, if it is found that it is not possible to give the required information, a letter showing reasons thereof or rejecting the request shall be issued.

3. The applicant may contact the undersigned during 11.00 a.m. to 1.00 p.m. on dt. \_\_\_\_\_\_\_. (here mention the date not later than thirty days from the date of the receipt of an application).

4. In case of failure to remain present on the stipulated date by the applicant, the Public Information Officer shall not be held responsible for delay in providing information.

5. The applicant shall be required to deposit the outstanding amount of fees or charges, if any, prior to collection of the information or the documents.

( ) Public Information Officer: Name of the Department/Office: Telephone No.: e-mail: Website:

7 3

## FORM C

(See rule 3(2))

## Intimation to applicant to deposit fee and charges for required information and/or documents

To Shri/Smt./Kum.\_\_\_\_\_ Address:\_\_\_\_\_

Sir.

With refer	rence to	your	reque	est/ap	plicatio	n dt.			(1.D.No		dtd.
	),	I	am	to	state	that	you	are	required	to	deposit
Rs.		(in	word	ls R	upees	2. A LA LA LA					
only) for required	informa	tion a	and d	ocun	ients so	ught fo	or. It is	requ	ested to obt	ain th	ne copies
of the required int	formatior	/doc	umen	ts afi	ter depo	siting t	he amo	unt in	this Depar	tmen	t/office.

(1)	Total No. of pages x Rs. 2 per page	Rs.	
	A3, A4 size		
(2)	Total No. of Large size pages	Rs.	
	(except A3, A4 size) x Rs. 3 per page		
(3)	Photo x Rs. 10 per photo	Rs.	
(4)	Floppy/CD charges x Rs. 50 per piece	Rs.	
(5)	Charges for inspection of record	Rs.	
(6)	Charges for sample/Model	Rs.	

Total Rs.

Yours faithfully,

( ) Public Information Officer: Name of the Department/Office: Telephone No.: e-mail: Website:



## FORM D

(See rule 4(1))

#### Supply of information to the applicant

The Public Information Office	r.	
(Department/Office)		
No:	Date:	
То		
Shri/Smt./Kum		
Address:		
Sir,		
This is with reference	to your application dated:	(I.D. No.
date	) requesting for supply of	of information.
2. Details of required info	ormation is enclosed herewith.	
3. Out of the required inf	ormation sought for/ the partial info	rmation is supplied
as under:		
(1)		
(2)		

4. With reference to your request for supplying information, the following information/documents cannot be supplied for the following reasons:

	1.	
	2.	
	3.	
	4.	· · ·
5.	If you are aggrieved	by the above decision, you may prefer an appeal to
		within thirty days from the date of receipt of the

decision.

(3) (4)

From:

6. The information has been given to you on the basis of your belonging to the BPL family and you cannot use this facts anywhere in proving yourself of BPL family and this cannot be used in other objectives.

Yours faithfully,

*N.B.:* Pl. specify, Name/Address of the appellate Authority

> Public a formation Officer: Name of the Department/Office: Telephone No.: e-mail:

Website:

strike out whichever is not applicable.

9

#### FORM E

#### (See rule 4(2))

### Transfer of application pertaining to other authority

From:

Public Information Officer

\_\_\_\_\_Department/Office

Address:\_\_\_\_\_

No:\_\_\_\_\_ Dt.\_\_\_\_

То

Shri/Smt.\_\_\_\_\_ (Public Information Officer)

Department/Office

Address:

Sir,

Please find enclosed herewith an application from Shri \_\_\_\_\_ dt. (I.D. No. \_\_\_\_), for the reasons stated below:

Required information does not fall within the jurisdiction of this Department/office. As it falls within the jurisdiction of your Department/office, the same is transferred herewith to you for further necessary action.

It is certified that the applicant has paid Rs. \_\_\_\_\_ (Rupees only) on account of fees/charges for obtaining required information, which has been credited in the Government treasury/account.

Yours faithfully,

( ) Public Information Officer: Name of the Department/Office: Telephone No.: e-mail: Website:

Copy to:

To

Shri/Smt/Kum.

(Applicant)

As your application pertaining to required information doesn't fall within the jurisdiction of this Department/office, it has been transferred to the Public Information Officer having jurisdiction. You are requested to contact the Public Information Officer mentioned above.

Public Information Officer

#### FORM F

### (See rule 4(1)) Order of rejection of Information

From:	
Public Information Officer	
Department/Office	
Address:	
No.:	_ Dt.:
Te	
То	
Shri/Smt./Kum	
Address:	

Sir,

With reference to your application dated:\_\_\_\_\_\_ I.D. No. \_\_\_\_\_\_ requesting for supplying information, I am to state that \_\_\_\_\_\_:

1. The information requested cannot be provided for the following reasons:

The information requested falls within the exempted categories under sub- rule (.....) of section 8 or under section 9 of the Act.

If you are aggrieved by the above decision, you may prefer an appeal to
 \*\_\_\_\_\_\_ within thirty days from the date of receipt of the decision.

*N.B.:* Pl. specify, Name/Address of the Appellate Authority

Yours faithfully,

( ) Public Information Officer: Name of the Department/Office: Telephone No.: e-mail: Website:

#### FORM G

(See rule 6(1)) Form of First Appeal

> I.D. No. Date: (For office use)

To

The Appellate Authority (Department/office)

Sir.

As I have not received any decision/As I am aggrieved by the decision of the Public Information Officer\_\_\_\_\_\_, I, hereby file this appeal. The particulars of my application is as under:

- I. Name of the Appellant:
- 2. Address of Appellant:
- 3. (A) Name of the Public Information Officer: Address of Public Information Officer:
  - (B) Department/office and address:
  - (C) Particulars of the decision against which the appeal is preferred including the No. & Date of such decision.
- 4. Date of application submitted in the Form A:
- 5. Details of Information:
  - (1) Information asked for
  - (2) Period for which information is sought
- 6. Date as on completion of thirty days after submitting
  - application in Form A.
- 7. Reasons for Appeal
  - (A) No decision is received within thirty days of submission of application in **Form A**
  - (B) Aggrieved by the decision of Public Information Officer Dated:
- 8. Ground for appeal. Brief facts of the case.
- 9. Last date for filing the appeal:
- 10. Prayer/reliefs sought for:

I hereby state that the information and particulars given above are true to the best of my knowledge and belief.

Place: Date: Name of appellant Signature of appellant: Full Address of correspondence: e-mail address, if any: Telephone No.(Office): Residence:

 cut from here
Acknowledgement

From:

Public Information Officer

\_\_\_\_\_Department/Office

Address:\_\_\_\_\_

I.D. No.

Date:

 1. Received an appeal application of Shri
 \_\_\_\_\_\_\_a resident

 of
 \_\_\_\_\_\_in Form G prescribed under sub 

 rule (1) of rule 6 of the Bihar Right to Information Rules, 2005.

Signature of the receipt Clerk Office of the Appellate Authority: Telephone No.: e-mail: Website:

By order and in the name of the Governor of Bihar

)

Deputy Secretary, Personnel & Administrative Reforms Department Government of Bihar

#### FORM H

### Format for Information to be obtained from any section of the same Public Authority

From:	
Public Information Officer	
Department/Office	
Address:	
Letter No.:	Date.:
То	
Shri/Smt./Kum	
Section Officer/Under Secretary:	
Section:	

Sir,

The application of Shri/Smt./Kum. \_\_\_\_\_ I.D. No. \_\_\_\_\_ I.D. No.

The desired information relates to this department, but it is available in your section..

Hence, desired information may kindly be made available immediately.

Yours faithfully,

( ) Public Information Officer: Name of the Department/Office: Telephone No.: e-mail: Website:

## Schedule-1

# **Rates of Fees**

S1.	Details of the	Amount of Fees			
No.	Information sought				
1	Application fee for	Rs. 10/- (Ten) per			
	providing information	Application.			
2	Other				
	Information/Records:				
	(a) Information on				
	(i) A4, A3 size paper	Rs. 2/- (Two) per page			
	(ii) Bigger size paper	Actual cost incurred on photo			
		copying on such bigger paper			
	(b) Sample, Model,	Actual cost incurred			
	Photograph				
Note:-		escribed by the concerned			
		he sample or model shall be			
	followed.				
	(c) Perusal of	No fee for the first hour;			
	Records	Rs. 5/- (five) per hour and			
		its part there after.			
Note:- Wherever such system or procedure already exists,					
the current rate of fee for the perusal of records					
shall continue, and the rate above mentioned shall					
not apply.					
	(d) Information in	Rs.50/-(Fifty) per Floppy			
	Floppy/CD wherever	or C.D.			
	possible				
	The Appellate Authority shall charge Rs.50/-				
3	The Appellate Authorit	y shall charge Rs.50/-			