

Application Form under Right to Information Act, 2005

**To: The Public Information Officer
Coastal Aquaculture Authority
Department of Animal Husbandry, Dairying & Fisheries
Ministry of Agriculture
Shastri Bhawan Annexe (Second Floor)
Chennai – 600 006
Tamilnadu, India**

1. a) Full Name of the applicant in (block letters): Mr/Ms/ Dr
b) Father's /Husband's Name:
2. a) Applicant's contact address:

b) Telephone No/ Fax No. if any:
c) E-mail address, if any:
3. Whether the applicant is an Indian Citizen:
4. Description of information:

Particulars of Information required
may be attached with this application form if the
content is more

Period to which the information
relates.(Maximum period in each
application should not exceed three
years)

5. Whether the information sought is to be supplied
- a) In printed form/ fax : Yes/ No
- b) In Diskette/ Floppy/ Email : Yes/ No
- c) Whether inspection of work documents records is also sought. If yes, please give particulars : Yes/ No
- d) Whether the information is required by post or in person :
- 6) Whether the applicant belongs to Below Poverty Line (BPL) category : Yes/ No
- i) If yes, proof thereof:
- ii) If no, mode of payment of Rs. 10/- in Cash vide Cash Receipt No..... Dated (attached) or DD or Pay Order No.....dated.....(attached) Of Rs..... Drawn in favour of COASTAL AQUACULTURE AUTHORITY, PAYABLE AT CHENNAI.

Signature of applicant

Place:

Date: