## **IMPORTANT – Duly Filled hard copy submission is mandatory.**

## Annexure 1

## **Application Form**

## (Hard copy submission)

Date o	f App	lication:				
Name	of Ap	oplicant :				
If app	lican	t is Employee of NM (If Yes) the		y/Gr. Noida Authorit	y or Family mer	nbers
	a)	Name of Employee_				
	b)	Employee No		(Please enclose the	Copy of ID card)	
	c) Whether permanent/Deputation/contractual				· · · · · · · · · · · · · · · · · · ·	
	d)	Designation				
	e)	Name of the Department where Employee is posted				
Local A	Addre	ess of correspondence	:		· · · · · · · · · · · · · · · · · · ·	
Contact Numbers:			: Landline:	Mobile	e:	
Email			:			
Type o			Pre wed	celebration ding celebration nilar celebration (Pleas	e specify)	
List of	Socia	al Media Handles/Channe	els of Applicant			
	a)	Linked				
	b)	Instagram				
	c)	You Tube Channel				
	d)	Facebook				
	e)	Twitter				
Name	of	the person (whose applicant	event is celebra	ated)	_and relationship	with
List of	Socia	al Media Handles/Channe	els of person (Whose	e event to be Celebrate	ed)	
	a)	Linked				
	b)	Instagram				
	c)	You Tube Channel				
	d)	Facebook				
	۵۱	Twitter				

Synopsis/ detailed description of event	:
(Attach additional sheet if required)	
Name of Coordinator :	
Local Address of correspondence	
Contact Numbers:	: Landline: Mobile:
	<del></del>
Email	·
Proposed Location "Category"	: Category 1
	Category 2
	Category 3
	Category 4
Proposed Station in Category 2/4	:
(If Applicable – Sector 51/ Depot)	
Proposed date and time of booking	:
Total Number of People :	
Food and Beverage provisions	:
List & Type of Items (Planning to bring)	:
Additional Requirements (if any)	:
To be Filled by NMRC	
Priority No:	
Details (Amount) of License fees	:
Details (Amount) of Security Deposit	:
	Undertaking
•	on accurately reflects the event as proposed, and that I have fully adition. If the event is approved, I (along with my group) agree to his event.
Name of the Applicant:	
Signature:	
Contact Number:	
Email:	