Application fee: Rs.10

Application form fo	r seeking information under The	Application fee: Rs.10
	Sinder The	Right to information Act, 2005
The Public Information	Officer/	Date 26 07 202)
Asstt. Public Information	n Officer	Serial No.
Greater Noida Industria	Development-Authority,	HOSTHER OF CHEST
Greater Noida – 2013	INS (LLD)	1 Poorts ONE
Sir,		
Sir, I hereby request you to provide following information under Right to Information Act, 2005 in		
respect of Greater No	ida Industrial Development Author	under Right to Information Act 2005 in
Particulars of inform	ation required (All field	ity. 2000 III
Particulars of information required (All fields are mandatory): (i) Subject matter & Description of information required (ii) The period to		
(i) Status / Result of the representation dated 13 10 2016 (Parket)		
your office on 17 to 2016) and D. To 2016 (Recieved in) Illion relator		
(Recieved in your office of	From 2014	
Tarun Adarwala of Hon This Ulin Sinha and HMJ		
made by the applicant to	your good self in respect of Plot bearing	
your end and to do the no	addition necessary compliance at	
(ii) What action has been to subsequent letter.	aken on the above said representation and	1
		Grate (1)
(iii) Whether informati	on is required by:	000
Ordinary Bosist	harges shall be included in additional	fees) In Person
		ni Ferson
your end and to do the needful. (ii) What action has been taken on the above said representation and subsequent letter. (iii) Whether information is required by: Post (The actual postal charges shall be included in additional fees) Ordinary Registered Speed (iv) Please enter any one of the following: PAN card No.: Voter's card No.:		
PAN card No.:		- 29. 1
Voter's card No.:		
Passport No.:		
Ration card No.:		
I hereby declare and co	onfirm that I am an Indian air	
I hereby declare and confirm that I am an Indian citizen and as such I am entitled to seek		
I assure and conform that in any case or/and under any circumstances, I shall not (allow/cause) manner which would be detrived.		
manner which would be detailed the information received with any manner which would be detailed.		
manner which would be detrimental to/against the information received, with any person or in any turns out to be incorrect or false, I shall be responsible and liable for consequences apart from		
losing right to receive info	rmation	nd liable for consequences apart from
		apart nom
Signatural 2817 201		
Signature of applicant		
Place: DELMI		Data Octobra
Full name of the applicar	nt (Fill in Block letters):	Date 26/07/2022
Surname SYED	First Name	
J/ED	NAVED	Second Name
Address:		FAISAL
House No./Bldg.Name	1677	
Street Name/Area	1933 GALI QA	SIMJAN
City & Pin Code	BALLIMARAA	
Telephone E-mail	DELHI- 11000	C 41.
		0 #
Reference: (For Office Use)		
GNOIDA/RTI/	Received by:	
□ Personally □ Post □ F-mail		
Sign and Name of receiving officer		