

Important

File No. - A. 29011/1/2017-Admn.I
The National Institute of Health and Family Welfare

Dated: 23-02-2018

Circular

As per CCS CCA Conduct Rule 1964, 18 (3) Where a Government servant enters into a transaction in respect of movable property either in his/her own name or in the name of the member of his family, He/She shall, within one month from the date of such transaction, report the same to the prescribed authority, if the value of such property exceeds two months' basic pay of the Government servant.

2. Provided that the previous sanction of the prescribed authority shall be obtained by the Government servant if any such transaction is with a person having official dealing with him/her.

Explanation I. For the purposes of this rule –

- (a) The expression "movable property" includes Motor cars, motor cycles, Bikes etc. or any other means of conveyance

3. From the records maintained by Workshop and Maintenance Office regarding issue of parking stickers for vehicles, it has been noticed that several officers in the Institute have been issued parking stickers for vehicles in their on name or their family members but they have not given any information to the Authority regarding such transactions in respect of movable property.

4. Therefore all employees of the Institute are directed to furnish information in respect of movable property like purchase of Motor cars, motor cycles etc. within 15 days from the issue of this Circular in prescribed Performa, along with justification for not providing there information so far, failing which administrative action as deemed fit, will be taken as per relevant rules. However, those who have already furnished their information are advised to forward the copy of acknowledgement issued to them by Administration Section.

5. A new series of parking stickers are prepared to be issued by the Institute to facilitate and regulate the entry/exit/parking of vehicles in the Institute's premises (Office/residential). The information is required to be furnished in the prescribed Performa immediately latest by 5th March, 2018.

6. This issues with the approval of the Director, NIHFw.



(Anil Kumar)
Dy. Director (Admn.)

Enclose: As above.

Copy to:

- All Group 'A' and 'B' Employees of this Institute.
- All Group 'C' Employees of the Institute if having movable property like purchase of Motor cars, motor cycles etc. and the value of such property exceeds two months' basic pay of the Government servant:

Copy for information to:-

→ PS to Director (NIHFw)

→ Computer Centre (To uploading to the institute's website)

**FORM FOR GIVING INTIMATION OR SEEKING PREVIOUS
SANCTION UNDER RULE 18(3) OF THE CCS (CONDUCT) RULES,
1964 FOR TRANSACTION IN RESPECT OF MOVABLE
PROPERTY.**

1. Name of the Govt. Servant :
2. Scale of pay and present pay :
3. Purpose of application-sanction for transaction/intimation of transaction :
4. Whether property is being acquired or disposal of the property :
5. (a) Probable date of acquisition or disposal of the property :
(b) If the property is already acquired/ disposed, actual date of transaction :
6. (a) Discription of the property i.e.Car/ Scooter/Motor Cycle/Refrigerator/Radio/ Radio gram/Jewellery/loans/Insurance policies etc. :
(b) Make, Model and also registration No. in case of vehicles, where necessary :
7. Mode of acquisition/disposal (purchase/ sale of gift, mortgage, lease or otherwise) :
8. Sale/purchase price of the property (Market value in the case of gifts) :
9. In case of acquisition, source or sources from which financed/proposed to be financed:
(a) Personal savings :
(b) Other sources giving details :
10. In the case of disposal of property, was requisite sanction/intimation obtained/given for its acquisition?
(A copy of the sanction/acknowledgement should be attached) :

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11. (a) Name and address of the party with who transaction is proposed to be made/has been made :
- (b) Is the party related to the applicant? If so, state the relationship. :
- (c) Did the applicant have any dealings with the party in his official capacity at any time or is the applicant likely to have any dealings with in the near future? :
- (d) Nature of officials dealing with the party
- (e) How was the transaction arranged?
(Whether through any statutory body or a private agency; through advertisement or through friends and relatives. Full particulars to be given) :
12. In the case of acquisition by gifts, whether sanction is also required under Rule 13 of the ccs (conduct) Rules, 1964 :
13. Any other relevant fact which the applicant may like to mention :

DECLARATION

I, _____ hereby declare that the particulars given above are true, I request that I may be given permission to acquire/dispose of property as described above from/to the party whose name is mentioned in Item 11 above.

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OR

I, _____ hereby intimate the proposed acquisition/disposal of property by me as detailed above. I declare that the particulars given above are true.

Station: _____

Signature: _____

Date : _____

Designation _____

Note 1. In the above form different portions may be used according to requirement.

Note 2. Where previous sanctions are asked for, the application should be submitted at least 30 days before the proposed date of the transaction.

Performa for providing vehicle particulars

1. Type of Vehicle: Two/Four wheeler (Pl ___ tick)
2. Make/Model of Vehicle: (Company_____ model_____/Year_____)
3. Vehicle Registration Certificate (RC) No. _____ date of issue _____
4. Vehicle Registered at: _____ (Name of Motor Licensing Officer)[MLO]
5. Vehicle Registered in the name of Mr/Ms/Dr: _____
6. If not in Employee's name, please provide details of person & relation

7. Address: - _____

(Please attach a self attested copy of RC and Address Proof)

Declaration

I hereby declare that the aforementioned vehicle particulars are true and correct to the best of my knowledge and I shall be liable to be responsible for any concealment of facts/wrong reporting, as deem fit, by the NIHFV Administration.

- Enclosure: 1) RC's Copy
2) Address Proof copy
[Both self attested]

Signature _____
Name _____
Designation _____
Deptt. _____
Office address _____
Phone _____
Mobile _____
Email _____

Date: