No. N-11027/19/2015-HFA.1/Vol-2 (FTS-13988)

Government of India
Ministry of Housing & Urban Poverty Alleviation
(HFA-4 Division)

Nirman Bhawan, New Delhi Dated the January June, 2016

To.

All States/UTs
[Chief Secretaries (List-I)/Secretaries (List-II)]

Subject: Amendments in the Guidelines of Pradhan Mantri Awas Yojana (PMAY)-HFA (U) Mission – reg.

Sir/Madam,

I am directed to refer to this Ministry's communication No. N-11026/06/2014-PPG/FTS-11733 dated 26th June, 2015 intimating therewith launch of PMAY-HFA(U) Mission. The Scheme Guidelines were also circulated therewith. Some amendments made in the Guidelines were subsequently circulated vide this Ministry's letter No. N-11027/19/2015-HFA-I/FTS-12985 dated 22.09.2015 and vide letters of even number dated 9th November, 2015 and 25th May, 2016.

2. In continuation of these communications, I am directed to say that following amendments have been carried out in the PMAY (U) guidelines:

(a) In Annexure 7A, 7B, 7C and 7D:

1) No. house constructed/acquired Please specify ownership (any of these):

a. [Joint: 01, Female: 02, Male: 03, Transgender: 04]

2) No. of Beneficiaries covered in project:

a. [Male: 01, Female: 02, Transgender: 03]

b. Persons with disability

3) Number of Locations covered in project:

Name of Location	No of beneficiaries	Whether slum/Non slum (y/n)	If y, 1 if notified, 2 if recognised and 3 if identified	If slum, whether it gets completely rehabilitated(y/n)

(b) In Annexures 4A and 4B

Whether the family owns any house/residential land anywhere in Indiaremove word "Residential Land"

Contd.....2/-

(c) In Annexure 8

- 1. The physical progress hereafter shall be tracked location wise in a project. Therefore, during final installment claim, another column of number of slums rehabilitated and number of slums de-notified should be added in each component.
- 3. The changes have been incorporated in the relevant Annexures and enclosed herewith for information.
- 4. **In para 16.6 of the Scheme Guidelines,** the word "may" to be replaced by the word "will". Paragraph 16.6 will now be as follows:-

"State Level Appraisal Committee (SLAC) will be constituted by the State /UT for techno-economic appraisal of DPRs submitted by ULBs/Implementing Agencies. SLAC will submit their appraisal reports with their comments and recommendations to the SLNA for taking approval of SLSMC."

Yours faithfully,

(S. K. Valiathan)
Deputy Secretary to the Govt. of India
Tele No.2306 1206

Copy to:

1. Members of the CSMC (As per List-III).

Copy to:

1. Secretaries of the Central Ministries/Departments (As per List-IV).

Copy for information to:

- 1. PMO [Ms. Debashree Mukherjee, JS], South Block, New Delhi-110011.
- 2. The Joint Secretary (PP), Ministry of Minority Affairs, Room No. 1125, 11th Floor, Paryavaran Bhavan, CGO Complex, New Delhi
- 3. Joint Secretary (PF), M/o Finance (D/o Expenditure), North Block, New Delhi
- 4. Joint Secretary (UT), Ministry of Home Affairs, North Block, New Delhi

Copy to (Officers in the Ministry of HUPA & its Organizations)-

- 1. PS to Hon'ble Minister (UD, HUPA & PA)
- 2. PS to Hon'ble Minister of State (UD, HUPA & PA)
- 3. PS to Secretary (HUPA)
- 4. JS & FA, M/o UD & HUPA, Nirman Bhawan, New Delhi

- 5. Joint Secretary (UPA), Ministry of HUPA
- 6. Economic Advisor, Ministry of HUPA
- 7. DG & Director (NBO), Nirman Bhawan
- 8. Director (UPA), M/o HUPA
- 9. DS (HFA-2/3), M/o HUPA
- 10. DS (HFA-4/5), Mo HUPA
- 11.DS (Admn), M/o HUPA
- 12. DS (Coord), M/o HUPA
- 13. AEA (JrPC), NBO, Nirman Bhawan
- 14. All Under Secretaries of M/o HUPA
- 15. All Section Officers of M/o HUPA
- 16. AO (JNNURM), M/o HUPA
- J7.DC (MIS), Monitoring Cell (JNNURM), MoHUPA
 - 18. The CMD, HUDCO, HUDCO Bhavan, India Habitat Centre, Lodhi Road, New Delhi-110003
 - 19. The CMD, NBCC, NBCC Bhawan, Lodhi Road, New Delhi-110003
 - 20. The CMD, HPL, Jangpura, New Delhi-110014
 - 21. The Executive Director, BMTPC, Core-5A, First Floor, India Habitat Centre, Lodhi Road, New Delhi-110003
- 22. The Director (Corporate Planning, HUDCO, HUDCO Bhavan, India Habitat Centre, Lodhi Road, New Delhi-110003
- 23. Guard Folder on JNNURM/RAY CCEA File.

(S. K. Valiathan)

Deputy Secretary to the Govt. of India Tele No.2306 1206

HOUSING FOR ALL BY 2022 (HFA)

FORMAT A: INFORMATION OF BENEFICIARY BEING COVERED UNDER SLUM REHABILITATION

1. Name of head of th									
2. 1. unic of ficua of th	e family								
2. Sex [Male: 01, Femal	e: 02, Transge	ender:03							
3. Father's name									
4. Age of head of the	family								
ii. Name of t iii. City/ Villa iv. District, S 7. Aadhaar Card Nun Voter ID Card/Any of	the Slum o. ss at/Door No. the Street age State ober, if not a ther unique use ownersh	wailabl identifi ip from							
Relationship to Head of the Family	Gender	Aadhaar card /Voter ID Card/Any other unique identification number or a certificate of house ownership from Revenue Authority of beneficiary's native district							
	9. Religion [Hindu-01, Muslim-02, Christian-03, Sikh-04, Jainism-05, Buddhism- 06, Zoroastrianism-07, others (specify)-08] 10. Caste [General-01, SC-02, ST-03, OBC-04] 11. Whether Person with Disability (Yes/No)								

12. Marital Status[Married-01, Unmarried-02, Single Woman/Widow-03]	
13. Whether the family owns any house anywhere in India (Yes/No)	
a. If yes, then location details (Locality/ City/ State)	
b. If yes, then extent of land in Sq.mtrs	
14. Ownership details of existing house [Own – 01, Rent – 02, Otherwise – 03]	
15. Average monthly income of household (in Rs.)	
Signature/Thumb Impression of Head of Household Signature of representative of ULB in-charge	
Signature of representative of ULB in-charge	
Signature of representative of ULB in-charge —	
Signature of representative of ULB in-charge	
Signature of representative of ULB in-charge —	
Signature of representative of ULB in-charge	
Signature of representative of ULB in-charge	
Signature of representative of ULB in-charge	
Signature/Thumb Impression of Head of Household Signature of representative of ULB in-charge of above information	

1. Name of head of t		IRED IN	
or moud of t	he family		
2. Sex [Male: 01, Female	:03]		
3. Father's name			
1. Age of head of the f	family		
i. House/F ii. Name of iii. City iv. Mobile No 6. Permanent Addre i. House/Fla ii. Name of t iii.City/ Villa iv.District, S	o. ess at/Door No. he Street age		
7. Ownership detail [Own – 01, Ren			
[Pucca (CC & Stone S (Asbestos/ Steel Sheet, Katcha (Grass/thatche). Number of rooms i kitchen Io. Aadhaar Card Numb Voter ID Card/Any othe or a certificate of house	Tiled)-02, ed, Tarpauli in the dwell ber, if not aver	in, Wood ling unit ailable entificati	den)-03] t excluding
	amily mem	bers	
11. Number & age of f	•		
Relationship to Head of the Family	Gender	Age	Aadhaar card /Voter ID Card/Any other unique identification number or a certificate of house ownership from Revenue Authority of beneficiary's native district
Relationship to		Age	identification number or a certificate of house ownership from Revenue Authority of beneficiary's
		Age	identification number or a certificate of house ownership from Revenue Authority of beneficiary's

15. Number of Years of Stay in this Town/City
[0 to 1 year -01, 1 to 3 years- 02, 3 to 5 years- 03, More than 5 years-04]
16. Size of existing dwelling unit (Carpet area in square meters)
17. Whether Person with Disability (Yes/No)
18. Marital Status[Married-01, Unmarried-02, Single woman/Widow-03]
19. Whether the family owns any house anywhere in India (Yes/No) a. If yes, then location details (Locality/City/State) b. If yes, then extent of land in Sq.mtrs
20. Employment Status (Self Employed – 01, Salaried – 02, Regular Wage – 03, Labour – 04, Other – 05)
21. Average monthly income of household (in Rs.)
22. Does the family have a BPL Card (Yes / No) a. If yes, Provide BPL Card No
23. Housing requirement of family (New House – 01, Enhancement – 02)
24. In case of enhancement, please specify enhancement required [One room/Kitchen/Bath/Toilet or combination of these]
25. Preferred component of Mission under which beneficiary need assistance under HFA i. Credit linked subsidy - 01 ii. Affordable Housing in Partnership - 02 iii. Beneficiary-led individual house construction/enhancement - 03
26. Abridged Houselist TIN (from SECC) (If assistance under Beneficiary-led individual house construction/enhancement)
Signature/Thumb Impression of Head of Household
Note: * Same format shall be used for ineligible slum dwellers and beneficiary of those slums, which have not been considered for slum redevelopment through Private Participation as per process flow chart of HFAPOA at page No.17 of the "Housing for All" Scheme guidelines.
Signature of representative of ULB in-charge of above information

Annexure 7A (Para 14.5 of the Guidelines)

Format for 'In-situ' Slum Redevelopment projects with Private Partner

1.	Name of the State	:							
2.	Name of the City	:							
3.	Name of Slum	:							
4.	Project Name	:							
5.	Project Code *	:							
6.	State Level Nodal Agency	:							
7.	Implementing Agency (Urban Local Body/ Development Authority/ Housing Board/ Urban Improvement Trust/ Designated Slum Rehabilitation Agency/ Private agency/ Developer)	:							
8.	Date of approval by State Level Sanctioning and Monitoring Committee (SLSMC)	:							
9.	Project Cost (Rs. In Lakhs)	:							
10.	Project Duration (In months)	:							
11.	i) Status of slum	:							
11.	(Please write: 1 if notified, 2 if recognised and 3 if identified)	Ĭ							
	ii) Total Slum area (Sqm.)	:							
	iii) Area under slum rehabilitation (Sqm.)	:							
	iv) Slum Population		NT	•	NT. C	1 747	1 11	TC . 'C	100
12.	No. of locations covered in project		Name of Location		No. of eneficiar es	i S	hether Slum (y/n)	If y, 1 if notified, 2 if recognise d and 3 if identifie d	If Slum, whether it gets complete ly rehabilit ated y/n
13.	No. of existing slum households	:	Gen	SC	ST	O BC	Total	Person with Disabil ity	Minority
14.	No. of eligible slum households	:							
15.	No. of houses Proposed (slum rehabilitation only) with carpet area	:				1			
16.	No. of houses constructed/acquired Please specify ownership (any of these)	:	Joint(Fema				Transge nder(04)
17.	No. of beneficiaries covered in project	:	Male	(01)		Fema	le(02)	Transg	ender(03)
18.	Whether beneficiary have been selected as per PMAY guidelines? (Yes/No)				•				
19.	Whether private partner has been selected through open competitive bidding? If yes, date of bidding	:							
20.	Incentives to Private Partner	:							
	i) Existing FSI in the area	:							
	ii) FSI provided in the project	:							
	iii) Other Incentives, if any	:							
21.	i) GoI grant required (Rs. 1.0 lakh per eligible slum dweller) (Rs. In Lakhs)ii) State grant, if any (Rs. In Lakhs)	:							
	slum dweller) (Rs. In Lakhs)	•							

	v) Total (Rs. In Lakhs)		
22.	Whether technical specification/dwelling unit design for housing have been ensured as per Indian Standards/NBC/ State norms?	••	
23.	Type of Temporary arrangement for beneficiaries during construction period provided in the project (Rent / Transit Shelter)	:	
24.	Whether trunk infrastructure is existing or is being provided through AMRUT or any other scheme? (Yes/No)		
25.	Whether the provision of Civic infrastructure has been made as per applicable State norms/CPHEEO/IS Code/NBC? i) Water Supply (Yes/No) ii) Sewerage (Yes/No)	••	
	iii) Road (Yes/No) iv) Storm Water Drain (Yes/No)		_
	v) External Electrification (Yes/No) vi) Solid Waste Management (Yes/No)		
	vii) Any other, specify		-
	viii) In case, any infrastructure has not been proposed, reasons thereof		
26.	Whether disaster (earthquake, flood, cyclone, landslide etc.) resistant features have been adopted in concept, design and implementation of the project?	•	
27.	Whether Quality Assurance is part of the Project, if not, how it is proposed to be ensured?	••	
28.	Whether O&M is part of Project, if yes, for how many years?	:	
29.	Whether encumbrance free land is available for the project or not?	••	
30.	Whether any innovative/cost effective/ Green technology adopted in the project?		
31.	Comments of SLAC after techno economic appraisal of DPR		
32.	Project brief including any other information ULB/State would like to furnish	:	

*State will give code number to each project sanctioned under HFA as 'ABCDEFGHIJKLM' (Where, 'AB' is State Code as per census, 'CDEFGH' is City Code as per census, 'IJ' is running number of project of the city and 'K' is project component code i.e. 'K' will be 1 - for In-situ slum development, 2- for Relocation, 3 – for AHP and 4 – for Beneficiary Led Construction or enhancement), 'L' will be N-for New, R – for Revised, 'M' will be running number which will be 0 for new and 1 and so on for revisions

It is hereby confirmed that State/UT and ULB have checked all the beneficiaries as per guidelines of HFA. It is also submitted that no beneficiary has been selected for more than one benefit under the Mission including Credit Linked Subsidy Scheme (CLSS) component of the Mission.

Consolidated information of all slums being redeveloped with use of Mission grants is enclosed.

Signature Signature
(State Level Nodal Officer) (Secretary/Principal Secretary, Concerned Department)

Enclosure with Annexure 7A (Para 14.5 of the Guidelines)

Date:_____

Consolidated information on slums being redeveloped in the State, ULB wise as on Date

S. No.	Name of the project	No. of DUs (slum rehabilitation	Date of Sanction	Project cost (slum	Deployment of GoI share
110.	project	only)	Surretion	rehabilitation	(Rs. In lakhs)
				Part)	
		U	LB-1		
i)					
ii)					
iii)					
		U	LB-2		
i)					
ii)					
iii)					

Signature	Signature					
(State Level Nodal Officer)	(Secretary/Principal Secretary, Concerned Department)					

Annexure 7B (Para 14.5 of the Guidelines)

Format for Projects under Affordable Housing in Partnership (AHP)

1.	Name of the State	:									
2.	Name of the City	:									
3.	Project Name	:									
4.	Project Code*	:									
5.	State Level Nodal Agency	:									
6.	Implementing Agency (Urban Local Body/ Development Authority/ Housing Board/ Urban Improvement Trust/Private agency/ Developer)	:									
7.	Date of approval by State Level Sanctioning and Monitoring Committee (SLSMC)	:									
8.	No. of locations covered in project	:		Name of Location No. of benefici aries		S	Whether Slum (y/n)		notified,		If Slum, whether it gets complete ly rehabilita ted y/n
9.	Project Cost (Rs. in Lakhs)	:	Hou	sing	Infras	tructu	are	•	Other	1	Total
10.	No. of EWS beneficiaries covered in the project	:	Gen	SO	C ST	OB	BC	Total		nori ty	Person with Disabil ity
11.	Whether beneficiary have been selected as per PMAY guidelines? (Yes/No)			·							
12.	No. of houses constructed/acquired Please specify ownership (any of these)	:	Joint (01)		'emale(ale(o		e	nsgend r(04)
13.	No. of beneficiaries covered in project	:	Male	(01)	Fen	nale(c)2)		Trans	gend	ler(o3)
14.	Construction Cost of EWS Unit (Rs. in Lakhs)	:									
15.	Project Duration (in months)	:									
16.	Whether Sale Price is approved by State/UT?	:									
17.	If yes, Sale price of EWS unit (Rs. In Lakhs)										
18.	Carpet area of EWS unit in sqm.										
19.	Total No of houses proposed in the Project	:									
	i) No. of EWS unit	:									
	ii) No. of LIG units	:									
	iii) No. of MIG units	:									
	iv) No. of HIG units	:									
	v) No of Commercial units, if any	:									
20.	Whether open and transparent procedure has been envisaged to select private partner, if private partner has been considered?	:									
21.	No. of EWS houses eligible for Central Assistance	:									
22.	i. GoI grant required (Rs. 1.50 lakh per eligible EWS house) (Rs. In Lakhs)	:									
	ii. State grant (Rs. In Lakhs)] ,									
	a. Land Cost (Rs. In Lakhs)										

	b. Cash Grant (if any) (Rs. In Lakhs)		
	iii. Implementing Agency share (Rs. In Lakhs)		
	iv. Beneficiary Share (Rs. In Lakhs)		
	v. Total (Rs. In Lakhs)		
23.	Whether technical specification/ design for	:	
	housing have been ensured as per Indian Standards/NBC/ State norms?		
24.	Whether trunk infrastructure is existing or is		
24.	being provided through AMRUT or any other		
	scheme? (Yes/No)		
25.	Whether the provision of Civic infrastructure has been		
	made as per applicable State norms/CPHEEO/IS Code/ NBC	:	
	i) Water Supply (Yes/No)		
	ii) Sewerage (Yes/No)		
	iii) Road (Yes/No)		
	iv) Storm water Drain (Yes/No)		
	v) External Electrification (Yes/No)		
	vi) Solid Waste management (Yes/No)		
	vii) Any other, specify		
	viii) In case, any infrastructure has not been		
	proposed, reasons thereof		
26.	Whether adequate social infrastructure facilities	:	
	covered in the project; If no, whether the same are available in vicinity?		
27.	Whether disaster (earthquake, flood, cyclone,	•	
	landslide etc.) resistant features have been	•	
	adopted in concept, design and implementation of		
	the project?		
28.	Whether Quality Assurance is part of the Project,	:	
	if not, how it is proposed to be ensured?		
29.	Whether O&M is part of Project, if yes, for how	:	
	many years?		
30.	Whether encumbrance free land is available for the project or not?	:	
31.	Whether any innovative/cost effective/ Green		
31.	technology adopted in the project?		
32.	Comments of SLAC after techno economic		
	appraisal of DPR		
33.	Project brief including any other information		
	ULB/State would like to furnish		

*State will give code number to each project sanctioned under HFA as 'ABCDEFGHIJKLM' (Where, 'AB' is State Code as per census, 'CDEFGH' is City Code as per census, 'IJ' is running number of project of the city and 'K' is project component code i.e. 'K' will be 1 - for In-situ slum development, 2- for Relocation, 3 – for AHP and 4 – for Beneficiary Led Construction or enhancement), 'L' will be N-for New, R – for Revised, 'M' will be running number which will be 0 for new and 1 and so on for revisions

It is hereby confirmed that State/UT and ULB have checked all the beneficiaries as per guidelines of HFA. It is also submitted that no beneficiary has been selected for more than one benefit under the Mission including Credit Linked Subsidy Scheme (CLSS) component of the Mission.

Signature (State Level Nodal Officer)

Signature

(Secretary/Principal Secretary, Concerned Department)

Annexure 7C (Para 14.5 of the Guidelines)

Format for Projects under Beneficiary led Construction (New Construction)

1.	Name of the State	:							
2.	Name of the City	:							
3.	Project Name	:							
4.	Project Code *	:							
5.	State Level Nodal Agency	:							
6.	Implementing Agency/ ULB	:							
7.	Date of approval by State Level Sanctioning and Monitoring Committee (SLSMC)	:							
8.	No. of locations covered in project	:	Name of Locati on	of benefici cati aries		Whet her Slum (y/n)	If y, 1 if notified, 2 if recognised and 3 if identified		If Slum, wheth er it gets compl etely rehabil itated y/n
9.	Project Cost (Rs. in Lakhs)	:							
10.	No. of beneficiaries covered in the project	:	Gen	SC	ST	OBC	Tot al	Min ority	Perso n with Disab ility
11.	Whether beneficiary have been selected as per PMAY guidelines? (Yes/No)								
12.	No. of houses constructed/acquired Please specify ownership (any of these)	:	Joint)	int(01 Female(02)		Male(03)		Trans gende r(04)	
13.	No. of beneficiaries covered in project	:	Male ((01)	Fem	Female(02)		Transgende	
14.	Whether it has been ensured that selected beneficiaries have rightful ownership of the land	:		l			I		
15.	Whether building Plan for all houses have been approved	:							
16.	i) GoI grant required (Rs. 1.5 lakh per eligible Beneficiary) (Rs. In Lakhs)	:							
	ii) State grant, if any (Rs. In Lakhs)	:							
	iii) ULB grant, if any (Rs. In Lakhs)	:							
	iv) Beneficiary Share (Rs. In Lakhs)	:							
	v) Total (Rs. In Lakhs)	:							
17.	Whether technical specification/ design for	•							
1/•	housing have been ensured as per Indian Standards/NBC/ State norms?	•							
18.	Whether it has been ensured that balance cost of construction is tied up with State grant, ULB grant & beneficiary share?								
19.	Whether trunk and line infrastructure is existing or being provisioned								
	i) Water Supply (Yes/No)ii) Sewerage (Yes/No)								
	iii) Road (Yes/No)								

	iv) Storm water Drain (Yes/No)		
	v) External Electrification (Yes/No)		
	vi) Solid Waste management (Yes/No)		
	vii) Any Other, specify		
	viii) In case, any infrastructure has not been proposed, reasons thereof		
00	Whether disaster (earthquake, flood, cyclone,		
20.	landslide etc.) resistant features have been adopted	•	
	in concept, design and implementation?		
21.	Whether Demand Survey Completed for entire		
21.	city?		
22.	Whether City-wide integrated project have been		
	formulated? If not, reasons thereof.		
23.	Whether validation with SECC data for housing		
	conditions conducted?		
24.	Whether Direct Benefit Transfer (DBT) of fund to		
	individual bank account of beneficiary ensured in		
	the project?		
25.	Whether there is provision in DPR for		
	tracking/monitoring the progress of individual		
	houses through geo-tagged photographs?		
26.	Whether any innovative/cost effective/ Green		
	technology adopted in the project		
27.	Comments of SLAC after techno economic		
	appraisal of DPR		
28.	Brief of project, including any other information	:	
	ULB/State would like to furnish		

*State will give code number to each project sanctioned under HFA as 'ABCDEFGHIJKLM' (Where, 'AB' is State Code as per census, 'CDEFGH' is City Code as per census, 'IJ' is running number of project of the city and 'K' is project component code i.e. 'K' will be 1 - for In-situ slum development, 2- for Relocation, 3 – for AHP and 4 – for Beneficiary Led Construction or enhancement), 'L' will be N-for New, R – for Revised, 'M' will be running number which will be 0 for new and 1 and so on for revisions

It is hereby confirmed that State/UT and ULB have checked all the beneficiaries as per guidelines of HFA. It is also submitted that no beneficiary has been selected for more than one benefit under the Mission including Credit Linked Subsidy Scheme (CLSS) component of the Mission.

Signature Signature
(State Level Nodal Officer) (Secretary/Principal Secretary, Concerned Department)

Format for Projects under Beneficiary led Construction (Enhancement)

1.	Name of the State	:												
2.	Name of the City	:												
3.	Project Name	:												
4.	Project Code	:												
5.	State Level Nodal	:												
	Agency													
6.	Implementing	:												
	Agency/ULB													
7.	Date of approval by	:												
	State Level Sanctioning and													
	Monitoring and													
	Committee													
	(SLSMC)													
8.	No. of locations	:	Name of		No. of				r Slum	If y,			, whether	
	covered in project		Location	1	beneficia es	arı	()	7/1	n)	notified recogn			gets pletely	
										and g identi		rehabilitated y/n		
9.	Project Cost (Rs. in	:								identi	neu			
·	Lakhs)													
10.	No. of Beneficiaries	:	General		SC	S	ST OBC		OBC	Total		Mino	Perso	
	covered in the											rity	n	
	project												with	
													Disab	
													ility	
				1					1					
11.	Number of	:	One		room)ne		One ro		On		Total	
	Beneficiaries with		room	+ K	itchen		00m		+ Bath	1		m +		
	type of enhancement					†	Toilet		room		Ba	ilet +		
											roc			
ii	Number of										100	,111		
	Beneficiaries													
iii	GoI grant required	:												
	(Rs. in Lakhs)													
iv	State grant, if any													
	(Rs. in Lakhs)													
V	ULB grant, if any													
vi	(Rs. in Lakhs) Beneficiary Share, if													
,,,	any (Rs. in Lakhs)													
vii	Total (Rs. in Lakhs)													
12.	Whether	:		1										
	beneficiaries have													
	been selected as per													
	PMAY guidelines?													
	(Yes/No)													

13.	No. of houses	:	Joint(01)	Female(02)	Male(o3)	Transgender(04)
	constructed/acquir					
	ed					
	Please specify					
	ownership (any of					
	these)					
14.	No. of beneficiaries	:	Male (01)	Female(02)	Transgender(03)
	covered in project					
15.	Whether it has been	:				
	ensured that selected					
	beneficiaries have					
	rightful ownership of					
1.6	the land? (Yes/No)					
16.	Whether building	:				
	plan for all houses					
	have been approved?					
17.	(Yes/No) Whether the	:				
1/.	proposed					
	enhancements are as					
	per NBC norms?					
	(Yes/No)					
18.	Whether the					
10.	structural safety of					
	the existing house					
	ensured by the ULB?					
	(Yes/No)					
19.	Whether trunk and					
	line infrastructure is					
	existing or being					
	provisioned					
i	Water supply					
	(Yes/No)					
ii	Sewerage (Yes/No)	:				
iii	Road (Yes/No)	:				
iv	Storm water drain	:				
	(Yes/No)					
V	External	:				
	electrification					
•	(Yes/No)					
vi	Solid waste	:				
	management (Vas/Na)					
vii	(Yes/No) Any other, specify	:				
viii	In case, any	-				
V 111	infrastructure has not	•				
	been proposed,					
	reasons thereof					
20.	Whether disaster	:				
20.	(earthquake, flood,	•				
	cyclone, landslide					
	etc.) resistant					
	features have been					
	adopted in concept,					
	design and					
	implementation?					

21.	Whether demand		
21.	survey has been	•	
	completed for entire		
	city? (Yes/No)		
22.	Whether City-wide	:	
22.	integrated project	•	
	has been formulated?		
	If not, reasons		
	thereof.		
22	Whether validation	-	
23.	with SECC data for	:	
	housing conditions		
2.1	conducted? (Yes/No) Whether Direct		
24.	Benefit Transfer	:	
	(DBT) of fund to		
	individual bank		
	account of		
	beneficiary ensured		
	in the project?		
25.	Whether there is	•	
23.	provision in DPR for	•	
	tracking/monitoring		
	the progress of		
	individual houses		
	through geo-tagged		
	photographs?		
26.	Whether any	1:	
20.	innovative/ cost	•	
	effective/ green		
	technology adopted		
	in the project?		
27.	Comments of SLAC	:	
27.	after techno		
	economic appraisal		
	of DPR		
28.	Brief of project,	:	
•	including any other		
	information		
	ULB/State would		
	like to furnish	L	
29.	Whether the	:	
	enhancement		
	proposed for each		
	house is more than 9		
	sqmt area? (Yes/No)		
30.	Whether total carpet	:	
	area of each house		
	after enhancement is		
	not less than 21 sqmt		
	and not more than 30	1	
	und not more than bo		

Enclosure to Annexure 8 (Para 14.6 of the Guidelines)

Mission for Housing for All by 2022 Mission Directorate Format for Physical Progress of Projects Approved under the Mission

Name of State:

Name of the State Nodal Agency:

Component I: Slum rehabilitation in partnership with Private Sector

(In Rs. Crs.)

Title of the project	No. of slum Households covered	Approved Project Cost	Approved GoI Support	Other funds	Funds GoI	others

Component II: Affordable Housing in Partnership

(In Rs. Crs.)

Title of the	No. of EWS Households	Approved Project	Approved GoI	Other funds	Funds utilised		
project	sanctioned	Cost	Support		GoI	Others	

Component III : Subsidy for Individual Beneficiary for House construction/enhancement

(In Rs. Crs.)

Title of the	No. of EWS	Approved Project	Approved GoI	Other funds	Funds utilised	
project	houses approved	Cost	Support		GoI	Others

Physical progress ¹	No. of Houses							
	01	02	03	04	05	06		
Component I								
Component II								
Component III								

¹ Ground Level: 01, Plinth Level:02, Roof Level:03, Finishing stage: 04, Superstructure completed (For multistory only): 05 and Completed: 06

Applicable at the time of claiming the $3^{\rm rd}$ and final instalment of 20%

Name	Houses	No. of slums		Houses completed		Houses A	Allotted		
of the	Sanctioned	rehabilit	de-	with the requisite	In the	In the	In Joint	In	
project		ated	notified	infrastructure,	name of	name of	Name	the	
locatio				particularly the	woman	Male		nam	1
n-wise				following:				e of	:
				(i) Power Supply				Tran	1
				(ii) Water Supply				sgen	ı
				and				der	
				(iii) Drainage/					
				Sanitation					

Enclosure: Undertaking

Undertaking:

This is to certify that the beneficiaries covered under the above-mentioned project have not been extended benefits under remaining other component of the Mission.

Signature (with Seal) Authorised Signatory Designation of the Official State Level Nodal Agency (Name) Date

Signature (with seal) Authorised Signatory Designation of the Official Department Name of State/UT Date