

APPLICATION FORM

PART "A"

1. Scheme No.
2. Name of scheme. Mines labour welfare Dispensary at
3. Sponsoring Agency. Mines Labour Welfare Organization DGMM Peshawar.
4. Location of the scheme:-
 - i. Location of mines.
 - ii. Area involved. Nil. Building is to be provided by the mine owners in the area.
 - iii. Place, District.
5. No. of workers to be benefited from the scheme.
6. Total Cost of the scheme. Rs.
 - i. Mine Owners share. Nil
 - ii. Mines Labour Welfare Organization share. Hundred percent.
7. Annual recurring expenditure on completion Salaries=
Medicines =
Contingencies=
8.
 - i. Proposed date of commencement of the scheme.
 - ii. Proposed date of completion of the scheme.
9. Agency responsible for maintenance. Mines Labour Welfare Organization
10. List of papers attached:-
 - i. Survey Report.
 - ii. Feasibility Report. Not applicable
 - iii. Project report.

PART "B"

Brief description, purposes and benefit of the scheme. Attached.

PART "C"

1. Details of estimates alongwith copies of plans. Attached.
2. Area and cost of the land. Nil. Building is to be provided by the mine owners of the area at present.
3. Status of land, whether owned by Government or private land owners.

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| 4 | In case of private ownership:-
a) Whether the said land will be brought under use with an agreement with land owners: or
b) Whether the land is to be acquired under the land acquisition Act; | Yes, the land will be brought under the use with an agreement with land owners when needed.
Yes. |
| 5. | Surface feature. | Not applicable. |
| 6. | Cost of Building. | Nil. Building is to be provided by the mine owners of the area at present. |
| 7. | Furniture etc. (with details) | Annexed-A |
| 8. | Machinery (with details) | Annexed-B |
| 9. | Staff required and details of salaries | Annexed-C |
| 10. | Misc. expenditure on contingencies. | Annexed-D |

PART "D"

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| 1. | Copy of mining leases, prospecting licenses granted to the mine owners by Competent Authority. | Attached |
| 2. | A certificate of financial stability. | Attached |
| 3. | Report on the availability of electric supply etc. | Attached |
| 4. | Misc. | |

Signature:-

Designation :-

Official Seal:-

Date _____