

To

The Accounts Officer,
Chandigarh Housing Board,
Chandigarh.

Subject: - **Application for mutation/ transfer of Registration and allocation/allotment in favour of legal heir(s) on the death of the original allottee/transferee where No Will has been left**

1. Name of the Claimant-Legal heir : _____
2. Father's and Husband's Name : _____
3. Correspondence Addresses : _____
4. Relationship with the deceased allottee/
transferee : _____
5. Registration No. / Floor allocated. : _____
6. Detail of DU to be transferred/mutated. : D.U. No. _____ Sector
Category _____.
7. Date of death of allottee : _____
8. Names of all Class-I legal heirs and their
relationship with the deceased
allottee/transferee : _____
9. Details of payments deposited with the
CHB/Bank after the death of deceased : Amount Name of A/c
Bank No
- (use separate sheet if the space is insufficient)***
10. Whether the D.U. stands mortgaged with any
Organization? If so, give name of Organization
and the amount outstanding. Also furnish NOC
from the said Organization :
11. Whether any litigation regarding rights/
title/interest in the D.U. is pending in any Court?
If yes, furnish details thereof. :
:

Dated

Signatures of the Claimant

List of Documents attached:

1. _____
2. _____
3. _____

JOINT AFFIDAVIT TO BE FURNISHED BY LEGAL HEIRS RELINQUISHING THEIR RIGHTS FOR TRANSFER/MUTATION OF REGISTRATION AND ALLOTMENT ON THE DEATH OF ORIGINAL ALLOTTEE/TRANSFEEE IF NO WILL IS LEFT BEHIND

We the below stated heirs of the deceased Shri _____, S/o Sh._____ do hereby solemnly affirm and declare as under:-

1 That Sh./Smt. _____ was allotted House No. _____ in Sector _____, Chandigarh by the Chandigarh Housing Board vide Allotment Letter No. _____ dated _____.

*2. That the above said dwelling unit was further transferred by the Chandigarh Housing Board vide letter No. _____ Dated _____ in the name of the above said deceased Sh./Smt. /Ms. _____ under the Blood Relation /Mutual/ GPA Transfer Policy.

OR

* That the above said dwelling unit was further mutated/transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of the above said deceased Sh./Smt./Ms. _____ on the death of the original allottee / transferee under the Blood Relation /Mutual/ GPA Transfer Policy.

3. That the said Sh./Smt./Ms. _____ died on _____ at _____ (place of death).

4. That I am the _____ (relation) of the deceased.

5. That the deceased did not leave behind any WILL.

6. That the deceased left behind the following heirs including mother of the deceased at the time of his / her death (mother is also a Class-I heir in case the deceased is a male):-

Sr. No.	Name of the heir	Age	Address of the heir	Relation with the deceased
i)				
ii)				
iii)				
iv)				
v)				

7. That no other legal heir has been left out.

**8. That the mother of the deceased namely Smt. _____ died on _____ at _____ (place of death).

*9. That the wife / husband of the deceased namely Sh/ Smt. _____ died on _____ at _____ (place of death).

10. That we have relinquished our rights / title/ interest in the deposits made so far in respect of the above said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board and in the allotment of the dwelling unit.

Place:
Dated:

DEPONENT

Verification:-

Verified that the contents of the above affidavit are true and correct to the best of our knowledge and belief and nothing has been concealed therein.

Place:-
Dated:-

DEPONENTS

*Delete if not applicable.

** Delete para 7 if the mother is alive or deceased was a female.

(AFFIDAVIT ON STAMP PAPER OF RS.3/- TO BE ATTESTED BY EXECUTIVE MAGISTRATE)

AFFIDAVIT TO BE FURNISHED BY LEGAL HEIR CLAIMING TRANSFER / MUTATION OF ALLOTMENT AND / OR REGISTRATION NO. ON THE DEATH OF ORIGINAL ALLOTTEE/TRANSFREE IF NO WILL IS LEFT

I, _____ wife/son/daughter of Shri _____, aged about ____ years, resident of _____ do hereby solemnly affirm and declare as under:-

1. That Sh./Smt. _____ was allotted House No. ____ in Sector _____, Chandigarh by the Chandigarh Housing Board vide Allotment Letter No. _____ dated _____.

*2. That the above said dwelling unit was further transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of the above said deceased Sh./Smt. /Ms. _____ under the Blood Relation /Mutual/ GPA Transfer Policy.

OR

* That the above said dwelling unit was further mutated/transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of the above said deceased Sh./Smt./Ms. _____ on the death of the original allottee/transferee under the Blood Relation /Mutual/ GPA Transfer Policy.

3. That the said Sh./Smt./Ms. _____ died on _____ at _____ (place of death).

4. That I am the _____ (relation) of the deceased.

5. That the deceased did not leave behind any WILL.

6. That the deceased left behind the following heirs including mother of the deceased at the time of his / her death (Mother is also a Class-I heir in case the deceased is a male):-

Sr. No.	Name of the heir	Age	Address of the heir	Relation with the deceased
i)				
ii)				
iii)				
iv)				
v)				

7. That no other legal heir has been left out.

**8. That the mother of the deceased namely Smt. _____, died on _____ at _____ (place of death).

*9. That the wife/husband of the deceased namely Sh/ Smt. _____, died on _____ at _____ . (Place of death)

10. That all the heirs have relinquished their rights/title/interest in the deposits made so far in respect of the above named dwelling unit by the deceased and / or the original

allottee with the Chandigarh Housing Board and in the allotment of the dwelling unit, in favour of the deponent..

Place:

DEPONENT

Dated:

Verification:-

Verified that the contents of the above affidavit are true and correct to the best of our knowledge and belief and nothing has been concealed therein.

Place:-

DEPONENTS

Dated:-

*Delete if not applicable.

** Delete para 8 if the mother is alive or deceased was a female.

(AFFIDAVIT ON STAMP PAPER OF RS.3/- TO BE ATTESTED BY EXECUTIVE MAGISTRATE)

AFFIDAVIT TO BE FURNISHED BY LEGAL HEIR RELINQUISHING HIS/HER RIGHTS FOR TRANSFER/MUTATION OF ALLOTMENT AND / OR REGISTRATION NO. ON THE DEATH OF ORIGINAL ALLOTTEE/TRANSFEEE IF NO WILL IS LEFT

I, _____ wife/son/daughter of Shri _____, aged about ____ years, resident of _____. do hereby solemnly affirm and declare as under:-

1. That Sh./Smt. _____ was allotted House No. _____ in Sector _____, Chandigarh by the Chandigarh Housing Board vide Allotment Letter No. _____ dated _____.

*2. That the above said dwelling unit was further transferred by the Chandigarh Housing Board vide letter No. _____ Dated _____ in the name of the above said deceased Sh./Smt ./Ms. _____ under the Blood Relation /Mutual/ GPA Transfer Policy.

OR

That the above said dwelling unit was further mutated/transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of the above said deceased Sh./Smt./Ms. _____ on the death of the original allottee / transferee under the Blood Relation /Mutual/ GPA Transfer Policy.

3. That the said Sh./Smt./Ms. _____ died on _____ at _____ (place of death).

4. That I am the _____ (relation) of the deceased.

5. That the deceased did not leave behind any WILL.

6. That the deceased left behind the following heirs including mother of the deceased at the time of his / her death (mother is also a Class-I heir in case the deceased is a male):-

Sr. No.	Name of the heir	Age	Address of the heir	Relation with the deceased
i)				
ii)				
iii)				
iv)				
v)				

7. That no other legal heir has been left out.

**8. That the mother of the deceased namely Smt. _____ died on _____ at _____ (place of death).

*9. That the wife/husband of the deceased namely Sh/ Smt. _____, died on _____ at _____ (place of death).

10. That the deponent has relinquished his / her rights / title/ interest in the deposits made so far in respect of the above named dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board and also in the allotment of the dwelling unit, in favour of Sh./Smt./Ms._____ one of the heirs of the deceased.

Place:
Dated:

DEPONENT

Verification:-

Verified that the contents of the above affidavit are true and correct to the best of our knowledge and belief and nothing has been concealed therein.

Place:-
Dated:-

DEPONENTS

*Delete if not applicable.

** Delete para 8 if the mother is alive or deceased was a female.

(AFFIDAVIT ON STAMP PAPER OF RS.3/- TO BE ATTESTED BY EXECUTIVE MAGISTRATE)

AFFIDAVIT OF A GOVT./SEMI GOVT. EMPLOYEE IN CASE MOTHER OF THE DECEASED MALE ALLOTTEE/TRANSFREE HAD DIED BEFORE 1969 AND NO DEATH CERTIFICATE IS AVAILABLE.

I _____ wife / son / daughter of Sh. _____ aged _____ years, resident of _____ do hereby solemnly affirm and declare as under :-

1. That I am working as _____ (Designation) in _____ (name of Deptt./office) at _____ (Place) since _____ on regular basis.

2. That I know the family of Sh./Smt./Ms. _____ (name of deceased allottee/transferee) son/wife/daughter of Sh. _____ resident of _____, who died on _____ at _____ (Place of death), for the last about _____ years .

3. That Smt. _____ w/o _____ mother of the above said deceased Sh. _____ died about _____ years back at _____.

4. That no record of her death is available.

PLACE:
DATED:

DEPONENT

VERIFICATION

Verified that the contents of the above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

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PLACE:
DATED:

DEPONENT

Affidavit can be sworn by any Regular employee working in any Govt./Semi. Govt./Organisation/Undertaking or Statutory/Autonomous Body etc.

(AFFIDAVIT ON STAMP PAPER OF RS.3/- TO BE ATTESTED BY EXECUTIVE MAGISTRATE)

AFFIDAVIT OF A RELATION OF DECEASED IN CASE MOTHER OF THE DECEASED MALE ALLOTTEE/TRANSFEE HAD DIED BEFORE 1969 AND NO DEATH CERTIFICATE IS AVAILABLE

I, _____, s/o Sh. _____ aged _____, resident of H.No. _____, Sector _____, Chandigarh do hereby solemnly affirm and declare as under:-

1. That I know the family of Sh./Smt./Ms. _____ (name of deceased allottee/transferee) son/wife/daughter of Sh. _____ resident of _____, who died on _____ at _____ (Place of death) for the last about _____ years as the deceased was related to me as _____ (give relation).
2. That Smt. _____ w/o _____ mother of the above said deceased Sh. _____ died about _____ years back at _____.
3. That no record of her death is available.

PLACE:
DATED:

DEPONENT

VERIFICATION

Verified that the contents of the above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

PLACE:
DATED:

DEPONENT

(AFFIDAVIT ON STAMP PAPER OF RS.3/- TO BE ATTESTED BY EXECUTIVE MAGISTRATE)

AGREEMENT WITH LEGAL HEIR CLAIMING TRANSFER/MUTATION OF ALLOTMENT AND OR REGISTRATION NO. ON THE DEATH OF ORIGINAL ALLOTTEE/TRANSFEEE IF NO WILL IS LEFT

AGREEMENT

This agreement is made on this * _____ day of _____ 2008 at Chandigarh between :-

1. Chandigarh Housing Board, Chandigarh, constituted under section 3 of the Haryana Housing Board Act, 1971 , as extended to U.T. of Chandigarh , through its Chief Accounts Officer (hereinafter referred to “the Board”) of the ONE PART ; and
2. Shri/Smt./Ms. _____ son/wife/daughter of Shri _____, aged about ___ years, resident of _____ (hereinafter referred to as “the Claimant”) of the OTHER PART.

Whereas Shri/Smt/Ms. _____ son/wife/daughter of Sh. _____ resident of H.No. _____, Sector _____, Chandigarh was allotted H.No. _____ in Sector _____, Chandigarh vide Allotment Letter No. _____ dated _____.

** And whereas the above said dwelling unit was further transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of Sh./Smt /Ms. _____ Son/Wife/Daughter Sh. _____ under the Blood Relation /Mutual/ GPA Transfer Policy.

OR

** And whereas the above said dwelling unit was further mutated/transferred by the Chandigarh Housing Board vide letter No. _____ dated _____ in the name of Sh./Smt./Ms. _____ Son/Wife/Daughter of Sh. _____ on the death of the original allottee / transferee under the Blood Relation /Mutual/ GPA Transfer Policy.

And whereas the Claimant has alleged that the above named Sh./Smt. /Ms. _____ died on _____ and has requested the Board being one of the heirs of the said Sh. _____ , to transfer the Regn. No. _____ and / or the rights/title/interest in the allotment of the above said dwelling unit and the deposits made so far in respect of the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board, in his / her favour and that all other heirs of the deceased have relinquished in his / her favour their rights / title / interest in the amount deposited so far in respect of the said dwelling unit by the

deceased and / or the original allottee with the Board and also in the allotment of the above dwelling unit.

And whereas the Board has conceded to his / her request on the terms and conditions hereinafter appearing.

NOW, THEREFORE, THIS AGREEMENT WITNESSETH AS UNDER:-

1. That the Claimant shall be liable and responsible to the Board for all the payments, dues and other liabilities, past and future, concerning the allotment of H.No. _____ in Sector _____, Chandigarh which is being mutated/ transferred in the name of the Claimant.
2. That the Claimant shall abide by the provisions of the Haryana Housing Board Act, 1971, as extended to U.T. Chandigarh, and the Rules and Regulations made thereunder, and the terms and conditions subject to which the dwelling unit was to be allotted /has been allotted or which may be imposed by the Board from time to time.
3. That the Claimant shall execute and sign all papers , documents , agreements, contracts etc. which the Board may require to be executed and signed by him / her from time to time.
4. That the Claimant shall keep the Board and the Chandigarh Administration indemnified against all the losses, damages and claims which the Board and/or the Chandigarh Administration may in any way suffer or sustain or pay due to the transferring of the registration No. and the allotment of the above said house, in the name of the Claimant and the Claimant shall execute the Indemnity Bond or such other documents as may be required by the Board from time to time.
5. That in case the affidavit dated _____ of the Claimant is found false or incorrect at any time till the execution of the Conveyance Deed in favour of the Claimant, the Board may cancel the allotment of the house mutated / transferred in his / her name and may also forfeit the amount deposited with the Board till the date of such cancellation and take possession of the dwelling unit by evicting the Claimant by following the procedure prescribed in Chapter VI of Haryana Housing Board Act, 1971, as extended to U.T. of Chandigarh and the Rules made thereunder..
6. That in the event the Claimant fails to perform or comply with any of the terms and conditions of this Agreement, the Board shall be empowered to cancel the allotment of said dwelling unit and to evict him / her and take possession of the dwelling unit allotted to him / her by following the procedure prescribed in Chapter VI of the Haryana Housing Board Act, 1971, as extended to U.T. of Chandigarh , and may also forfeit the whole or part of the amount paid to the Board in respect of the above said dwelling unit till the date of such cancellation and the amount so forfeited shall be deemed to be the reasonable compensation to be applied to the Board for its absolute use without reference to any damage or loss actually sustained.

7. That if any dispute or difference of opinion arises regarding interpretation of the wordings or clauses of this instrument, the Board shall take a decision in this regard and such decision shall be final and binding on the Parties.

In witness where of the Board and the Claimant set their hands on the Agreement on the day, month and year first above mentioned in the presence of the following:-

Witnesses :

1. Name _____
Father's Name _____
Address: _____

2. . Name _____
Father's Name _____
Address: _____

Parties :

1. _____
Chief Accounts Officer,
Chandigarh Housing Board,
Chandigarh.

2. _____
Claimant

*Do not put the date.

** Delete if not applicable.

(Agreement to be furnished only on receipt of intimation from CHB)

INDEMNITY BOND OF THE LEGAL HEIR CLAIMING MUTATION/TRANSFER OF ALLOTMENT AND OR REGISTRATION NO. ON THE DEATH OF ORIGINAL ALLOTTEE/TRANSFEEE IF NO WILL IS LEFT

This indemnity Bond is made at Chandigarh on this ____ day of ____ 200__ by Sh./Smt./Ms. _____ son/wife/daughter of Late Sh. _____, resident of _____, in favour of the Chandigarh Housing Board, Chandigarh.

Whereas Shri/Smt/Ms. _____ son/wife/daughter of Sh. _____ resident of H.No. _____, Sector _____, Chandigarh was allotted H.No. _____ in Sector _____, Chandigarh vide Allotment Letter No. _____ dated _____.

** And whereas the above said dwelling unit was further transferred by the Chandigarh Housing Board vide letter No. _____ Dated _____ in the name of Sh./Smt./Ms. _____ Son/Wife/Daughter Sh. _____ under the Blood Relation /Mutual/ GPA Transfer Policy.

OR

** And whereas the above said dwelling unit was further mutated/transferred by the Chandigarh Housing Board vide letter No. _____ Dated _____ in the name of Sh./Smt./Ms. _____ Son/Wife/Daughter of Sh. _____ on the death of the original allottee / transferee under the Blood Relation /Mutual/ GPA Transfer Policy.

And whereas the above said Sh./Smt./Ms. _____ Son/wife/daughter of Sh. _____ died on _____ at _____ (Place of death).

And whereas Sh./Smt./Ms. _____, being one of the heirs of the said Sh. _____, has applied to the Chandigarh Housing Board to transfer the Regn. No. _____ and / or the allotment of the above said dwelling unit and the deposits made so far in respect of the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board, in his / her favour

And whereas the said Sh./Smt./Ms. _____ has filed affidavits from all the heirs of the above said deceased to the effect they have relinquished in his / her favour their rights/title/interest in the deposits made so far in respect of the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board and also in the allotment of the said dwelling unit.

And whereas the Chandigarh Housing Board has agreed under a separate Agreement to transfer the rights/title/interest and the deposits made so far in respect of

the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board, and in the allotment of the said dwelling unit relying upon the statements made in the affidavits by all the heirs of the deceased including the Idemnifier..

Now, therefore, in pursuance of the aforesaid Agreement and in consideration of the Chandigarh Housing Board transferring the rights/title/interest and the deposits made so far in respect of the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board, and in the allotment of the above said dwelling unit in the name of the Indemnifier - one of the heirs of the aforementioned deceased, the Indemnifier undertakes and indemnifies the Chandigarh Housing Board that he / she will at all times indemnify and keep harmless the Chandigarh Housing Board from all the losses, damages and claims and demands made and all actions and proceedings taken against the Chandigarh Housing Board in respect of the transfer of rights, title and interest in the allotment of H.No. _____ in Sector _____, Chandigarh and deposits made so far in respect of the said dwelling unit by the deceased and / or the original allottee with the Chandigarh Housing Board, in the name of the Indemnifier, by any person including the heirs of the deceased Sh./Smt./Ms.. _____.

In witnesses whereof, I have executed this Indemnity Bond on the day, month and the year first above mentioned in the presence of the following sureties who further undertake to indemnify the loss suffered by the Chandigarh Housing Board which is not recoverable from the transferee.

Sureties

Chandigarh

Indemnifier

1. _____

2. _____

**Delete if not applicable

Note: Sureties must be regular Employees of Govt./Semi Govt. Organizations /Undertakings/Statutory/Autonomous Bodies and they must put up their signature, name and complete address and shall furnish adequate proof of his / her means sufficient to discharge the liability under this Bond, if so require

(Indemnity Bond to be furnished only on receipt of intimation from CHB)