

NOTIFICATION

Griha Aadhar Scheme

The Government of Goa hereby notifies the **Griha Aadhar Scheme**.

Objective of the Scheme:

The objective of the scheme is to address the problem of spiralling prices and to provide support to the housewives/homemakers from middle, lower middle and poor section of the society, to maintain a reasonable standard of living for their families. Under this scheme an amount of ` 1000/- per month will be provided directly at the hands of the housewives/homemakers to achieve the above objective.

(1) Short title and commencement : -

- (a) This scheme shall be called “**Griha Aadhar Scheme**”.
- (b) This scheme shall come into force with immediate effect.

(2) Eligibility and other conditions : -

- (a) Any married woman above the age of 18 years, who fulfils all of the following conditions is eligible to apply:
 - (i) She should be a resident of Goa for the last fifteen years; and
 - (ii) The gross income of the husband and wife, taken together should not exceed ` 3,00,000/- per annum.

Note 1: The term ‘married woman’ includes a widow and a divorcee. In such cases the gross income of the beneficiary should not exceed ` 1,50,000/- per annum.

Note 2: The term ‘gross income’, means the income receivable by the beneficiary as salary, any sort of remuneration, any sort of earnings from profession, agriculture or business or any other income from any other sources; before computing any other amount accounted towards statutory, essential and other deductions required to be done from the gross income.

Provided, that the beneficiary or the husband should not be in receipt of the benefit under the Dayanand Social Security Scheme (DSSS) of the Directorate of Social Welfare, Government of Goa. However, a widow having a child living, shall be eligible for benefit under this scheme, even though she is a beneficiary of the DSSS till the child attains 18 years of age.

(3) Financial Assistance : -

The beneficiary under the scheme shall be paid an amount of ` 1,000/- per month, as financial assistance.

(4) Application procedure : -

(a) The eligible beneficiary shall apply to the Director of Women and Child Development, Panaji - Goa in the prescribed form (*Annexure - A*), complete in all respects with the self-certified copies of the following documents:

(i) Aadhar Card, if any;

Note: Aadhar card will be compulsory for all beneficiaries w.e.f. 01/04/2013.

(ii) Marriage Certificate. In case of non-availability of Marriage Certificate, alternate proof of marriage (like certificate issued by the religious institution where the marriage was solemnised etc.) or Birth Certificate of the child indicating the name of the beneficiary as the mother or any other documentary evidence. All such cases shall be referred to the Committee constituted in terms of clause 6 (a) for decision.

However, Marriage Certificate shall be an essential document in case of beneficiaries who are getting married, on or after the date, this scheme comes into force. In such cases, alternate documents as indicated above shall not be accepted and no relaxation shall be granted. Such cases shall not be referred to the Committee and the application shall be rejected.

(iii) Proof of present residential address (which may include a ration card; Election Photo Identity Card (EPIC), or any such document which establishes the present address);

(iv) 15 years Residence Certificate issued by Mamlatdar of the Taluka concerned. Alternatively, the applicant may submit a certificate in the prescribed form (*Annexure-C*), issued by a Gazetted Officer of the State Government, certifying that the applicant is a resident of the State of Goa for the last 15 years.

(v) Income Certificate issued by the Competent Authority, which may also include Salary Certificate / Income Certificate, in the prescribed form (*Annexure-D*) issued by an employer.

In such cases where the employer issues a salary certificate; the unit or firm or establishment of the employer should be registered with the appropriate authorities concerned and the employer should be contributing

towards Employees' Provident Fund and/or Employees' State Insurance Scheme and/or any other statutory scheme for its employees.

The applicant is required to submit the Income Certificate / Salary Certificate as follows:

(a) In the case of the applicant being employed, than the income certificate / salary certificate in the prescribed form (*Annexure-D*) of both the husband and the applicant shall be submitted. In the event the husband is not able to obtain a salary certificate, being unemployed or self-employed or carrying out any other occupation, business, profession or trade; than the individual Income Certificate of the husband, issued by the Competent Authority shall be submitted.

(b) In the case of the applicant being a widow or a divorcee, than the income certificate / salary certificate in the prescribed form (*Annexure-D*) of the applicant shall be submitted.

(c) In the case of the applicant being unemployed or self-employed or carrying out any other occupation, business, profession or trade; than the individual Income Certificate, issued by the Competent Authority shall be submitted.

(d) In the event of the applicant being not in a position to obtain the Income Certificate or Salary Certificate as above, than the applicant should submit a Certificate issued by a Gazetted Officer of the State Government, certifying that the applicant is purely a housewife / homemaker. Alongwith this Certificate, the applicant should submit a self-declaration in form (*as per Annexure-E*) on a non-judicial stamp paper of Rupees twenty only, duly certified and attested before a Gazetted Officer of the State Government, declaring therein that the annual income from all sources does not exceed ` 1,50,000/- or ` 3,00,000/- as the case be. This self-declaration need not be notarised.

(vi) Attested copy of savings bank account pass book (with IFSC and MICR details); and

(viii) Birth certificate of the child along with life certificate (in case of widow who is DSSS beneficiary)

(b) The applications shall be scrutinised and sanction will be issued by the Director of Women and Child Development in the chronological order in which the applications are received in the Office of the Directorate of Women and Child

Development and the taluka level offices of the Directorate of Women and Child Development. The Director of Women and Child Development shall establish facilitation centres in the taluka level offices for processing the application forms. A maximum number of upto 15000 applications shall be sanctioned in a calendar month.

(c) During the scrutiny stage, the applications shall be appraised by a Local Appraisal Committee at the taluka level to be constituted by the Government.

(d) The financial assistance of ` 1000/- (Rupees one thousand only) shall be paid every month directly into the savings bank account of the eligible beneficiary by ECS facility subject to other conditions.

5. Other conditions : -

(a) The beneficiary shall submit a life certificate every year in the month of October in the prescribed form (*Annexure – B*). In case of a widow who is a DSSS beneficiary and having a child, the beneficiary shall also submit additionally a life certificate in respect of such child every year.

(b) The beneficiary shall submit fresh Income Certificate after a duration of three years if the gross annual income is less than ` 2,50,000. In case the gross annual income exceeds ` 2,50,000, the beneficiary should submit a fresh Income Certificate every year in the month of October. In the event the beneficiary fails to produce the Income Certificate as above, the monthly financial assistance sanctioned shall be stopped forthwith. On receipt of the Income Certificate, and subject to the fulfilment of other conditions, prescribed from time to time, the financial assistance shall be resumed prospectively from the next month from the date of receipt of the Income Certificate.

(c) In case the benefits under the scheme are availed by the beneficiary based on wrong/false information or declaration, an action to prosecute shall be initiated and person shall be debarred from getting the benefits under any other schemes of the Government.

6. Power to remove difficulties : -

(a) For the purpose of removal of any difficulties in the implementation of the Scheme, there shall be a four member committee consisting of the following:

- (i) Secretary (Women and Child Development) as Chairperson;
- (ii) One Social Worker to be appointed by the Government as Member;
- (iii) Additional /Joint Secretary (Finance) as Member; and
- (iv) Director of Women and Child Development as Member Secretary.

(b) The decision of the Committee shall be final and binding on all concerned.

7. Power to relax : -

The Government shall have the power to amend, modify and cancel any part or whole of the scheme at any time.

**By order and in the name of the
Governor of Goa.**

Sd/-

(Sunil P. Masurkar)
**Director and ex-officio Joint Secretary
(Women and Child Development)**

Price ` 5/-

Serial No.

Annexure - A

Application form for Financial Assistance under Griha Aadhar Scheme

To,
The Director,
Women and Child Development,
Government of Goa,
Shanta Building, St. Inez,
Panaji - Goa.

Applicant's photo
to be attested by
any Gazetted
Officer or MLA
or MP.

PART - I

1. Name of the applicant (in full) : _____
2. Date of Birth (age) : _____
3. Residential address(in full) :
(Please attach proof)
House No. : _____
Street/Road /Building name : _____
Ward name / No. : _____
City/Village : _____
Constituency : _____
Taluka : _____
4. Details of family members :

Sr. No	Name of the family members including the applicant	Relation	Occupation	Place of work, if any
5. Contact details of the applicant : Phone : _____
e-mail : _____
6. Religion : _____
7. Category : _____
(Whether SC/ST/OBC/Others)
8. Ration card, if any : _____
(Please attach photocopy)
9. Aadhar card, if any : _____
(Please attach photocopy)
10. Annual income (includes husband and wife, taken together) : _____
(Please attach proof)
11. Bank Account Details :
(Please attach photocopy of bank pass book)
Name of the Bank : _____
Branch : _____
Type of Account : _____
Account No. : _____
IFSC code : _____
MICR code : _____
12. Whether you or your spouse is a beneficiary under Dayanand Social Security Scheme : _____
13. Details of other scheme benefits : _____
available, if any

DECLARATION

I, the undersigned _____ w/o _____ do hereby declare that the information given above is true and correct and nothing is false. That I shall be personally responsible for the correctness of the information. I further declare that for wrong and false information, authorities may be at liberty to take action, as deem fit against me, including filing criminal case.

Place: _____
Date: _____

(Signature of the applicant)

PART - II

VERIFICATION

(To be signed by any Gazetted Officer or MLA or MP)

I, Shri/Smt. _____ do hereby certify that I personally know Smt. _____ (applicant). I further certify that I have checked the particulars/information given in this application and the same is found to be correct.

I recommend Smt. _____ (applicant) for grant of financial assistance under **Griha Aadhar Scheme** as she fulfills all the conditions/criteria.

Signature : _____

(Name in block letters)
Designation : _____
Address & Seal : _____

Telephone No. _____

Place: _____
Date: _____

NOTE: The application shall be enclosed with the following documents:

1. Self attested copy of Marriage certificate or any other documentary evidence as defined;
2. Self attested copy of 15 years Residence Certificate issued by Taluka Mamlatdar or Annexure C;
3. Proof of present residential address (includes a ration card; Election Photo Identity Card –EPIC or any such document which establishes the present address.);
4. Attested copy of Ration card, if any;
5. Attested copy of Aadhar card, if any;
6. Income Certificate issued by the Competent Authority or Salary Certificate issued by the employer or certificate and self-declaration as defined in Annexure –C & Annexure - E ;
7. Attested copy of savings bank account pass book (with IFSC & MICR details); and
8. Birth certificate of the child along with life certificate as in Annexure B (in case of widow who is a DSSS beneficiary).

ANNEXURE – B

LIFE CERTIFICATE

(To be signed by any Gazetted Officer or MLA or MP)

I, Shri/Smt _____ do hereby certify that I personally know Smt _____, w/o _____, R/o. _____, the beneficiary of **Griha Aadhar Scheme** since last _____ years.

I further certify that above said Smt. _____ is alive as on date.

* I further certify that Mast. / Ms. _____ is the son / daughter of the above said Smt. _____, and that he / she is below eighteen years of age and is alive as on date.

Signature : _____

(Name in block letters)

Designation : _____

Address & seal : _____

Telephone No. _____

Place: _____

Date: _____

* Strike out if not applicable

ANNEXURE – C

CERTIFICATE OF RESIDENCE

(To be issued by a Gazetted Officer of the State Government)

I, Shri/Smt _____ do hereby certify that I personally know Smt _____, w/o _____, R/o. _____, the applicant of **Griha Aadhar Scheme** since last _____ years.

I further certify that above said Smt. _____, is residing at _____, since the last fifteen years.

* I further certify that above said Smt. _____, is working / self employed at _____ / is a housewife / homemaker.

Signature : _____

(Name in block letters)

Designation : _____

Address & seal : _____

Telephone No. _____

Place: _____

Date: _____

* Strike out whatever is not applicable

ANNEXURE-D

CERTIFICATE OF INCOME / SALARY

(to be issued by the employer on his letter head)

1. This is to certify that Ms. / Mr. _____, is working in this _____ (name of organisation or unit or firm or establishment); as _____ since _____. (date or month of joining /since working)

2. This is to further certify that she / he has been paid a total gross salary (including all benefits and other perquisites) amounting to; ` _____/- (in figures) (Rupees _____ only) (in words) for the financial year _____. (indicate the appropriate financial year, being the financial year immediately preceding the date of issue).

A) Gross Salary : ` _____
(including the salary {basic pay, dearness allowance, HRA, conveyance allowance, etc.} and any other allowance(s), fringe benefits and other perquisites granted)

B) Amount paid as Bonus / incentives : ` _____

C) Amount paid as ex-Gratia : ` _____

D) Total (A+B+C) : ` _____

E) Contribution by the employer towards

(a) EPF : ` _____

(b) ESI scheme : ` _____

(c) Gratuity : ` _____

(d) Superannuation : ` _____

(e) Any other statutory deductions : ` _____

3. This is to certify that the information provided above is as per this Office records.

4. This certificate is issued as per the request of our employee for the purpose of availing the Griha Aadhar Scheme of the Government of Goa.

Signature
Name of the Issuing Authority
Address & Seal

ANNEXURE - E

SELF DECLARATION OF OCCUPATION AND INCOME

(To be certified and attested before a Gazetted Officer of the State Government)

I, Smt. _____ wife/daughter of
_____ major of age, resident of _____ do
hereby solemnly declare as under:

1. I say and declare that, presently I am working/self-employed as _____
/ not working/housewife/home-maker (strike out whichever not applicable), and my
monthly salary/income is ` _____ (Rupees _____
_____ only).
2. I say and declare that my annual income from all sources does not exceed
` _____ (Rupees _____ only).
 - (a) Income from agriculture sources: ` _____.
 - (b) Income from Bank deposits : ` _____.
 - (c) Income from other sources : ` _____.
 - (d) Income of husband (if applicable): ` _____.
3. I say and declare that the present self-declaration is produced in the Office of
Directorate of Women & Child Development, Government of Goa, for availing the
financial assistance under the GRIHA AADHAR SCHEME.
4. I say and declare that the above contents are true to the best of my knowledge and
nothing false has been stated.
5. I say and declare that, in the event of any false declaration I shall be held responsible
and shall be liable for penal action as deemed fit against me including filing criminal
case.

Solemnly declared at _____ on this _____ day of
the month of _____ of the year _____.

(SIGNATURE OF THE DECLARANT)

Signed before me and attested: Signature : _____
Name & Designation
of the Gazetted Officer: _____
Address : _____
Seal :

