NOTIFICATION

Griha Aadhar Scheme

Date: 01/10/2012

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

<u>Application form for Financial Assistance under Griha Aadhar Scheme</u>

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				
4.	Taluka Details of family members	:			
4.	Sr. Name of the family memb No including the applicant	ers	Relation	Occupation	Place of work, if any
5.	Contact details of the applicant	:	Phone : e-mail :		
6.	Religion	:			,
7. 8. 9.	Category (Whether SC/ST/OBC/Others) Ration card, if any (Please attach photocopy) Aadhar card, if any (Please attach photocopy) Annual income (includes husband and wife, taken together)	: : : : :			
11.	(Please attach proof) 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 availing, 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)				
	PAR	<u>T - II</u>				
(To b		CATION tted 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	:				
	Designation Address & Seal	(Name in block letters) :				
Place: Date:	Telephone No.					
NOTE: The application shall be enclosed with the following documents:						
 Self attested copy of Marriage certificate or any other documentary evidence as defined; Self attested copy of 15 years Residence Certificate issued by Taluka Mamlatdar or Annexure C; Proof of present residential address (includes a ration card; Election Photo Identity Card –EPIC or any such document which establishes the present address.); Attested copy of Ration card, if any; Attested copy of Aadhar card, if any; 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; Attested copy of savings bank account pass book (with IFSC & MICR details); and Birth certificate of the child along with life certificate as in Annexure B (in case of widow who is a DSSS beneficiary). 						

$\underline{ANNEXURE - B}$

 $\underline{\textbf{LIFE CERTIFICATE}}$ (To be signed by any Gazetted Officer or MLA or MP)

			do hereby certify the				
R/o.		,	w/o	·			
the beneficiary of Gri	ha Aadhar Scheme	e sin	ice last	, years.			
I further certify that a date.	above said Smt			_ is alive as on			
son / daughter of the	above said Smt		and is alive as on date.	,			
	Signature	:					
	Designation Address & seal	:	(Name in block letters)				
Place: Date: * Strike out if not applic							
I, Shri/Smtknow Smt	•	ffice		nat I personally			
I X/ U .			e last	•			
	bove said Smt		, is residing at				
since the last fifteen ye				,			
* I further certify that self employed at	above said Smt		/ is a housewife	, is working / / homemaker.			
	Signature	:					
	Designation Address & seal	:	(Name in block letters)				
Place:	Telephone No.						
Date: * Strike out whatever is no							

CERTIFICATE OF INCOME / SALARY

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

1.	This			certify						
				(r						
estab	lishment): 8									
or mo	onth of joini	ng /since wo	orking)				_			
(Rup	uding all l bees ncial year _	benefits a	nd other p	chat she / herquisites) a	mount	ing to	; `		<u>/</u> - (iı	n figures)
Δ)	Gross	Salary				`				
(incl	uding the	salary {l		dearness all ringe benefit						
B)	Amour	nt paid a	s Bonus /	incentives	s:	`				
C)	Amour	nt paid a	s ex-Grat	ia	:	`				
D)	Total (A+B+C)			:	`				
E)	Contri	bution b	y the em	oloyer towa	ards					
(a)	EPF			•	:	`				
(b)	ESI sch	eme			:	`				
(c)	Gratuity	y			:	`				
(d)	Superar	nnuation			:	`				
(e)	Any oth	er statuto	ry deducti	ons	:	`				
3. reco		to certify	that the	information	provid	led ab	ove is	as pe	r thi	s Office
4. avail				per the requ of the Gover				for th	e pu	rpose of

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			
	ma						
hereby	y solemnly declare as under:						
1.	I say and declare that, pres / not working/housewife, monthly salary/income	/home-maker (st	rike out whichever no	ot applicable), and my			
2.	I say and declare that	•					
	(a) Income from agricultur	e sources. `	·				
	(b) Income from Bank deposits : `						
	(c) Income from other sources:`						
	(d) Income of husband (if a						
3.	I say and declare that the Directorate of Women & of financial assistance under the same of the same o	Child Developme	ent, Government of				
4.	I say and declare that the nothing false has been state		are true to the best	of my knowledge and			
5.	I say and declare that, in the and shall be liable for penal case.	•		_			
	Solemnly declared at the month of	of the year	on this	day of			
			(SIGNATURE O	F THE DECLARANT)			
Signed	d before me and attested:	Signature	:				
		Name & Design	nation l Officer:				
		Address	:				
		Seal	•				