



MO-BIDYUT REFUND REQUEST FORM

(This form is applicable only for the payment made through online mode)

DATE of REQUEST:		MOBILE NO:	
APPLICANT NAME:		UPAN:	
SECTION NAME:		AMOUNT PAID:	
SUB DIVISION NAME:		DATE OF PAYMENT:	
DIVISION NAME:		REQUESTED BY:	

DECLARATION BY APPLICANT

I,, Understand

1. That Refund will be provided in the same account through which the payment was made.
2. That No refund will be provided for Inspection fee, Processing fee and GST amount.

(Signature of Applicant)

FOR SECTION OFFICE/ SUB-DIVISION OFFICE USE

If the Connection Provided: Yes / No

Reason for not Providing the connection:

Refund Approved by	Name	Emp. No.	Signature	Date
Section In-Charge				
SDO				

FOR HEAD OFFICE

Bank Ref. No.		PGI Ref. No.		Txn Date	
Is SD posted in SAP	Yes/NO	If Yes, SAP reversal document			
Sig. of Nodal (DEP)		Name			
Mail sent for refund to Bill Desk		Yes / No			
Marked as refunded in MO-Bidyut Portal		Yes / No			
Sig. of Nodal (NSC)		Name			

Applicant ID proof and proof of payment needs to be attached along with this form.