

केन्द्रीय सरकारी कर्मचारी कल्याण आवास संगठन Central Government Employees Welfare Housing Organisation (Ministry of Housing & Urban Poverty Alleviation, Govt. of India)

छठा तल, ए खण्ड, जनपथ भवन, जनपथ, नई दिल्ली- 110 001 दूरभाष : 23739722 / 23717249 / 23355408 फेक्स : 23717250 6th floor, 'A' Wing, Janpath Bhawan, Janpath, New Delhi - 110 001 Phones : 23739722 / 23717249 / 23355408 Fax : 23717250 E-mail : cgewho@nic.in

No.A-111/3 (II)

BY POST

Date : 31/03/2011

To all Wait-listed applicant(s) of Mohali (Phase-II) Housing Scheme.

Subject : Offer of allotment in type 'D' flat to all waitlisted applicants of CGEWHO's Mohali (Phase-II) Housing Scheme.

Reference : Computerised Draw conducted by CGEWHO on 11/03/2011.

Sir/Madam,

This has reference to the computerised draw held on **11/03/2011** in CGEWHO's Head Office by Draw Committee in presence of representative of Ministry of HUPA. The list of applicants and result of the draw has been displayed in our official website **www.cgewho.nic.in**

2. It is intimated that you were not successful in getting the allottment. The unsuccessful applicant's name are retained in the waiting list and your priority in the waiting has been displayed in the website. Since, there are few vacancies in type 'D', we hereby offer to all wait to offer confirmed allottment in 'D' type flat as detailed below and in the Scheme Brochure of **Mohali (Phase-II) Housing Scheme**. In case, you are interested to have a confirmed allottment in 4BHK having 1973 sft area {'D' type}, then send your consent by **30/04/2011** alongwith Demand Draft of the difference of EMD and application fees, if applicable, in your case.

3. Waitlisted of type 'C' are required to send only CONSENT LETTER whereas waitlisted in type 'A' & 'B' applicants are required to remit the amount alongwith their CONSENT LETTER as indicated in the column-6 of the TABLE below :

Туре	AREA	COST OF	EMD APPL FEEs	EMD & APPL	DIFFERENCE TO EMD
	(in Sft)	FLAT	PAID WITH	FEEs FOR 'D'	& APPL FEE TO BE
		(in Lacs)	APPLICATION	TYPE FLAT	PAID
			(in Rs.)	(in Rs.)	(in Rs.)
1	2	3	4	5	6
Α	580	14.58	50,500	1,01,000	50,500
В	1005	25.27	50,500	1,01,000	50,500
С	1367	34.37	1,01,000	1,01,000	NOT REQUIRED TO
					PAY ANY AMOUNT
D	1973	49.60	1,01,000	1,01,000	NOT APPLICABLE

4. Please note that your Registration No. has been mentioned in Label with initial of **MHAXXXX** or **MHBXXXX** or **MHCXXXX** which may please quoted in the consent letter.

Encl. : FORMAT of Consent letter (in overleaf)

ours faithfully.

Deputy Director (Administration) For Chief Executive Officer