



Price: ` 1

## PERMISSION TO RUN THE BENEFIT SHOW APPLICATION FORM

### Applicant Details:-

Aadhar Number: \_\_\_\_\_  
Applicant Name\*: \_\_\_\_\_ Father/Husband/Guardian Name\*: \_\_\_\_\_  
Gender:  Male  Female Mobile Number\*: \_\_\_\_\_ Email Id: \_\_\_\_\_

### Applicant Permanent Address Details:-

District\*: \_\_\_\_\_ Mandal\*: \_\_\_\_\_  
Village/Ward\*: \_\_\_\_\_ Locality/Landmark: \_\_\_\_\_  
Door No: \_\_\_\_\_ Pin code: \_\_\_\_\_ Delivery Type\*:  At Kiosk  Post Local  Post Non-Local

### Postal Details:-

State\*: \_\_\_\_\_ District\*: \_\_\_\_\_ Mandal\*: \_\_\_\_\_  
Village/Ward\*: \_\_\_\_\_ Locality/Landmark: \_\_\_\_\_ Door No: \_\_\_\_\_ Pin code: \_\_\_\_\_

### Service Specific Details:-

Name of the Theater\*: \_\_\_\_\_ Name of the Occasion/Festival\*: \_\_\_\_\_  
District\*: \_\_\_\_\_ Mandal\*: \_\_\_\_\_  
Village/Ward\*: \_\_\_\_\_ Locality/Landmark\*: \_\_\_\_\_  
Door No\*: \_\_\_\_\_ Pin code\*: \_\_\_\_\_  
Show Date (DD/MM/YYYY)\*: \_\_\_\_\_ Show Timings: \_\_\_\_\_  AM  PM TO \_\_\_\_\_  AM  PM

### Informant Details:-

Informant Name\*: \_\_\_\_\_ Relation\*: \_\_\_\_\_

### Documents List: - (NOTE: All Upload Documents should be in PDF Format only and the size should not exceed 3MB)

Application Form \*

(\* - Indicates Mandatory)

Applicant's Signature