

→ PSM / PSM



INTER OFFICE MEMO

FROM: General Manager, Roing

TO: SDGM (PESM), CPIO,  
Shillong

REF: NERNG/Roing-Chapakhowa/RTI/172

DATED: 02.02.2023

SUB: Forwarding of RTI application alongwith fee of Rs.10.00 in form of Demand Draft for seeking information relating to all documents of disbursement of compensation amount at LDV dist.

1. Enclosed please find herewith the RTI application along with fee of Rs.10.00 in form of Demand Draft in original of Sri Omik Perme, Roing seeking information relating to all documents of disbursement of compensation amount at Lower Dibang Valley dist., Arunachal Pradesh for your further needful please.
2. We have gone through the RTI application and it is found that the applicant has not indicated any specific transmission line / POWERGRID asset pertaining which the information has been sought. Under the said conditions any reply to the same could not be furnished from this end for want of specific mention of transmission line / POWERGRID asset. The same may kindly be communicated to the applicant by CPIO.

के पी राव 02/02/2023  
(K. P. Rao)

Encl: As stated above in original.

द्वारा: PSM: 08.02.2023

Form 'A'  
Form of application for seeking information  
(See rule 3)

I.D. No.....

(For official use)

To,

The Public Information Officer/PIO

The General ManagerPower Grid Corporation of India Ltd. vill. Ezengo, Roing.

1) Name of the Applicant

:- Sri - Omik Perme

2) Address

:- Village - Agangite-11, opposite DLBCA  
Roing Bypass road. L/D/valley Dist. Roing (AP)

3) Concerned Department

:- Power Grid Corporation of India Ltd. Roing

(a) Particulars of information

:- Seeking information relating to all  
documents of disbursement of Compensation amount at L/D/V/Dist.

(i) Details of information required

:- 1) Furnish the money receipt

Voucher or agreement paper with Forest Department as compensation  
amount or cost of Jungle clearance or felling of Trees etc.

for ongoing Tower line in Lower Dibang valley District (AP).

2) Furnish the certified copy of total compensation amount  
paid to Forest Department and District Administration in Lower  
Dibang valley District - Roing (AP).

3) Furnish the certified copy of Forest area damages for ongoing  
Tower line in Lower Dibang valley District - Roing (in Km or Hectare)

4) Furnish the certified copy of total numbers of Tower erecting  
in Lower Dibang valley District - Roing (AP).

5) Furnish the certified copy of all the name(s) to whom the compensation  
amount is paid and the name of Bank and the Bank Account number(s)  
and Account Holder name(s) (if the amount is paid in Bank Account).

(ii) Period for which information asked for :- 2021-2022-2023.(iii) Other details :- Furnish the certified copy of all the relating documents of disbursement  
of compensation amount at Lower Dibang valley District - Roing (AP).

4) I state that the information sought does not fall within the restrictions contained in Section 8 of the Act and to the best of my knowledge it pertains to your office.

5) A fee of Rs. 10/- for appeal has been deposited in the office of the Competent authority vide Treasury Challan/IPO/DD No. 207157 Dated. 04/01/2023.Place:- RoingDate:- 02/02/2023

Signature of Applicant

Sri - Omik PermeE-mail address, if any. omikperme@gmail.comTel. No. (Office) 9612422717(Mobile No.) 7005088442



भारतीय स्टेट बैंक  
State Bank of India

जारी करने वाली शाखा  
Issuing Branch: ROING  
कोड क्रं. / CODE No. 05821  
Tel No. 03803-222240

मांग द्राफ्ट  
DEMAND DRAFT

Key: YULDIW  
Sr. No: 166595

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नाम/ जावेपर SDGM (PESM) POWER GRID CORP OF INDIA LTD SHILLONG\*\*\*\*\*

या उनके आदेश पर

रुपये RUPEES  
ON DEMAND PAY  
Ten Only

OR ORDER

अदा करें ₹ 10.00

IOI 000526207157  
Name of Applicant

Key: YULDIW Sr. No: 166595  
OMIK PERME

AMOUNT BELOW 11(0/2)

मूल्य प्राप्त / VALUE RECEIVED



भारतीय स्टेट बैंक  
STATE BANK OF INDIA  
अदाकर्ता शाखा / DRAWEE BRANCH: SHILLONG  
कोड क्रं. / CODE No. 00181

प्राधिकृत हस्ताक्षरकर्ता  
AUTHORISED SIGNATORY

शाखा प्रबंधक  
BRANCH MANAGER

कम्प्यूटर द्वारा मुद्रित होने पर ही वैध  
VALID ONLY IF COMPUTER PRINTED

केवल 3 महीने के लिए वैध  
VALID FOR 3 MONTHS ONLY

₹ 1,50,000/- एवं अधिक के लिखत दो अधिकारियों द्वारा हस्ताक्षरित होने पर ही वैध है।  
INSTRUMENTS FOR ₹ 1,50,000/- & ABOVE ARE NOT VALID UNLESS SIGNED BY TWO OFFICERS

⑈ 207 157 ⑈ 00000 2000 ⑆ 000526 ⑈ 16

SESHAASA(D) / CTS-2010

TO; SDGM(PESM), CP10  
POWER GRID CORPORATION OF INDIA LTD.  
LAPALANG LOWER NONGRAH DONGTEIH  
SHILLONG MEGHALAYA  
PIN - 793006

From, GM, Roing  
8897793678

MANIPAL TECHNOLOGIES LTD., MANIPAL 05-2022

**S H I P P E R**

Customer Code                       
 Company                       
 Sender                       
 Address                       
 City                      Pin                       
 Tel.                      Mob.                       
 E-mail :                     

**C O N S I G N E E**

Consignee Code                       
 Company                       
 Attn.                       
 Address                       
 City                      Pin                       
 Tel.                      Mob.                       
 E-mail :                     

**NON NEGOTIABLE**

 **BI**  
**DOMESTIC**


ORG                      SC                     

I hereby agree to the terms and conditions set forth on the reverse of this (Shipper's) copy of this non-negotiable waybill and warrant that the information contained on this waybill is true and correct.

This shipment does not contain any cash or equivalent.

If consignee fails to make any such payment(s) BDE shall be entitled to recover the same from the Shipper. Freight charge and GST shall be paid by the Shipper. Stamp duty if leviable on the waybill shall be borne by the Shipper exclusively.

Shipper's Signature                     

Description	Comm. Value of Consignment	Code	INSURANCE
<u>                    </u>	<u>                    </u>	<u>                    </u>	The Shipper has stated that : <input type="checkbox"/> He has not insured the Consignment <input type="checkbox"/> He has insured the Consignment
 <b>1 6 1 4 3 1 1 6 4 9 6</b>			Insurance Policy No. <u>                    </u>
			Amount <u>                    </u>
			Insurance Company <u>                    </u>
			GST (Rs.) <u>                    </u>

No. of Pkgs.                     

DOX-01 Non DOX/02                     

Dim (Cms)                     

Dim.Wt(kg) :                     

Act.Wt.(kg) :                     

Amount :                     

Insurance :                     

Others :                     

Total :                     

NAME                     

P/U                     

Date                      Time                     

Ship                      P/U                     

Date                      Emp #                     

Sign                     

Name                     

Priority                      PUR #                     

GST No.                     

**PLEASE QUOTE THE ABOVE NUMBER IN FUTURE CORRESPONDENCE**

"In case this consignment contains anything of value, the company recommends insurance of the same. The company's liability on this shipment is limited to Rs. 5,000/- or cost of reconstruction whichever is lower."

FOC Code                      Cash (1) BCN/ Code                       
 Credit (2) BTP (4)  
 Cr. Card (3)

BCN/BTPNo.                     

Del. Date                      Time                     

Del. Emp #                      Sign                     

Name                     

Cash Memo #                     

Received above shipment in good condition. We agree to pay all charges including customs duties, taxes & GST as applicable.

CONSIGNEE'S NAME                     

SIGNATURE                      Relative Receiving                     

Special Instructions                     

**RETURN TO ORIGIN**

MAY 2022