

Full Title of the Project: For lying of proposed 350 mm i/d RCC NP2 pipe inlet channel form Fatehabad to Raw boosting Station & 200 mm i/d DI Pipe Rising Main form Raw Water Boosting Station to Water working at Village Gorakhpur Distt. Fatehabad.

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FORM 'A'

Form for seeking prior approval under section 2 of the proposals by the State Government and other authorities.

PART-1

(To be filled up by user agency)

1 i)	Project Details Short narrative of the proposal and project/For setting up scheme for which the forest land is required	For lying of proposed 350 mm i/d RCC NP2 pipe inlet channel form Fatehabad to Raw boosting Station & 200 mm i/d DI Pipe Rising Main form Raw Water Boosting Station to Water working at Village Gorakhpur Distt. Fatehabad.
ii)	Map showing the required forest land, boundary of adjoining forest on a 1:50000 scale map.	Yes, Map attached
iii)	Cost of the Project	Approx. 920.20 Lacs
iv)	Justification for locating the project in forest areas	Only access is taken from forest land
v)	Cost benefit analysis (to be enclosed)	As per Project Report
vi)	Employment likely to be generated	Employment opportunities for neighboring area.
2	Purpose wise break-up of the total land required	0.0434 Hect.
3	Details of displacement of people due to the project, if any	
i)	Number of families	NIL
ii)	Number of scheduled castes/scheduled tribe families	NIL
iii)	Rehabilitation plan (to be enclosed)	N.A.
4	Whether clearance under Environment (Protection) Act, 1986 required (Yes/No)	No
5	Undertaking to bear the cost of raising and maintenance of compensatory afforestation and/or panel compensatory afforestation as well as cost for protection and regeneration of Safety Zone, etc. as per the scheme prepared by the State Government (undertaking to be enclosed)	Undertaking certificate attached
6	Details of certificates/documents enclosed as required under the instructions	1. Project Map 2. Undertaking for cost of raising & maintenance of compensatory afforestation

Date:

Place:

State Serial No. of Proposal

Signature

Name _____
Designation _____
Address (of user agency) _____

Executive Engineer
Public Health Engg. Divn.
FATEHABAD

To be filled up by Nodal Officer with date & remarks