

(TO BE FILLED IN BY THE SECRETARY IN CHARGE OF FOREST DEPARTMENT OR BY ANY OTHER AUTHORISED OFFICER OF THE STATE GOVERNMENT NOT BELOW THE RANK OF AN UNDER SECRETARY)

## Recommendation of the State Government 18.

(Adverse comments made by any officer or authority In Part - B or Part - C or Part - D above should be Specifically commented upon)

Recommended

Date :-

Place :-

Signature Name & designation

(Official Seal)