

Rs.1000

# DHA OASIS KARACHI



2-B, East Street, Phase-I, Defence Housing Authority, Karachi  
Telephones: 9266801-5, 111 589 589, Fax :35886406  
Web Site: www.dhakarachi.org / E-mail:dha@dhakarachi.org

## MEMBERSHIP FORM

Read the Instructions carefully before filling

(All Columns must be filled in CAPITAL LETTERS)

<b>OFFICE USE ONLY</b>
Membership No. _____
Date _____

<b>SERIAL</b>

<b>PHOTO</b> (Please Paste)
<b>(Passport Size)</b> (Attested)

### PERSONAL PARTICULARS

- Name : Mr./Mrs./Miss./Mst. \_\_\_\_\_
- Marital Status : 

<input type="checkbox"/>	Married	<input type="checkbox"/>	Unmarried	<input type="checkbox"/>	Divorcee	<input type="checkbox"/>	Widower	<input type="checkbox"/>	Widow
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- CNIC No. 

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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- NICOP/POC No. 

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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- Passport No. \_\_\_\_\_
- Religion \_\_\_\_\_
- Sect \_\_\_\_\_ \* For Heirship Purpose only

### PROFESSIONAL INFORMATION

- Profession \_\_\_\_\_
- Place of Work/Duty \_\_\_\_\_

### ADDRESS

- Present/ Mailing Address \_\_\_\_\_  
\_\_\_\_\_
- Permanent Address: \_\_\_\_\_

### CONTACTS

- Tele Office: \_\_\_\_\_
- Residence : \_\_\_\_\_
- Mobile \_\_\_\_\_
- Fax: \_\_\_\_\_
- Email : \_\_\_\_\_

**PAKISTAN DEFENCE OFFICERS HOUSING AUTHORITY  
 DETAILS OF FAMILY MEMBERS  
 TO BE FILLED IN BLOCK LETTER**

<b>1.</b>	<b>FATHER'S NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
<b>2.</b>	<b>MOTHER'S NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
<b>3.</b>	<b>SPOUSE'S NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
	<b>Phone No.</b>		
<b>4.</b>	<b>CHILDREN OVER 18 YEARS</b>		
(1)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
(2)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
(3)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
(4)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>CNIC No.</b>		
<b>5.</b>	<b>CHILDREN UNDER 18 YEARS</b>		
(1)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>Child Registration No.</b>		
(2)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>Child Registration No.</b>		
(3)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>Child Registration No.</b>		
(4)	<b>NAME</b>	<b>PHOTO</b> (Passport size)	
	<b>Child Registration No.</b>		

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Note: Please use Extra Sheet if necessary.

Name: \_\_\_\_\_



**MEMBERSHIP FEE-BANK DRAFT/PAY ORDER**

Pay Order/BankdraftNo. \_\_\_\_\_ amounting toRs. \_\_\_\_\_

Dated \_\_\_\_\_ drawn on \_\_\_\_\_

on account of membership fee is attached.

**NAME** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

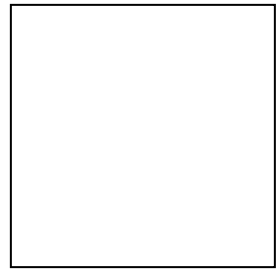
**TO BE SIGNED BEFORE DHA DESIGNATED OFFICER**

**Thumb Impression**

**Signature** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Signature** \_\_\_\_\_



**Male (Left) Female (Right)**

**RECOMMENDED**

Date \_\_\_\_\_

\_\_\_\_\_  
**Dy Director M/ship**

## **INSTRUCTION**

### **General**

1. All Pakistani citizens are eligible for membership.
2. Applicant is required to appear personally before the DHA designated officer for signatures, digital photograph and digital finger scanning.
3. All attached documents should be duly attested by Oath Commissioner/UC/District Chairman/ /Magistrate Class-I, Gazetted Officer (Grade-17 & above).
4. Original CNIC MUST be produced while appearing before DHA Designated Officer.
5. The Membership for the successful applicant in the Ballot is for 30 months (project duration).  
The membership will be granted for one year for subsequent transferees.
6. Any observation noted at the time of sign before has to be rectified prior to proceed further.
7. Any additional information pertaining to the family members may be incorporated using additional page.

### **COMPLETION OF FORM**

1. In case of more than one marriage, details of all wives to be attached.
2. All attached documents must be readable.
3. No overwriting/cutting/erasing is acceptable.
4. Incomplete forms will not be accepted.
5. No entry is to be left blank.
6. All columns must be filled in BLOCK/ CAPITAL LETTERS.

### **DOCUMENTS TO BE ATTACHED**

1. Pay Order/Bank Draft for Membership fee payable to "**DHA Housing Project DCK**".
2. Two latest passport size photographs duly attested (One on front & one on back).
3. Two copies of the CNIC/NICOP/POC duly attested.
4. Attested photocopy of Form 'B' for family members under 18 years of age.
5. Copy of Passport /CNIC/NICOP/POC of children over/under 18 years for persons having Overseas Pakistani Card.
6. Affidavit on Rs. 100/- Non Judicial stamp paper duly attested by Oath Commissioner (Specimen enclosed).
7. An amount of Rs.2000/- per membership will be paid as verification charges.

### **Note**

1. **For renewal of DHA City Membership at Sub Office Rawalpindi, please add Rs 2,000/- and 5,000/- for new membership.**
2. **Rs 5,000/- will be processing fee for transfer at Sub Office Rawalpindi.**

# DHA OASIS KARACHI

To be typed on Rs. 100/-  
Non Judicial Stamp Paper.

## AFFIDAVIT SPECIMEN

I, Mr/Mrs/Mst/Miss:\_\_\_\_\_ Son/Wife/widow/Daughter of  
\_\_\_\_\_Religion\_\_\_\_\_, adult, resident of \_\_\_\_\_  
\_\_\_\_\_ do hereby on solemn affirmation, state as  
under: -

1. That the particulars/information given in the attached membership form are correct to the best of my knowledge and belief. I also understand that my membership can be cancelled at any time for providing false information. I also agree to accept my registration of the **DHA OASIS KARACHI**.
2. That I agree to abide by the existing Rules/Byelwas and Regulations of the DHA Karachi, DHA City Karachi and DHA OASIS Karachi including the changes incorporated by the Authority from time to time.
3. That, I shall not claim refund of the registration fee in any case except only when my application for Membership is rejected by the Executive Board.
4. That I fully understand that this membership does not create any right to other facilities/ schemes in DHA Karachi or DHA City, Karachi.

**D E P O N E N T**