

# GOVERNMENT OF JAMMU AND KASHMIR Patnitop Development Authority

Kud, District Udhampur (J&K) Tele-fax: 01992-288146, 288129





#### **CORRIGENDUM TO PUBLIC NOTICE**

In view of in-climate weather conditions/forecast and ensuing Eid-ul-Fitr festival, the proposed treeking expedition has been rescheduled for 27.04.2023. The desirous person (male/femate) shall apply through online/offline mode as per prescribed application form enclosed as Annexure "A" by or before 25.04.2023. The offline Application Form shall be submitted in the office of Chief Executive Officer, Patnitop Development Authority, Kud District Udhampur. The online Application Form along with all the requisite documents in PDF Format shall be submitted on E-Mail ID patnitopdevelopmentauthority@qmail.com. The event details are as under:

(Day-1)	Arrival at 10.00 AM at Sanasar.
26.04.2023	
26.04.2023	Night Stay at Youth Hostel Patnitop
(Day-2)	Trekking from Sanasar to Sankhpal at 9.30 AM and back to
27.04.2023	Sanasar.

### **IMPORTANT INSTRUCTIONS**

- 1. The offline application form shall also be collected from the office of Chief Executive Officer, Patnitop Development Authority, Kud, District Udhampur.
- 2. The online application form together with instruction for filling up application form, will be available at the websites of Patnitop Development Authority (<a href="www.patnitop.nic.in">www.patnitop.nic.in</a>)
- 3. The desirous persons are advised to go through the instruction and all the eligibility condition prescribed for the trekking before filling the online application form.
- 4. Last date of filling of application form completes in all respect along with Application Fee of Rs.500/- (Non reffundabe) is 25.04.2023 up 2.00 PM.
- 5. For Online applications, the fee shall be desposited in the form of Demand Draft/RTGS/IMPS in favour of Accounts Officer, Patnitop Development Authority, Kud A/C No. 0827040500000001, J&K Bank, Kud, IFSC Code JAKA0KUDJAM.
- 6. The selection of the candidate(s) shall be made by the authority on the basis of random slection, in case, the number of applications cross the desired limit.
- 7. The selected candidates shall be informed telephonically/email, by or before 25.04.2023.
- 8. The selected candidates have to reach Sanasar on 26.04.2022 by 10.00 AM. No transport (To & Fro) shall be provided by the department. Only local transport facility i.e. Sanasat to Patnitop and Patnitop to Sanasar will be provided by this office.
- 9. Date of trekking expedition can be re-scheduled in case of adverse weather condition.

### **DOCUMENTS REQUIRED & TO BE ENCLOSED WITH THE APPLICATION FORM**

- 1. Medical Fitness Certificate from Competent Medical Authority for high altitude trekking.
- 2. Character Certificate from Police (SHO concerned).
- 3. Aadhar Card.
- 4. Covid Negative Report.
- 5. Self-Declaration/Indemnity Form.
- 6. Receipt of fee deposited.

(Sher Singh)JKAS Chief Executive Officer, PDA, Kud.

Dated: 20.04. 2023.

No: PDA/Adm- 560/106



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email: patnitopdevelopmentauthority@gmail.com



R/o

#### **Self-Declaration & Indemnity Form**

- In recognition of the inherent risks of the acitivity or tour in which I will engage, I
  confirm that I am physically and mentally capable of participating in the activity. My
  participation is voluntary and I will assume responsibility for personal injury, accidents,
  illness and damage to or loss of personal property as the result of any incident or
  accident that may occur.
- 2. If my behavior during the event is likely to cause distress or harm to me or to any other fellow trekker, the organizing authority reserves the right to terminate my tour at any time.
- 3. I am aware that participating in adventure sports like trekking has some inherent risks of illness, injury or death. This may be a result of the negligence of others, muselfy, forces of nature or other agencies khnown or unknown. Rescue and medical services may not be able to reach me in time.
- 4. I hereby authorize any medical treatment deemed necessary in the event of any emergency injury or mishap.
- 5. I recognize that as the provider of services, Organizing Authority eill operate under a convenant of good faith and fair dealing, but that it may be necessary to terminate any event or adventure excursion due to forces of nature, medical necessities or other resons. I accept their right to take such actions for the safety of all participants including me.
- 6. I understand that thought precautions will be taken to provide a safe and enjoyable experience, there can be no guarantee of absolute safety against illness, injury and/or accident, and that there are grave and unpredictable elements of risk in any adventure, sport or activity associated with the outdoors.
- 7. I agree that any film or photographs of me as a participant becomes the property of Organizing Authority and may be used for promotional and commercial purposes.

S/0.D/0

	Contact Number		declare
that I have read the above	Contact Number from carefully and understand the same.		ucciai c
Participant's Signature:			
Parent/Spouse/Guardian's	Signature:		
Date:			
Place:			
	In Case of Emergency		
Contact Name:	Relation with Participant:		
Contact Address:		_	
Contact Number:			



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Annexure-"A"

### **APPLICATION FORM**

1.	Name	e					
	S/O, D/O, W/O Affix Recen						
3.	Addr (A)	Permanent	Passport Photograph (Self Attested)				
		Tehsil District					
	(B)	Present					
		Tehsil District					
4.	Conta	act NumberAlternate NoEmail Id:_					
5.	Date	of Birth					
6. Profession							
7.	Heigh	tWeightBlood Group					
8. Health Condition (If you suffred from any disease, please specify)							
		declare that the information given by me is ture to the ge and belief.	e best of my				
Da	te:	Signature of Ap	oplicant				