

**GOVERNMENT OF PUNJAB**  
**DEPARTMENT OF SOCIAL SECURITY AND WOMEN AND CHILD**  
**DEVELOPMENT**  
**(DISABILITY CELL)**

NOTIFICATION

The 22<sup>nd</sup> November, 2019

No. S.O./C.A.56/2007/Ss.19 and 32/2019.- In exercise of the powers conferred by sub-section (2) of section 19 and clause (d) of sub-section (2) of section 32 of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (Central Act 56 of 2007), and all other powers enabling him in this behalf, the Governor of Punjab is pleased to make the following scheme for management of old age homes for the maintenance and welfare of parents and senior citizens, namely:-

**SCHEME**

1. **Short title and commencement.-** (1) This scheme may be called the Punjab Management of Senior Citizen Homes for Elderly Persons Scheme, 2019.

(2) It shall come into force on and with effect from the date of its publication in the Official Gazette.

2. **Definitions.-** (1) In this scheme, unless the context otherwise requires,-

(a) "Act" means the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 (Central Act 56 of 2007);

(b) "Department" means the Department of Social Security and Women and Child Development ;

(c) "Grantee" means any Non-Government Organization or Voluntary Association receiving grant-in-aid under clause 11 of the scheme;

(d) "Government" means the Government of Punjab in department of Social Security and Women and Child Development; and

(e) "Senior Citizen Homes" means homes registered under clause 3 of the scheme.

(2) The words and expressions used in this scheme, but not defined, shall have the same meaning as assigned to them in the Act and rules made there under.

3. **Manner of registration of Senior Citizen Homes.-** (1) All institutions of housing elderly persons, whether run by the Government or voluntary, shall be registered under this scheme, irrespective of being registered or licensed under any other Act for the time being in force.

(2) All such institutions shall make an application in **Form 1** together with a copy each of rules, byelaws, memorandum of association, list of governing body, office bearers, list of trustees, balance sheet of preceding three years, statement of past record of social or public service provided by the institution to the State Government and a declaration from the person with regard to any previous conviction record or involvement in any immoral act or that it has not been black listed by the Central or State Government;

(3) The State Government shall, after inspection that adequate provisions exist in the institution for the care and welfare of

elderly, health, education, boarding and lodging facilities, may issue a registration certification to such institution in **Form 2**.

(4) The State Government, where adequate facilities do not exist in the institution applying for registration, shall issue an order before the expiry of one month from the date of receipt of the application that the institution is not entitled for registration.

(5) The State Government, while taking a decision on the application for registration, may consider the following matters, namely:

- (i) registration of the institution under any law for the time being in force;
- (ii) details of physical infrastructure, water and electricity facilities, sanitation and hygiene, recreation facilities;
- (iii) financial position of the institution and maintenance of documents along with audited statement of accounts for the previous three years;
- (iv) arrangements of safety, security and transportation;
- (v) details of other support services run by the institution persons;
- (vi) details of linkages and networking with other governmental, non-governmental, corporate and other community based agencies on providing need-based services to elderly persons;
- (vii) details of existing staff with their qualification and experience;
- (viii) details of beneficiaries alongwith their AADHAAR numbers;

(ix) a declaration from the person or the institution regarding any previous conviction record or involvement in any immoral act; and

(x) any other criteria as specified by the State Government.

(6) The period of registration of an institution shall be five years, and it shall be subject to renewal in every five years.

(7) The State Government shall conduct a detailed inspection or review annually after registration with regard to the facilities, staff, infrastructure, and compliance with the adequate standards of care, protection and management of the institution.

(8) If the inspection or the annual review reveals that there is unsatisfactory compliance with the standards of care, protection, and management of the institution or the facilities are inadequate, the State Government may, at any time, serve notice on the management of the institution and after giving an opportunity of being heard, declare within a period of sixty days from the date of the detailed inspection or annual review, as the case may be, that the registration of the institution, shall stand withdrawn or cancelled from a date specified in the notice and from the said date, the institution shall cease to be an institution.

(9) When an institution ceases to be an institution registered under this scheme, that house shall be managed by the State Government.

(10) All institutions shall be bound to seek renewal of registration three months prior to the expiry of the period of registration and in case of their failure to seek renewal of registration before the expiry of the period of registration of the institution, the

institution shall cease to be an institution registered under sub-clause (3) and provisions of sub-clause (8) of this clause shall apply.

(11) An application for renewal of registration of an institution shall be disposed of within sixty days from the date of receipt of application.

(12) The decision on renewal of registration shall be based on the annual review done in the year in which the renewal is sought.

4. **Committees.-** (1) The State Government shall constitute a State Grant-in- Aid Committee and the District Level Inspection Committees.

(2) The State grant-in-aid Committee shall comprise of four members, namely:-

- |       |  |                  |
|-------|--|------------------|
| (i)   | Director, Department of Social Security and Women and Child Development; | Chairman         |
| (ii)  | Additional Director, Social Security;                                    | Member           |
| (iii) | Joint Director, Social Security;   | Member           |
| (iv)  | Deputy Director, Social Security.  | Member-Secretary |

(3) The State grant-in-aid Committee shall be responsible for approval of the applications for grant-in-aid and shall submit a report to the Government.

(4) The District Level Inspection Committee shall comprise of following members, namely:-

- |       |                                   |                  |
|-------|-----------------------------------|------------------|
| (i)   | Deputy Commissioner;              | Chairman         |
| (ii)  | Civil Surgeon;                    | Member           |
| (iii) | District Social Security Officer; | Member-Secretary |

(iv) two members of the civil society working in the area of welfare of senior citizens; and

(v) two representatives of the District Red Cross Society.

(5) The District Level Inspection Committee shall inspect all the Senior Citizen Homes in the district as per norms specified in **Form 3.**

(6) The inspection of the facilities provided to the housing elderly persons in the district shall be carried out at least once in every three months.

(7) The District Level Inspection Committee shall submit the report of the findings to the State Government and shall also make suggestions for improvement and development of the Senior Citizen Homes.

(8) The District Level Inspection Committee shall interact with the elderly persons during the visits to the institution to determine their well-being and to elicit their feedback.

(9) The District Social Security Officer shall take necessary follow up action on the report of the District Level Inspection Committee.

4. Admission in the Senior Citizen Home.- **(1) The Deputy Commissioner of the district concerned is the final authority to provide orders authorizing the admission of elderly persons in Homes. However, in case of odd hours or emergency, the Additional Deputy Commissioner or the Sub-Divisional Magistrate or the District Social Security Officer, as the case may be, can issue orders for short period of stay.**

(2) At the time of admission of persons to Senior Citizen Home, the following documents are required; namely:-

- (a) Application form;
- (b) Age proof (Aadhar Card or Voter Card or Voter List or Marksheet of 10<sup>th</sup> Class or Retirement Certificate or in case of Orphan, Self Declaration or Certificate from Civil Surgeon is sufficient) and,
- (c) Will of Property and list of belongings for the future course of action

5. Release from Senior Citizen Home:- (1) The Deputy Commissioner of the district concerned is the final authority to provide releasing orders. However, in case of odd hours or emergency, the Additional Deputy Commissioner or the Sub-Divisional Magistrate or the District Social Security Officer can issue orders which are to be ratified by the Deputy Commissioner.

(2) A resident can be released from Senior Citizen Home on following grounds, namely:-

- (a) on mutual consent of family after the conciliation;
- (b) on self-declaration by resident;
- (c) on application of guardian with the consent of senior citizen; and
- (d) on any complaint received from majority of residents.

**6. Death of a person.-** (1) On the occurrence of death of a person in a Senior Citizen Home, the procedure to be adopted shall be as under, namely:-

- (i) the Home must ensure that the Civil Surgeon or the Senior Medical Officer concerned must declare such person's death;

(ii) the Home must inform any family member of such person and the body of the person shall be handed over to the relatives or, in the absence of any claimant, the last rites shall be performed under the supervision of the person-in-charge of the Home according to his ritual rites and after retaining a photograph of the person for future reference;

(iii) the Home must inform the District Administration and the Municipal Corporation or the Municipal Committee or Panchayat, as the case may be, for the purpose of issuance of death certificate.

**7. Programmes admissible for assistance under the Scheme.-**

(1) An estimate of the funds and other logistics required for each Old Age Home having a capacity of one hundred and fifty persons, being built and managed by the Department has been worked out after consideration of various relevant factors. The head-wise figures are described in Annexure 1 to 8.

**OPTION 1**

<b>Estimated cost for Government managed Senior Citizen Home (150 Residents) including construction of building</b>			
<b>S.No.</b>	<b>Head</b>	<b>Reference</b>	<b>Expenditure (in Rupees)</b>
1	Land	Annexure -1	2,00,00,000
2	Physical Infrastructure	Annexure -2	3,40,00,000
3	Manpower	Annexure -3	28,23,600
4	Non- Recurring Expenses	Annexure -4	67,40,000
5	Furnishings, linen, etc	Annexure -5	14,68,500
6	Clothing	Annexure -6	61,95,000
7	Toiletries	Annexure -7	10,67,400
8	Diet	Annexure -8	45,18,000
<b>TOTAL</b>			<b>7,68,12,500 (7.07 crores)</b>

(2) The Department can collaborate with Non-Government Organizations or Voluntary Associations and provide financial assistance to run the Senior Citizen Homes. The Senior Citizen Homes, run by the said organizations can be adopted by the Government. In case, the Government chooses to adopt the Senior Citizen Homes, the estimated costs shall be as under with an assumption that the land and building cost shall not have to be borne by the Government; namely:-

**OPTION 2**

<b>Estimated cost (to the Government) of adopting a Senior Citizen Home (150 residents) run by an NGO was worked out likewise.</b>			
<b>S.No.</b>	<b>Head</b>	<b>Reference</b>	<b>Expenditure (in Rupees)</b>
1	Manpower	Annexure -3	28,23,600
2	Non-Recurring Expenses	Annexure -4	67,40,000
3	Furnishing, linen etc	Annexure -5	14,68,500
4	Clothing	Annexure -6	61,95,000
5	Toiletries	Annexure -7	10,67,400
6	Diet	Annexure -8	45,18,000
<b>TOTAL</b>			<b>2,28,12,500 (2.03 crores)</b>

**8. Collaboration.-** The Government shall collaborate with existing Senior Citizen Homes being run by the Non-Governmental Organizations and Voluntary Associations in the State of Punjab.

**9. Eligibility criteria for the Non-Government Organization or Voluntary Associations for assistance under the Scheme.-**

The eligibility criteria for the Non-Government Organizations or the Voluntary Associations for assistance under as per option 2 under clause 8 is as under, namely:-

- (a) The Non-Government Organizations or Voluntary Associations should be a registered body under the Societies Registration Act, 1860 or licensed under the Companies Act, 2013 or any other law for the time being in force or a Public Trust registered under any law for the time being in force;
- (b) The Non-Government Organizations or Voluntary Associations should be a registered organization under this scheme;
- (c) All Non-Government Organizations or Voluntary Associations shall comply with statutory approvals and clearances as applicable;
- (d) The Non-Government Organizations or Voluntary Associations should have an experience of working at least two years for the welfare of public at large;
- (e) The said organization shall have a properly constituted managing body with its powers, duties and responsibilities clearly defined and laid down in a

written Constitution. It shall have an appropriate administrative structure and a duly constituted Managing Committee or Executive Committee;

- (f) The organization is initiated and governed by its own members on democratic principles;
- (g) The aims and objects of the organization and programmes in fulfilment of those aims and objects are specifically laid down;
- (h) The organization shall not run for profit to any individual or a body of individuals;
- (i) The organization should possess proven credentials and capabilities to handle such projects; and
- (j) All the members of the organization must be active members, there shall not be any bogus or sleeping member, if found, any such organization shall be barred.

**10. Procedure for submission of proposals and release of**

**grant-in-aid.-** (1) Any Non Government Organization or Voluntary Association who wishes to receive grant-in-aid as per option 2 under clause 8 shall make an application in **Form 1** to the District Social Security Officer who shall forward the same to the Director Social Security alongwith the recommendations of the District Level Inspection Committee.

(2) The application form shall clearly indicate the target group of beneficiaries to be covered and in addition to the documents mentioned under sub-clauses (2) and (5) of clause 3, the following additional documents are required, namely:-

- (i) information relating to the grants received or likely to be received from other departments of the Government of Punjab or any other source for the same project; and
  - (ii) a bond in a format specified by the Government, on a non-judicial stamp paper, for the amount of grant-in aid being sought, duly executed by the controlling authority of the institution or organization.
- (3) On basis of the recommendation of the District Level Inspection Committee, the grant-in-aid shall be released by the State Grant-in-Aid Committee. The recommendations for arrears of grants shall be considered only if there is also a specific recommendation for the release of grant-in aid for the current financial year.
- (4) The grantee shall be open to inspection by any officer of the State Government or any agency or any person or persons authorized in this behalf including third party inspections at any time.
- (5) If grantee has already received a grant from some other Government sources for the purpose for which the application is being made under this Scheme, the assessment for grant shall normally be made after taking into account the grant received from such other sources.

- (6) The grantee shall maintain a separate joint or current account in the name of the President or Secretary of the organization or association for the grants received under the Scheme, which shall be open to inspection or audit at any time by the Comptroller and Auditor-General of Punjab or any officer deputed by the Government in this behalf. Where the grantee is State Government, the District Social Security Officer concerned shall be the Drawing and Disbursing Officer for the grants received under this scheme.
- (7) The grantee shall maintain a separate record of all assets acquired wholly or substantially out of the Government grant in the Stock Register which shall be open to inspection or audit at any time by Comptroller and Auditor-General of Punjab or any officer deputed by the Government in this behalf.
- (8) If State Government is not satisfied with the conduct of grantee or finds that the rules or guidelines prescribed are being violated by the grantee, it reserves the right to terminate the grant-in-aid and may recover the amount of grant-in aid already sanctioned with interest.
- (9) The grantee shall change the location of the Home only with the prior approval of the Government.

**11. Management and Monitoring of Senior Citizen Homes.-**

(1) If such grantee fails to provide the necessary amenities as specified in section 19 of the Act, as amended from time to time, Government, after following the due procedure, may terminate the grant to such institutions.

(2) The following minimum standards are to be followed by the grantee, namely:-

(a) Nutrition – Variety of food stuff (as per local conditions) in an adequate quantity, good quality and containing an average of 1700 calories and 50 grams protein shall be provided to the beneficiaries every day. The daily indicative menu shall be clearly mentioned on notice board.

Morning Tea	Coffee/ Tea and Biscuits/ Rusks/ Fan Puffs
Breakfast	Daliya/ Cornflakes (with Milk)/ Idli/ Vada/ Upma/ Oats/ Poha/ Chiwda/ Parantha/ Toast/ Paav/ Dhokla (daily) PLUS Boiled Egg or Seasonal Fruit (twice a week)
Lunch	Chapati, Rice, Dal/ Sambhar, One Green Vegetable, Curd, Salad (daily) PLUS Special Meal ( Veg/Non-Veg) and Sweet (Halwa/ Kheer, etc) (once a week)
Evening Tea	Coffee/ Tea and Biscuits/ Rusks/ Fan Puffs
Dinner	Chapati/ Rice/ Dosa/ Utthapam, Dal/ Sambhar, One Seasonal Vegetable/ Khichdi

(The above menu is only of indicative in nature. Grantee can suitably modify the Menu to suit the inmate’s palate/ tastes, amounting to 1700 calories in a day)

(b) Medical facilities/ Medicare- The grantee shall have a first aid kit (as advised by the Doctor), glucometer, BP monitoring machine, weighing machine and general medicines as prescribed by the Doctor. The grantee must ensure presence of

doctor 24X7 or a tie up with the Civil Hospital to deal with emergencies.

- (c) Physical aids and assisted living devices– Devices such as wheelchairs, hearing aids, dentures, spectacles, crutches, walkers, etc. shall be made available to the residents under RASHTRIYA VAYOSHRI YOJANA (RVY). The grantee may place requirement (in pro forma prescribed in RVY) of assistive devices to Artificial Limbs Manufacturing Corporation (ALIMCO) (implementing agency of RVY) through District Administration. The District Administration shall forward the application for requirement of devices to Artificial Limbs Manufacturing Corporation (under intimation to this Ministry).

Where the Government is the grantee, the requirement of devices for the inmates of the projects shall directly be placed to the Artificial Limbs Manufacturing Corporation by the District Administration concerned.

- (d) Recreation – At each centre, the implementing agency must provide books, 3-4 Magazines, 2-3 newspapers (in regional/ local language), Outings at nearby places (1 in a month)-religious/ cultural, Games like caroms, chess, cards, one cable connection, one computer with internet connection, with a separate reading room.
- (e) The grantee shall ensure the services of minimum staff as specified in the Annexure -3.
- (f) Security- The necessary security arrangements shall be made in the centres by the grantee.

- (g) Clothing – Keeping in view the local climate, weather conditions and traditional norms, all the residents must be provided clothing articles as per Annexure -6.
- (h) Rooms – Properly ventilated rooms with sufficient space between the beds for the easy movement of the residents shall be provided alongwith provision for storage of the belongings of the beneficiaries. Floors shall be anti-slippery.
- (i) Bathrooms and toilets –The grantee must ensure separate toilets for females and males. There shall be at least one toilet with western style fixed or removable commodes. The grantee shall have ramp facilities and railings for easy access to the inmates at bathrooms and toilets, wherever required. The bathrooms and toilets shall have anti-slippery tiles and railings for hand support.
- (j) Hygiene and Sanitation- All the rooms, veranda or courtyard, kitchen , bathrooms and toilets shall be cleaned at least two times a day.
- (k) The grantee shall make miscellaneous payments including payments for electricity, water, internet, stationery, postage, maintenance of furniture, generator or inverter, cost of fuel for cooking, replacement of bed sheets.
- (l) Non-Recurring expenditure shall be provided as per norms specified in Annexure-4.

FORM1  
[(See clauses 3(2) and 11(1)]  
APPLICATION FOR REGISTRATION OF SENIOR CITIZEN HOME  
(Whether or not seeking grant-in-aid) UNDER THE PUNJAB  
MANAGEMENT OF SENIOR CITIZEN HOMES FOR ELDERLY  
PERSONS SCHEME, 2019

**(For 1<sup>st</sup> Instalment and New Cases)**

**PART A**

1. Detail of Applicant/ Institution which proposes to run the Senior citizen home:

- (i) Type of Institution .....
- (ii) Name of the Institution / Organization.....
- (iii) Registration number and date of Registration of the Institution/ Organization under the relevant Act (Annex-Relevant documents of registration and bye-laws, memorandum of association).....
- (iv) Period of validity to run the Institution / Organization.....
- (v) Complete address of the Applicant/ Institution/ organization.....
- (vi) STD code/ Telephone No.....
- (vii) STD code/ Fax No.....
- (viii) E-mail address.....
- (ix) Capacity of the organisation.....
- (x) Whether the organization is of all India character, if yes, give address of its branches, in other states.....
- (xi) Whether the Institution/ Organization had been denied registration earlier Yes/No
- (xii) Ref. No. of application which resulted in denial of registration as senior citizen home
  - a) Date of denial.....

b) Which department has denied the registration.....?

(xii) Reason for denial of registration as senior citizen home.....

2. Details of the proposed senior citizen home

(i) Name of the proposed senior citizen home .....

(ii) Type/Kind of senior citizen home .....

(iii) Complete address/ location of proposed senior citizen home or organization

(iv) STD code/ Telephone No.....

(v) STD code /Fax No.....

(vi) E-mail address.....

3. Connectivity (Name and Distance from the proposed senior citizen home):

(i) Main Road.....

(ii) Bus –stand.....

(iii) Railway Station.....

(iv)Any landmark.....

(v) Nearest Hospital.....

4. Infrastructure

(i) No. of Rooms (Mention with measurement).....

(ii) No. of toilets (mention with measurement).....

(iii) No. of Kitchen (mention with measurement) .....

(iv)No. of sick room.....

(v) Annex -Copy of blue print of the building (authentic sketch plan of building)...

(vi) Arrangement to deal with unforeseen disaster also mention the kind of arrangement made:

(i) Fire

(ii) Earthquake

(iii) Any other arrangement

(iv) Arrangement of Drinking water

(v) Arrangement to maintain sanitation and hygiene:

(vi) Pest Control

(vii) Waste disposal

(viii) Storage area

- (ix) Any other arrangement
- (x) Rent agreement/ building maintenance estimate  
(whichever is applicable)(Annex- copy of Rent agreement)

## 5. Facilities Available

- (i) Recreational facility.....
- (ii) Health Checkup arrangement, frequency of checkup, type of checkups proposed to be done.....
- (iii) Any other facility that shall impact the overall development of the senior citizen....

## 6. Staffing

- (i) Detailed staff list.....
- (ii) Education and Experience of the staff .....
- (iii) Name of partner organizations
- (iv) Name of the chief functionary of the organization

## 9. Background of the Applicant (Institution / Organization)

- (i) Major activities of the organization in last two years a. (Annex copy of Annual Report
- (ii) An updated list of members of the management committee/ governing body in the enclosed format (Annex- resolution of the annual meeting)
- (iii) List of assets/ infrastructure of the organization
- (iv) Details of existing bank account of the home indicating branch code account no.
- (v) Balance sheet of the organization.

I have read and understood

- a) The Maintenance and Welfare of Parents and Senior Citizens Act 2007
- b) Senior-Citizens-Act-2012-Punjab rules
- c) The Punjab Management of Senior Citizen Homes for Elderly Persons Scheme,2019

I declare that no person associated with the organization has been previously convicted or has been involved in any immoral act or in any act of child abuse or employment of child labour and that the organization has not been blacklisted by the Central or the State Government at any point of time.

.....(Name of the Organization / Institution) has complied with all the requirements to be granted registration as a

SENIOR CITIZEN HOME under THE PUNJAB MANAGEMENT OF  
SENIOR CITIZEN HOMES FOR ELDERLY PERSONS SCHEME, 2019

I undertake to abide by all the conditions laid down by the Central/  
State Act, Rules, Guidelines and Notifications in this regard.

Signature of the authorized signatory: .....

Name:

Designation:

Address.....

District.....

Date.....

Office stamp: Signature of:

Witness no.1: .....

Witness no.2: .....

**PART – B** (ADDITIONAL INFORMATION TO BE FILLED BY NON-  
GOVERNMENTAL ORGANISATIONS SEEKING GRANT-IN-AID)

1. Financial year for which grant-in-aid is applied	<div></div> <div></div>
2. Name of Organisation	<div></div> <div></div>
3. a) Nature of the Project	<div></div> <div></div>
b) Date of commencement of the Project	<div>____ / ____ / ____</div>
c) Year of Commencement of Grant-in-aid from Punjab Government for the Project	<div></div> <div></div>
d) Whether the Project is recognised by the Deputy Commissioner	<div>Yes/No</div>
4. Date of Registration of the Organisation	<div>____ / ____ / ____</div>
5. Address of Registered Office	<div></div> <div></div> <div>TELEPHONE NO.:</div> <div>Email:</div>
6. a) Complete Address of location/ location	<div></div> <div></div>

where programme/ project/ scheme is being implemented	
b) Nearest Railway Station/Bus stand	<div></div>
7. Whether building is	OWNED / RENTED / ON LEASE / DONATED  (Please indicate ✓ against appropriate box)

\*Please indicate: Type of Project

8. a) Is the building being utilized exclusively for this Programme?	<div></div>
b) If no, provide details of usage	<div></div>
9. a) Covered Area	<div></div> (in sq. metres)
b) Number of rooms	<div></div>
10. Whether separate project-wise accounts have been maintained for grants sanctioned earlier?	Yes/No
11. Whether bank statement attached?	Yes/No

12.Details of bank accounts in which grant-in-aid released during previous financial year:

S. No.	Grant-in-aid for Financial	Sanction Letter Number	Dated	Recurring Amount	Non-recurring Amount	Bank A/c No.	Name and Address of	Person Operating the Joint
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	al Year	r			t		Bank	Accoun t
1.								
2.								

12. Whether the statements of accounts submitted along with the application:

(Please indicate ✓ against appropriate box)

13. List of other sources of grant- in – aid funding (if any )with the name of the scheme / project , purpose amount, etc. (separately)

14. The amount of support sought from the Punjab Government for the year

Cost Head Group	Rs. (lakhs)
(a) Recurring	
(b) Non-recurring	
(c) Total	

15. Whether List of Beneficiaries added as per Form – I	Yes/No
16. Whether List of Managing Committee added as per Form – II	Yes/No
17. Whether List of Employees added as per Form – III	Yes/No
18. Whether the Organisation is registered with NITI AAYOG in the NGO-PS Portal? If so, indicate the registration	Yes/No

number.	
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(mark✓above against the appropriate box)

19. Financial year for which grant-in-aid is applied	<div></div> <div></div>
20. Name of Organisation	<div></div> <div></div>
21. e) Nature of the Project	<div></div> <div></div>
f) Date of commencement of the Project	<div> <div></div> <div>/</div> <div></div> <div>/</div> <div></div> </div>
g) Year of Commencement of Grant-in-aid from Punjab Government for the Project	<div></div> <div></div>
h) Whether the Project is recognised by the Deputy Commissioner	<div>Yes/No</div>
22. Date of Registration of the Organisation	<div> <div></div> <div>/</div> <div></div> <div>/</div> <div></div> </div>
23. Address of Registered Office	<div></div> <div>TELEPHONE NO.:</div> <div>Email:</div>
24. c) Complete Address of location/ location where programme/ project/ scheme is being implemented	<div></div> <div></div>
d) Nearest Railway Station/Bus stand	<div></div> <div></div>
25. Whether building is	<div>OWNED / RENTED / ON LEASE / DONATED</div> <div>(Please indicate ✓ against appropriate box)</div>

\*Please indicate: Type of Project

26.	
c) Is the building being utilized exclusively for this Programme?	
d) If no, provide details of usage	
27.	
c) Covered Area	(in sq. metres)
d) Number of rooms	
28. Whether separate project-wise accounts have been maintained for grants sanctioned earlier?	Yes/No
29. Whether bank statement attached?	Yes/No

30. Details of bank accounts in which grant-in-aid released during previous financial year:

S. No.	Grant-in-aid for Financial Year	Sanction Letter Number	Date	Recurring Amount	Non-recurring Amount	Bank A/c No.	Name and Address of Bank	Person Operating the Joint Account
1.								
2.								

31. Whether the statements of accounts submitted along with the application:

(Please indicate ✓ against appropriate box)

32. The amount of support sought from the Punjab Government for the year \_\_\_\_\_

Cost Head Group	Rs. (lakhs)
(a) Recurring	
(b) Non-recurring	

(c) Total	
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33. Whether List of Beneficiaries added as per Form – I	Yes/No
34. Whether List of Managing Committee added as per Form – II	Yes/No
35. Whether List of Employees added as per Form – III	Yes/No
36. Whether the Organisation is registered with NITI AAYOG in the NGO-PS Portal? If so, indicate the registration number.	Yes/No

(mark✓/above against the appropriate box)

FORM 2  
[See clause 3(3)]  
Government of Punjab  
Department of Social Security and Women & Child Development  
(Disability Branch)

**CERTIFICATE OF REGISTRATION**

(UNDER THE PUNJAB MANAGEMENT OF SENIOR CITIZEN HOMES FOR ELDERLY PERSONS SCHEME, 2019)

After perusal of the documents submitted as per Form 1 is granted registration No.....as a SENIOR CITIZEN HOME UNDER THE PUNJAB MANAGEMENT OF SENIOR CITIZEN HOMES FOR ELDERLY PERSONS SCHEME, 2019 with effect from..... for a period of .....years.

The..... (Name of the Institution) which has the capacity of..... Senior citizens shall remain bound to follow the following Act, Rules and Scheme guidelines framed by the Central/ State Government and any changes made therein from time to time.

a) The Maintenance and Welfare of Parents and Senior Citizens Act 2007

b) Senior-Citizens-Act-2012-Punjab rules

c) THE PUNJAB MANAGEMENT OF SENIOR CITIZEN HOMES FOR ELDERLY PERSONS SCHEME, 2019

Dated this ..... Day of ..... 20

.....  
(Signature) Seal

(Director, Department of  
Social Security and  
Women & Child  
Development)

FORM 3  
[See clause 4(5)]  
INSPECTION FORM BY INSPECTION COMMITTEE  
(Fill as applicable)

Date of visit: ..... Time of visit: .....

Name of the officials inspecting the Home:

- 1. ....
- 2. ....
- 3. ....

**A. General Information:**

i. Name and address of the Organisation:

.....  
.....  
.....

ii. Registration No. (Under THE PUNJAB MANAGEMENT OF SENIOR CITIZEN HOMES FOR ELDERLY PERSONS SCHEME, 2019 ):

.....  
Date of issue : .....  
Date of expiry : .....

iii. Complete address of the senior citizen home :

.....  
.....  
.....

iv. Name of the Officer/Person-in-Charge:

.....

v. Contact No: ..... Email Id:

.....

vii If Aided/supported: by State Government, Name of the Department:

viii If run by Government:

**B. Status of Senior citizens:**

(i) Sanction capacity of the Home.....

(ii ) Are senior citizen of both sexes kept in the same home Yes No  
If yes, number of such male/female senior citizen as on  
today.....

( iii) Are the bathing and sleeping facilities maintained separately? Yes  
No.....

**C. Infrastructure:**

- Building: • Rented:..... Owned.....
- Are CCTV cameras installed at the entrance Yes No
- Security Adequate Inadequate
- Sufficient space to accommodate the senior citizens: Yes No
  - Space available:

No. of rooms / dormitories	Details (whether well-maintained or not – ventilation/clothing/bedding/lockers/hygienic)
-------------------------------	---

Provision of sick room / medical unit for senior citizens	
Counseling room	
Recreational / activity room for senior citizens <ul style="list-style-type: none"> <li>• Is there a TV set available with Cable network</li> <li>• Any other recreational activities, etc. (Please specify)</li> </ul>	
Kitchen / Dining Room Adequate water supply for washing, cooking	Adequate/inadequate
Number of toilet/bathrooms for senior citizens	Adequate/inadequate
Open space for outdoor activities	Adequate/inadequate

**D. Services provided to the children:**

- Medical facilities/ Maintenance of Health Cards:  
.....
- Nutrition / Special Diet:  
.....
- Provision of safe drinking water:  
.....
- Is the number of senior citizen helpline (1098) displayed near the phone Yes No
- Counselling/ Guidance services/physiotherapist, etc. provided :  
.....  
.....
- Other programmes and activities initiated:  
.....

**E. Staff Details :**

S.N.	Name	Designation	Date of Joining	Attendance at the time of visit	Remarks

**F. Senior Citizen Committee / Management Committee**

- Formation of Senior Citizen Committee / Management Committee:
- Date of constitution of Management Committee and frequency of meetings held :  
.....  
....

**G. Record Maintenance :**

Staff attendance register	
Senior citizen attendance register	
Medical file / medical cards	
Personal belongings register	
Management Committee – minutes register	
Nutrition / Diet File	
Any other record maintained YES NO(please specify)	

Observations/ Remarks:

.....

Name of inspection Committee member:

Signature:

Name of inspection Committee member:

Signature:

Name of inspection Committee member:

Signature:

Name of inspection Committee member:

Signature:

**List of Documents to Be Submitted Along with Application for 1<sup>st</sup>Instalment or New Case**

- Accounts in 4 parts for the project for which grant-in-aid is sought and for the institution as a whole.
  - Income & Expenditure Statement
  - Receipt & Payments Statement
  - Balance Sheet
  - Auditors Report
- Activity Report of the Institution for the previous year.
- Budget Estimates for the project for current year
- Details of Beneficiaries.
- Details of the Managing Committee.
- Details of Employees.
- Copy of Registration Certificate

- h. Memorandum of Association / bye-laws / Articles.
- i. Utilization Certificate in respect of grants released in the previous year

Note: In the case of new projects, accounts should be audited and the accounts submitted for the preceding two years. The requirement of Utilisation Certificate (UC) does not apply in such cases.

**ANNEXURE -1**  
**(See Clause 3)**

**Calculation of costs for an Old Age Home for 150 residents**

**LAND:**

- Total Requirement: Covered Area 28300 sq. ft.+ Open Area (7000 sq. ft.) = 35300 sq. ft.
- Cost of Purchase: Rough estimate Rs.1.5 crore to Rs 2.0 crore, depending upon the location.
- Purchase: Land purchase cost for area of 28300+7000=35300 sq. ft. would vary from location to location; but funds are a major constraint.
- Lease: Land can be taken on lease from Red Cross or some Government Department or institution but availability is a constraint
- Donations: Land can be sought as donation from individuals/s through public advertisements but there is no certainty that such offers will be forthcoming.

**ANNEXURE -2**  
**(See Clause 3)**

**Calculation of costs for an Old Age Home for 150 residents**

**Physical Infrastructure:**

Sr. No.	Facility	Area in sq. ft.for 150 residents
1	Room(15*15=225) attached bathroom X (50)=225+50=275*75 rooms	20625
2	Superintendent Room	225
3	Office Room	225
4	Dining + Kitchen + Store	2000
5	Common Entrance & Corridor	3000
6	Recreational Room	1000
7	Library	250
8	Doctor/Dispensary Sick Room	250
9	Store	500
10	Counseling Room	225
	<b>Total Covered Area</b>	<b>28300</b>
	Cost of Construction per sq.ft.@ Rs.1200	
	<b>Total Cost of Construction (approx.) =</b>	<b>Rs.3.40</b> <b>crore</b>
<b>Open area required, approximately 7000 sqft</b>		

**ANNEXURE - 3**  
**[See Clause 10 (2)(e)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Manpower:**

<b>Sr. No.</b>	<b>Category/Post</b>	<b>Qualification</b>	<b>No. of Vacancies</b>	<b>Salary Per Month</b>	<b>Annual Expenditure</b>
1	Superintendent	Graduate with minimum experience of 3 years in managing a similar centre.	1	15,000	1,80,000
2	Counselor	Post-graduate in Social Work/ Psychology to assess the emotional status of residents and to provide counselling services. Should attend 2 hours every day.	1	10,000	1,20,000
3	Yoga Teacher/Trainer	A trained yoga instructor who must visit the centre at least thrice a week for a minimum of one	1	1,500	18,000

		hour per visit.			
4	Attendant (Male and Female)	Trained attendants, male and female to provide nursing and basic geriatric care.	6	10,000	7,20,000
5	Cook		2	8,500	2,04,000
6	Cook cum helper		2	8,200	1,96,800
7	Sweeper	4 hours per day	2	6000	1,44,000
8	Caretaker		6	8200	5,90,400
9	Security Guard		6	8200	5,90,400
10	Doctor	Civil Hospital	0	0	0
11	Miscellaneous Expenditure (OE, Computer etc.)			<b>5000*12</b>	<b>60,000</b>
<b>TOTAL Rs.</b>					<b>28,23,600 lac</b>
	* All health-related government schemes (OPD/IPD) will be provided to all residents living in the old age home as per need.				

**ANNEXURE - 4**  
**[See Clause 10 (2)(1)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Non-Recurring Expenses:**

<b>Sr.No.</b>	<b>Item/Facility</b>	<b>Quantity</b>	<b>Cost per Unit</b>	<b>Total Cost Rs.</b>
1	Beds	150	5,000	7,50,000
2	Almirah	150	10,000	15,00,000
3	Dining table set for 150			3,00,000
5	Office chairs	30	1,500	45,000
6	Library chairs	50	1,500	75,000
7	Library almirah	15	10,000	1,50,000
8	Computer set	3	60,000	1,80,000
9	Computer table	3	5,000	15,000
10	TV ( 50 inch)	1	1,00,000	1,00,000
11	Kitchen utensils	Full set	5,00,000	5,00,000
12	Washing machine 7 ltr fully automatic	6	25,000	1,50,000
13	Refrigerator 290 ltr	3	30,000	90,000
14	Deep freezer	3	45,000	1,35,000
15	Geyser	75	10,000	7,50,000
16	Cooler	100	8,000	8,00,000
17	CCTV (complete set)	6	50,000	3,00,000
18	Ro commercial	3	50,000	1,50,000
19	Water cooler 50 ltr	3	50,000	1,50,000
20	Contingency (minor repair,			6,00,000

	sticks, walker, fire extinguisher etc. as per requirement			
<b>Total expenditure Rs.</b>				<b>67,90,000</b>

**ANNEXURE - 5**  
**[See Clause 10 (2)(h)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Furnishings and Linen:**

Sr.No.	Item	Priovision per Person	Rate per unit Rs.	Total Exp. Rs.	Total Exp. @ 150 Rs.
1	Mattress	1 per 2 years	1,950	1,950	2,92,500
2	Cotton durries	1 per 4 years	650	650	97,500
3	Cotton Bed Sheet & Pillow cover	2 at the time of admission and subsequently 2 after every 6 months	350	1,400	2,10,000
4	Cotton Blanket/Khes	2 at the time of admission and subsequently 1after every 1 year	700	1,400	2,10,000

5	Cotton filled quilt	1 1 at the time of admission and subsequently 1 after every 2 years ( in addition to blanket)	950	950	1,42,500
6	Cotton Towels	2 per quarter	180	1440	2,16,000
7	Curtains	4 per bed room	500	2,000	3,00,000
<b>TOTAL</b>				<b>9790</b>	<b>Rs.14,68,500</b>

**ANNEXURE - 6**  
**[See Clause 10 (2)(g)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Clothing for Women:**

Sr. No.	Item	Quantity	Rate per unit	Total Exp. (Annual)	Total Exp. @150
1	Salwar Kameez	5 sets per season ( 6 months)	1000	10,000	15,00,000
2	Undergarments	4 sets per quarter	150	2400	3,60,000
3	Woolen Sweaters	4 per season	400	3200	4,80,000

	( Full Sleeves)				
4	Woolen Shawls & scarf/Cap	2 per season	500	2000	3,00,000
5	Nightwear	2 sets per quarter	500	4000	6,00,000
6	Socks	3 sets per quarter	50	600	90,000
7	Shoes	2 per six month	500	2000	3,00,000
8	Handkerchiefs	2 per month	25	600	90,000
9	Slippers	1 half yearly	150	300	45,000

**Clothing for Men**

Sr.No.	Items	Quantity	Rate per unit	Total Exp. (Annual)	Total Exp. @150
1	T-shirts & Lower/KurtaPajama	2sets half yearly	700	1400	2,10,000
2	Pant Shirt	4 sets	1500	6000	9,00,000
3	Undergarments	3 sets per quarter	200	600	3,60,000
4	Woollen Jerseys (Full Sleeves)	4 as per need	600	2400	3,60,000
5	Woollen caps	2 per season	100	400	60,000
6	Socks	3 sets per quarter	50	600	90,000

7	Shoes	2 sets half yearly	500	2000	3,00,000
8	Handkerchiefs	2 per month	25	600	90,000
9	Slippers	1 half yearly	200	400	60,000

<b>TOTAL</b>	<b>7150</b>	<b>22750</b>	<b>Rs.61,95,600/-</b>
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**ANNEXURE - 7**  
**[ See Clause 10 (2)(i)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Toiletries:**

Sr.No.	Item	Quantity per person	Rate Per unit	Total Exp.	Total Exp. @150
1	Hair Oil	100 ml per month	25	300	45,000
2	Toilet soap	2 per month	25	600	90,000
3	Tooth Brush	1 in every 3 months	25	100	15,000
4	Toothpaste	100 gm tube per month.	30	360	54,000
5	Comb	1 every three months	20	80	12,000
6	Shampoo	4 pouch per month	2	96	14,400
7	Bathing Soap	2 bars of 125 gm per month	25	300	45,000
8	Washing soap	2 bar in 1 month	25	600	90,000
9	Surf detergent powder	6 kg in year	300	300	45,000
10	Moisturiser	250 ml in a	40	480	72,000

	or Cold Cream	month			
11	Bath Tub & Mug	1 set per annum	300	300	45,000
12	Shaving set	4 sets per year (100 older men)	3600	3,600	5,40,000
<b>TOTAL</b>			<b>4417</b>	<b>7116</b>	<b>Rs.10,67,400</b>

**ANNEXURE - 8**  
**[See Clause 10 (2)(a)]**

**Calculation of costs for an Old Age Home for 150 residents**

**Diet:**

<b>Sr.No.</b>	<b>Item</b>	<b>Quantity per Day</b>	<b>Cost per Month</b>
1	Atta	600 gms.	390
2	Rice	100 gms.	120
3	Sugar	40 gms.	60
4	Refined	25 gms.	75
5	Milk	300 ml	450
6	Dahi	200 gms.	360
7	Dal	120 gms.	45
8	Vegetables	250 gms.	360
9	Onion	50 gm	60
10	Adrak/Lahsun	05 gm	30
11	Masala	05 gm	45
12	Haldi	05 gm	30
13	Mirch	05 gm	30
14	Tea Leaves	05 gm	30
15	Paneer	100 gm	100
16	Egg	04 piece/ per week	112
17	Salt	25 gm	20

18	LPG Gas		137
19	Any other item		56
<b>TOTAL</b>			<b>Rs.2510</b>

<b>Per month</b>	<b>2510x150</b>	<b>Rs.3,76,500</b>
<b>Per year</b>	<b>3,76,500x12</b>	<b>Rs.45,18,000</b>

Punjab,  
Women and

**RAJI P. SHRIVASTAVA,**  
  
Principal Secretary to Government of  
Department of Social Security and  
Child Development