



SOUTH DELHI MUNICIPAL CORPORATION
CENTRAL ESTABLISHMENT DEPARTMENT
(22ND FLOOR), DR. S.P. MUKHERJEE CIVIC CENTER
NEW DELHI-110002.

No.F.11(19) Pt-V/CED/SDMC/DA-I/2021/1936

Dated 23-12-2021

CIRCULAR

1. All Secretaries, Government of India.
2. All Chief Secretaries, States/ UTs.
3. The Controller General of Accounts, M/o Finance, 7th Floor, Lok Nayak Bhawan, Khan Market, New Delhi.
4. The Assistant Controller and Auditor General, Office of the Controller and Auditor General of India, 10, Bahadur Shah Jafar Marg, New Delhi.
5. The Spl. Secretary (Services), Services Deptt., Services-I Branch, Delhi Secretariat, 7th Floor, B-Wing, I. P. Estate, New Delhi-110002.
6. The Controller General of Accounts, Ministry of Finance, 7th Floor, Lok Yayak Bhawan, Khan Market, New Delhi.
7. The Controller General of Accounts, Posts & Telegraphs Deptt., Patel Chowk, New Delhi.
8. The Chief Executive Officer, Delhi Cantonment Board, Delhi Cantt-110010.
9. The Chairman, Central Board of Direct Taxes, Ministry of Finance, North Block, New Delhi.
10. The Chairperson, Central Board of Excise & Customs, Ministry of Finance, North Block, ND.
11. The Registrar, Delhi High Court, New Delhi.
12. The Chairman, DDA, Vikas Sadan, INA, New Delhi.
13. The Director General (Works), CPWD, Nirman Bhawan, New Delhi-11.
14. The Secretary, New Delhi Municipal Council, New Delhi.

Sub: Sponsoring names for appointment of Assessor & Collector in South Delhi Municipal Corporation on deputation basis.

Sir/Madam,

I am directed to communicate that the following post is required to be filled up urgently in South Delhi Municipal Corporation on deputation basis:-

Assessor & Collector

Pay Scale- Level-13 (A) of Pay Matrix

Eligibility conditions/Qualifications:

Officers of the Indian Administrative Service/Central/State Governments /UTs:-

(a) (i) Holding analogous posts on regular basis in the parent cadre/department

Or

(ii) With 02 years regular service in the grade rendered after appointment thereto on regular basis in Level-13 of pay matrix or equivalent in the parent cadre/department.

Or

Contd...

(iii) With 07 years regular service in the grade rendered after appointment thereto on regular basis in Level-12 of pay matrix or equivalent in the parent cadre/department.

and

(b) Possessing 12 years experience including 05 years in revenue related work.

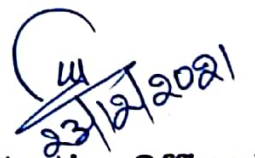
2. Since the SDMC follows the Rules/Regulations/Instructions of the Govt. of India, the laid down terms and conditions of deputation of the Govt. of India shall be applicable mutatis mutandis to the officer on deputation basis in South Delhi Municipal Corporation. Further, the maximum age limit for appointment by deputation shall not be exceeding 56 years as on the closing date of receipt of applications.

3. It is, therefore, requested that the names of suitable/eligible and willing officers, fulfilling the prescribed conditions, may please be forwarded to this office alongwith following documents within 30 days from the date of issue of this circular to enable us to consider selection for appointment to the above-said post on deputation basis:-

- a) Cadre Clearance
- b) Vigilance Clearance
- c) Copy of APARs/ACRs for the preceding five (5) years
- d) Application, Bio-data duly verified in attached proforma

4. This may please be given TOP PRIORITY.

Encl:- Bio-data proforma.


(Administrative Officer)

Copy to:- Director (IT), with the request to get it uploaded on SDMC's website

**APPLICATION FOR THE POST OF.....IN SOUTH
DELHI MUNICIPAL CORPORATION ON DEPUTATION BASIS.**

1. Name and address in Block Letters :-.....
2. Date of Birth (in Christian era) :-.....
3. Date of retirement under Central/
State Government Rules :-.....
4. Educational Qualifications :-.....
:-.....
:-.....
5. Whether education and other qualifications
required for the post are satisfied :-.....
(Details of given qualification) :-.....
6. Please state clearly whether in the light
of entries made by you above, you meet
the requirements of the post and you are
eligible as per RRs. :-.....
7. Details of employment, in chronological order. Enclose a separate sheet, duly authenticated by your
signature, if the space below is insufficient.

Period		Post held	Pay Scale/Grade Pay	Office	Nature of Duties
From	to				

8. Nature of present employment i.e.
Adhoc or temporary or quasi-
permanent or permanent. :-.....
9. In case the present employment is
held on deputation/contract basis,
please state :-.....
(a) The date of initial appointment
(b) Period of appointment on deputation/contract
(c) Name of the parent office/organization to which you belong
10. Additional details about present employment.
Please state whether working under:
(a) Central Government
(b) State Govt.
(c) Autonomous Organisation
(d) Government Undertaking
(e) Universitiles
(f) Others

11. Details of Pay Scale on initial appointment and subsequent promotions.

Sl. No.	Ist appointment/Promotions	Date	Pay Scale/Grade Pay	Whether held on Regular/ Adhoc/ ACP /MACP basis
1.	Initial appointment in service			
2.	Ist Promotion			
3.	2 nd Promotion			
4.	3 rd Promotion			
5.	4 th Promotion			
6.	5 th Promotion			
7.	6 th Promotion			

*If financial up- gradation on ACP/MACP basis, please give details of regular promotion also.

12. Additional information, if any, which you would like to mention in support of your suitability for the post, Enclose a separate sheet, if the space is insufficient.

13. Remarks :-----

Date:-----

Signature of the candidate:-
Address & Mob. No.:-

Countersigned
(Employer)

CERTIFICATE

(To be given by Head of Office of the Applicant)

1. It is certified that the particulars furnished by the official are correct.
2. It is certified that no disciplinary/vigilance case is either pending or contemplated against the applicant and he/she is clear from vigilance angle.
3. The record of service of the official has been carefully scrutinized and it is certified that there is no doubt about his/her integrity.
4. It is certified that the officer is eligible to hold this post as per the provisions of the Recruitment Rules mentioned in deputation vacancy circular.

DATE :-----

NAME OF THE OFFICER/DESIGNATION
WITH OFFICIAL SEAL OF HEAD OF OFFICE

NOTE: - Application should be forwarded through proper channel with approval of Competent Authority.