

Department Registration Form For Integration With E-District Portal

Please Enter the following details :

Department Name			
Service	SNo	Service Name	Service Code
	1-		
	2-		
	3-		
	4-		
	5-		

Nodal Officer Detail

Name			
Email ID			
Mobile			
Designation			
URL Of Service Page			

Note: All the above details are mandatory.

(दिनांक)

(हस्ताक्षर सक्षम अधिकारी)