

**Most immediate / Out today**  
By SPEED Post

F.No. J-11027/5/2011-RAY  
Government of India  
Ministry of Housing & Urban Poverty Alleviation  
(RAY Division)  
\*\*\*\*\*

Nirman Bhawan, New Delhi  
Dated: 18<sup>th</sup> February, 2011

To  
The addressees (as per list enclosed)

**Sub: Formats for Furnishing Utilisation of Funds Received under SFCP-RAY.**  
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Sir,

I am directed to say that under Slum-free City Planning Scheme (SFCP) your State/UT has been released funds during 2009-2010 for undertaking preparatory activities of setting up of a State/City level cell, slum survey, mapping of slums, developing slum information system, undertaking community mobilization, preparation of Slum-free City/State Slum-free Plans before seeking support under Rajiv Awas Yojana (RAY).

2. In this regard, please find enclosed herewith the format for the Utilisation Certificate prescribed under the GFR 19-A and a format for submission of physical and financial progress report regarding the progress of SFCP. It is requested that both these formats duly filled in and signed by authorised signatory with official stamp may be sent to this Ministry by **25<sup>th</sup> February 2011** so as to enable this Ministry to release the next instalment of funds at the earliest.

*Encl : As above.*

Yours faithfully,

*Shobana*  
(Shobana Pramod)

Under Secretary to the Govt of India  
Telefax: 011-23063029

*d/c*



## STATE PHYSICAL & FINANCIAL PROGRESS REPORT - SFCP SCHEME

**Name of State/UTs:** \_\_\_\_\_

1. Name of the State Nodal Agency		
2. Nomination of State Nodal Officer(s)		
Address:		
Pin:		
Phone:		
Fax:		
Email:		
3. Establishment of State Level Technical Cell	Yes	No
4. If No please specify the present status		
5. Give the following details as applicable		
No. of experts engaged/Name of Agency		

Designation	Salary/month (in Rs.)	Total Expenditure as on the date of UC (in Rs. Lakh)

State Level Nodal Agency
<b>Signature:</b> _____
(Name of the authorised officer)
_____
<b>Designation &amp; Phone No.:</b>
_____
<b>Date:</b> _____
<b>Office Seal:</b>

**City Financial & Physical Progress Report – SFCP Scheme**  
(To be submitted by State)

Name of State/UTs: \_\_\_\_\_

Give details separately for each city for which funds were released

<b>Table 1: Establishment of City level Cells</b>							
S.NO.	Cities for which funds have been released	Area of City (sq. Km.)	Date of release of fund	Establishment of City level Technical Cell			
				No. of experts engaged	Salary per month (in Rs.)	Expenditure so far (in Rs.Lakh)	In case of any other arrangements please give details

**Slum Survey and MIS:**

<b>Table 2: Socio Economic Survey</b>				
Name of the City	Name of Implementing Agency	% of coverage	Per HH Cost (in Rs.)	Total Expense (as on date of UC) (in Rs.Lakh)

<b>Table 3: Biometric Survey <sup>1</sup></b>				
Name of the City	Name of Implementing Agency	% of coverage	Per HH Cost (in Rs.)	Total Expense (as on date of UC) (in Rs.Lakh)

<sup>1</sup> Not to be filled at present

<b>Table 4: Data Entry of Slum Survey</b>				
Name of the City	Name of Implementing Agency	% of coverage	Per HH Cost (in Rs.)	Total Expense (as of date of UC) (in Rs.Lakh)

**GIS Mapping and Preparation of Slum Base Map (including Total Station Survey):**

<b>Table 5: Images Procured for Preparation of City Base Map</b>					
Name of the City	Name of Implementing Agency	Details of the Satellite Image Procured (Cartosat I/II, Quickbird etc.)	Area (in sq. Km.)	Rate per sq. Km. (in Rs.)	Total Expenditure (in Rs.Lakh)

<b>Table 6: Preparation of Geo Referenced Base Map</b>				
Name of the City	Name of Implementing Agency	% of coverage	Rate per sq. Km. (in Rs.)	Total Expenditure (in Rs.Lakh)

<b>Table 6: Total Station Survey and Preparation of Slum Base Map</b>				
Name of the City	Name of Implementing Agency	% of coverage	Rate per sq. Km. (in Rs.)	Total Expenditure (in Rs. Lakhs)

## GIS/MIS Integration

<b>Table 7: Integration of GIS &amp; MIS</b>			
Name of Implementing Agency	% of completion	Rate per HH (in Rs.)	Total Expenditure (in Rs. Lakhs)

## City Plan of Action

<b>Table 8: City Plan of Action prepared</b>		
Name of Implementing Agency	Expenditure so far (in Rs.)	Expected Date of Completion (in Rs.)

<b>For Urban Local Body</b>	<b>State Level Nodal Agency</b>
<b>Signature:</b> _____ (Name of the authorised officer) _____	<b>Signature:</b> _____ (Name of the authorised officer) _____
<b>Designation &amp; Phone No.:</b> _____	<b>Designation &amp; Phone No.:</b> _____
<b>Date &amp; Seal:</b> _____	<b>Date &amp; Seal:</b> _____

## Application for Second Instalment of Funds for SFCP under RAY

1. Name of the State	
2. Name of the State Level Nodal Agency	
Name of Nodal Officers:	
3. SFCP Scheme Code	
4. Funds released till date (in Rs. Lacs)	
5. Share of different sources (in % terms)	
Central Share	
State Share	
City Share	
6. Amount of second instalment requested (in Rs. Lacs)	
i) State Level requirement	
ii) No. of Cities for which 2 <sup>nd</sup> instalment is requested	
iii) Name of Cities for which 2 <sup>nd</sup> instalment is requested	
<b>Item of Preparatory Activities</b>	<b>Amount (in Rs. Lacs)</b>
a. Socio Economic Survey	
b. Biometric Survey	NA
c. Cost of training of trainers, conducting training of slum volunteers, related community mobilisation activities by NGOs during survey etc.	
d. Data entry from slum survey data	
e. Procurement of satellite images	
f. Preparation of geo referenced base map	

<b>Item of Preparatory Activities</b>	<b>Amount (in Rs. Lacs)</b>
g. Total station survey	
h. Integration of GIS & MIS	
i. Analysis of spatial and socio-economic data to create city level spatial and socio-economic report	
j. Activities for dissemination of information and dialogues with different stakeholders	
k. Detailed works for the preparation of Slum Free City Plans	
<b>Total Requirement</b>	

<b>For Urban Local Body</b>	<b>State Level Nodal Agency</b>
<b>Signature:</b> _____ (Name of the authorised officer) _____	<b>Signature:</b> _____ (Name of the authorised officer) _____
<b>Designation &amp; Phone No.:</b> _____	<b>Designation &amp; Phone No.:</b> _____
<b>Date:</b> _____	<b>Date:</b> _____
<b>Office Seal:</b>	<b>Office Seal:</b>