FORMAT

H.P. FOREST DEPARTMENT			
Sr. No	Identity Card to the Grazier of Hi	imachal Pradesh	Passport size Photograph (of the person to whom
Name: Shri/Smt			Grazing Permit issued) duly attested
S/o , D/o, W/o:			by the issuing authority.
R/o:			authority.
Phone No (LL/Mobile):			
Grazing Permit No:		date	2
Signature of the S Card Holder w		nature of the Issuing An official Seal	Authority