

BY FAX

GOVERNMENT OF ODISHA

HOME DEPARTMENT

OFFICE ORDER

HOME-PROT-RA---0001---- 2022, 14693 / RES, Bhubaneswar, Dated: 04-05-2022

Accommodation in Odisha Sadan, Delhi is reserved in favour of the following persons which can be availed on payment of rent as noted below. If reservation is not availed or not cancelled by the Home Department, the allottee has to pay 50% of the rent otherwise payable. The allottees are requested to submit their feedback in the feedback form attached with this order and also available at Reception Counter of Bhawans to the email ID:- feedback.bhawan@gmail.com or Whatsapp No. 7894463360.

Allotment List

Sl No	Name , Designation & Address	Period of Stay	Suite/ RoomNo	During Stay Conveyance	Arrival	Departure	Rent(Per Day/Per Room/Per Bed) In INR
1	Dr. William Henej, Plot No. 193,back side of SBI Colony, Sastri Nagar, Bhubaneswar.	04-05-2022 to 06-05-2022 - Ext	C-304	NO			1200

Cancelled list

Sl No	Name , Designation & Address	Room NO	Period of Stay	Status
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N.B.(1) The reservation is subject to clearance of outstanding dues if any. (2) Valid for allottee only. (3) Any reservation is subject to cancellation/modification under unforeseen circumstances. (4) Check in and Check out at 12.00 PM. (5) The Allottees are requested to produce their photo identity cards at the reception counter for identification. (6) Reservation status can be accessed in the Website <https://bhawan.homeodisha.gov.in> of Home Department.(7) SOP for COVID-19 is to be strictly followed.


Dy. Secretary to Government

Memo No 14694 / RES Dated: 04-05-2022

Copy forwarded to the Manager, Odisha Sadan, Delhi for information and necessary action.


Dy. Secretary to Government

Memo No 14695 / RES Dated: 04-05-2022

Copy to allottees(s) concerned/OSD-cum-Special Secretary, Home (Pro & Res) Deptt./Joint Secretary, Home (Pro & Res) Deptt./Home (BE) Deptt./ NIC Co-ordinator for information and necessary action.


Dy. Secretary to Government

Occupant/ Guest Feedback Form.

Name and designation -

Room No-

Order No. and date of allotment of room-

Name of Bhawan. -

Period of stay-

Services rendered	Excellent	Good	Average	Poor	Very Poor
Check-in Experience					
Cleanliness of room					
Cleanliness of dining hall					
Housekeeping Services					
Food Quality					
Check-out Experience					
Overall rating					

Other Comments _____

Thank you very much to fill up this feedback form.

Signature with date

