



Form MS-13B

BHOOMIKERALAM PROJECT Kerala Land Information Mission

ATTRIBUTE SHEET

Part II: Data to be Collected from Field:

Sl. No.	Particulars	Data Collected
1.	Temporary Survey No.	
2.	Whether Public or Private	
3.	If Public, whether	State Government/ Central Government/ Public Institutions
4	If State/Central Government	Yes/No
4.1	Whether land is Forest or Revenue	Yes/No
4.1.1.	If Forest, then	Forest Range..... Forest Division.....
4.1.2.	If Revenue, whether acquired through methods other than part 4(d) (i)	Yes/No
4.1.2.1	If Yes, whether acquired through	Gift/Exchange/ negotiated purchase/court orders/others (please specify)
4.1.2.1.1	If gifted, whether details of landholder recorded in ...	Yes/No.
	For others,	Order No..... Dated Office.....
4.1.3	If Public Institution, Name & Address of the Institution	Yes/No
	Name & Address of the Institution Chairman/ Secretary/Functionary	
	Whether details of old land recorded in	
5.	Whether tax being paid or not	Yes/No

5.1	If tax being paid or not whether	Agricultural/ Non agricultural
5.1.1.	If Agricultural Whether Paddy field or not	Yes/No
5.2.	If it is dry land whether it is	Coconut /Plantation/Other
5.2.1.	If it is plantation whether	Rubber /Coffee /Tea /Cardamom/Other.....
5.2.3.	If it is plantation whether	Rubber /Coffee /Tea /Cardamom/Other.....
5.3.	If it is non-agricultural land whether	Vacant/Occupied
5.3.1.	If vacant then Owner Department/ Organization Address	
5.3.2.	If occupied then whether	Single/multiple ownership
5.3.2.1.	If single building/single ownership (a). Building No. (b). Number of floors (c). Approx plinth area (d). Owner of department (f). Address (g). Phone No. (h). Head of Office	
* Take the readings of corner points of building to calculate the plinth area		
5.3.2.2.	If multiple ownership (Collect the details as per 5.3.2.1 as a separate list)	
6.	If non-taxable then whether	Railway/Road/Water body land parcel
6.1	If Railway then	Rail/Building/ vacant land
6.1.1.	If Building Name of Office Address PIN	
* Topo details of Rail to be shown on the land parcel		

6.2.	If Road whether	NH No SH No. Other Road
6.2.1	If other Road	Name From Other Road
6.3.	If water body whether	River/Stream/ Backwater/ Irrigation canal/Reservoir (Catchment area)/ Mangrove Forest/Pond/Drain/Aquaduct/Tank/ Other Name From To
7.	Whether Private land	Yes/No
7.1	If Yes then	Waterbody/ Agricultural / Residential/ Commercial / Residential -cum-commercial
7.1.2	If water body then which	Stream/Drain/Sewage/Pond/Tank/Mangrove Others.....
7.1.3	If Agricultural whether	Paddy land/Paddy converted land/Dry land
7.1.3.1.	If paddy converted land then	Conversion order No. Date Office
7.1.3.2.	If Dry land whether	Coconut farm/plantation/other
7.1.3.2.1.	Plantation whether	Rubber/Tea/Coffee/Cardamom/others..... ..
7.1.4	If Residential/Commercial/ Residential -cum- commercial whether	Single ownership/ multiple ownership
7.1.4.1	If single ownership whether the Resurvey Data Collection Sheet collected and Sheet No and Temporary Parcel ID recorded on it.	Yes/No.
7.1.4.2	If multiple ownership collect the following details in separate sheet	Name of the Building: Address:
	(a). Whether ownership association if any if so,	Yes/No.
	(i). Name of the Association	

	(ii). Name of President/Secretary	
	(iii). Phone Number & Fax No. (iv). Total plinth area of the building (v). No of owners	
	(b). If no owners association and only individual owners only whether the Resurvey Data Collection Sheet with Notice-A issued to all the owners/residential/occupants of the building and their signature obtained on the Notice Diary	Yes/No
7.2.	If Commercial/ Residential -cum-commercial then whether	IT Services/Hotel/Hotel with lodging/Shop/Petrol or LPG Station/Shopping Complex/Shopping Malls/ATM/Bank/Hospital/Clinic/Resort/Food stall/Hostels/Cinema theatre
	If the land parcel is not belonging to any of the five categories then whether	Educational Institution/ Place of Worship Others..... Name: Address:

Certified that the above information is collected from the field during survey on..... and that all efforts have taken to verify the genuineness of the data.

Date:

Signature

Place:

Name of the Data Collector

Team No.