

I/1761663/2024



प्रधान आयुक्त सीमाशुल्क (सामान्य) का कार्यालय
OFFICE OF THE PRINCIPAL COMMISSIONER OF
CUSTOMS (GENERAL)

नवीन सीमाशुल्क भवन, बेलार्ड इस्टेट, मुंबई- 001 400
NEW CUSTOM HOUSE, BALLARD ESTATE, MUMBAI- 400
001

Telephone-022-22757734,
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दिनांक/Date:19-02-2024

CIRCULAR No. 24/ 2024

विषय/Subject: Fixing of dates of document verification, medical examination and physical test of selected candidates recommended by the Staff Selection Commission (SSC) for the post of Inspector (Examiner) on the basis of result of Combined Graduate Level Examination 2023-सम्बंधित/reg.

Kind attention is invited to letter issued by Under Secretary, CBIC, vide File No. 12025/2/2023-Ad-IIIB Section-CBEC dated 18.12.2023 regarding Allocation of Inspector (Examiner), recommended for appointment by SSC on the basis of result of Combined Graduate Level Examination, 2023. Before offer of appointment is issued, the candidates are required to comply with all the necessary formalities / requirements as mentioned herewith.

2. The document verification, medical examination and physical test in respect of the candidates who have been recommended for appointment in grade of Inspector (Examiner) by Staff Selection Commission (SSC) on the basis of result of Combined Graduate Level Examination-2023 was conducted by various Cadre Controlling authorities under CBIC as per the Board's direction vide letter dated 18.12.2023 issued by the Under Secretary to Govt. of India, CBIC. The pre-appointment formalities of the remaining candidates who did not appear in the first schedule have been fixed and schedule for the same is annexed as **Annexure-I** to the Circular.

3. As per G.S.R. 1172 (E) dated 26.12.2016, the candidates are required to pass physical test and possess physical standard as described below, for appointment to the grade of Inspector (Examiner) of Customs.

	Physical standards (Minimum)	Physical Test
Male Candidate	Height-157.5 cms (relaxable by 5 cms in the case of Garhwalis, Assamese, Gorkhas and members of Scheduled Tribes) Chest- 81 cms (fully expanded with minimum expansion of 5 cms)	Walking – 1600 metres in 15 Minutes. Cycling - 8 K.M in 30 Minutes
Female Candidate	Height-152cms (relaxable by 2.5 cms in the case of Garhwalis, Assamese, Gorkhas and members of Scheduled Tribes) Weight- 48 kgs. (relaxed by 2 kg. for Garhwalis, Assamese, Gorkhas and members of Scheduled Tribes)	Walking– 1 K.M in 20 Minutes. Cycling - 3 K.M in 25 Minutes

4. The candidates are required to report to the Personnel & Establishment Section (Appraising), 1st Floor, Old Bldg., New Custom House, Ballard Estate, Mumbai – 400 001 at 10:30 AM for document verification as per scheduled dates.

5. The candidates are required to report to the Container Scanning Division, Wadi-Bunder, Near

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Orange gate Prince's Docks, Mumbai – 400 001 at 10:30 A.M. for Physical Test as per scheduled dates.

6. The candidates are required to report to the Superintendent/Dean of the respective nominated hospitals mentioned against their name in Annexure-I at 08:00 A.M along with Medical Statement (two sets), Declaration form (two sets) (**Annexure III enclosed herewith**) and 04 recent photographs for Medical Examination and Physical standard test, as per their schedule dates. The Candidates are informed that the process of medical Examination may take more than one day and are advised to plan accordingly.

7. The candidates should bring the following documents /Certificates (in original) in the prescribed format within the cut-off date specified in the Notice of Combined Graduate Level Examination-2023 dated 03.04.2023, along with self-attested photocopy of each (Four Sets) at the time of document verification as per their schedule dates:

- i. Attestation Form (12 pages) duly filled up in quadruplicate (four sets) (all in original with recent photograph) (format enclosed as **Annexure II**).
- ii. Candidate's Medical Statement and Declaration (03 pages) (format enclosed as **Annexure III**).
- iii. Aadhar Card.
- iv. Mark Sheets and Passing Certificates related to educational qualifications from Std. 10th to Graduation Degree.
- v. Proof of Age (School Leaving Certificate/High School Certificate showing the Date of Birth).
- vi. Domicile Certificate.
- vii. Character Certificate from two gazetted officers of the Central or State Government or Stipendiary Magistrates (**part of Annexure-II mentioned supra**).
- viii. 5 recent passport size coloured photographs.
- ix. Certificate of Physical Disability, if applicable.
- x. If belonging to SC/ST/OBC/EWS category, valid caste certificate issued in the Central Government format by the competent authority in this regard. (**Annexure X, XI & XII of SSC Notice**)
- xi. Relevant Certificate if seeking any age relaxation. (**Annexure-VII of SSC Notice**)
- xii. If a candidate is a Central/State Government employee, he/she directed to obtain vigilance clearance & no objection certificate / character certificate /Medical Examination report/ Police verification Report (original/attested copy) from the present employer and bring all these documents through proper channel at the time of Document Verification.
- xiii. Service Leaving Certificate/ Discharge book of Ex-Serviceman (if applicable to the candidate).
 - a. Serving Defence Personnel Certificate as per **Annexure-VIII of SSC Notice**, if applicable.
 - b. Undertaking as per **Annexure-IX of SSC Notice**.
 - c. Discharge Certificate, if discharged from the Armed Forces.
- xiv. A candidate who claims change in name after matriculation on marriage or remarriage or divorce, etc. the following documents shall be submitted:
 - a. In case of marriage of women: Photocopy of Husband's passport showing names of spouses or an attested copy of marriage certificate issued by the Registrar of Marriage or an Affidavit from husband and wife along with a joint photograph duly sworn before the Oath Commissioner;
 - b. In case of re-marriage of women: Divorce Deed/ Death Certificate as the case may be in respect of first spouse; and photocopy of present husband's passport showing names of spouse or an attested copy of marriage certificate issued by the Registrar of Marriage or an Affidavit from the husband and wife along with joint photograph duly sworn before the Oath Commissioner.
 - c. In case of divorce of women: Certified copy of Divorce Decree and Deed Poll/ Affidavit duly sworn before the Oath Commissioner.
 - d. In other circumstances for change of name for both male and female: Deed Poll/ Affidavit duly sworn before the Oath Commissioner and paper cuttings of two leading daily newspapers in original (One daily newspaper should be of the area of applicant's permanent and present address or nearby area) and Gazette Notification.

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8. The candidates already working in the same Ministry/Department at similar posts i.e. Inspector (Central Excise/ Preventive Officer/ Examiner) and want to avail exemption from the physical test, should produce a certificate from the current employer regarding passing the physical test.

9. It is also intimated that Medical & Physical Standard Test, Physical Endurance Test & Document Verification may take 02 – 03 extra working days. All the necessary expenses and arrangements regarding boarding and lodging have to be borne by yourself.

10. In the event of not reporting on the scheduled date, it shall be presumed that you are not interested in joining the department and your nomination shall be treated as cancelled. The request for any change of dates shall not be entertained.

Signed by Harish

Ramakrishna Rao

Date: 19-02-2024 12:33:56

Reason: Approved

ASSISTANT COMMISSIONER

**DC/AC-VI-O/o Pr Commissioner-Customs-
General-Zone-I-Mumbai**

संलग्न/Enclosures: As above

Annexure-I

Sr. No.	Name of the Candidate	Gender	Roll No	cat 1	cat 2	cat 3	cat_sel	rank	Date of Medical Examination	Date of Physical Test	Date of Document Verification	Hospital
27	SIRIMAVULLA SAI DEEPTHI	Male	8006005370	6			6	2206	26.02.2024	28.02.2024	28.02.2024	St. George's
52	SAURABH KUMAR	Male	3011000204	1			1	6301	26.02.2024	28.02.2024	28.02.2024	St. George's

St George Hospital, Dadabhai Naoroji Road, Gpo,
Mumbai, Maharashtra-400001

ATTESTATION FORM

WARNING: 1. The furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification & is likely to render the candidate unfit for employment under the Government.

PLEASE AFFIX
YOUR RECENT
PASSPORT SIZE
PHOTOGRAPH

2. If detained, convicted, debarred, etc., subsequent to the completion and submission of this form the details should be communicated to the Staff Selection Commission or the authority to whom the Attestation Form has been sent earlier, as the case may be, failing which it will be deemed to be suppression of factual information.

3. If the fact that false information has been furnished or that there has been suppression of any factual information in the attestation form comes to notice at any time during the service of a person, his services would be liable to be terminated.

1. (a) Name in full (IN BLOCK / SURNAME NAME FATHER'S NAME
CAPITAL LETTERS) with
aliases if any:

(b) Please indicate if you have
added or dropped in at any
stage any part of your name
or surname.

2. Present address in full,
(i.e. Village, Thana & Dist.
or House No., Lane/Street/
Road & Town) & name of
Dist. Headquarters.

3. (a) Home address in full (i.e. Village,
Thana & Dist., or House No.
Lane/Street/Road & Town) &
Name of Dist. Headquarters.

(b) If originally a resident of
Pakistan, the address in that
Country and the date of
Migration to Indian Union.

-: 2:-

- 4 (a)** Particular of places (with periods of residences) where you have resided for more than one year at a time during the preceding five years. In case of stay abroad (Including Pakistan) particulars of all places where you have resided for more than one year after attaining the age of 21 years, should be given :-

FROM	TO	Residential address in full (i.e. Village, Thana & Dist. Or House No. Lane/ Street/Road & Town)	Name of the Dist., Headquarters of the place mentioned in the preceding column.
<hr/>			
<hr/>			
<hr/>			
<hr/>			

(b) Name	Nationality (by birth & or by Domicile)	Place of Birth	Occupation (if employed give designation & official address)	Present postal Address (If dead give last address)	Permanent Home address.
i. Father's name					
ii. Mother's name					
iii. Wife's / Husband's name					
iv. brother(s) name					
v. Sister(s) name					

5. Information to be furnished with regards to Son(s) and or Daughter(s) in case they are studying / living in a foreign country:

Name	Nationality (By birth & By domicile)	Country in which studying / living with full address	Date from which studying / living in the country mentioned In previous column
------	--	--	--

6. Nationality :

7. (a) Date of Birth :
(b) Present age :
(c) Age at Matriculation :

8. (a) Place of Birth, Distt. & State :
in which situated

- (b) Distt. & State to which you :
Belong

- (c) Distt. & State to which your :
Father originally belongs

9. (a) Your Religion :
(b) Are you a member of a Scheduled }
Caste/Scheduled Tribes? Answer } :
"Yes" or "No" & if the answer is }
"Yes" state the name thereof. } :

10. Education Qualification showing places of education, with years, in Schools & Colleges since the age of 15.

Name of School/ College with full Address.	Date of entering	Date of leaving	Examination passed
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11. (a) Are you holding or have at any time held an appointment under the Central or State Government or a Semi-Government or a private firm or institution? If so, give full particulars with dates of employment, up to date:

Period	Designation Emoluments & Nature of work Handled	Full name & address of the Employer	Reasons for leaving previous service
-			
-			
-			

11. (b) If the previous employment was under the Govt. of India / a State Govt./ An Undertaking owned or controlled by the Govt. of India or a State Govt./An Autonomous Body / University / Local Body. If you had left service on giving a month's notice under Rule-5 of the Central, Civil Services (Temporary Service) Rules, 1965 or any similar corresponding rules where any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matter at the time you gave notice of termination of service, or at a subsequent date, before your services actually terminated:- _____

- | | |
|--|----------|
| 12(i) a. Have you ever been arrested? | Yes / No |
| b. Have you ever been prosecuted? | Yes / No |
| c. Have you ever been kept under detention? | Yes / No |
| d. Have you ever been fined by a Court of Law? | Yes / No |
| e. Have you ever been convicted by a Court of Law for any offence? | Yes / No |
| f. Have you ever been bound down? | Yes / No |
| g. Have you ever been debarred from any examination or rusticated by any University or any other Educational Authority / Institution? | Yes / No |
| h. Have you ever been debarred / disqualified by any Public Service Commission for any of its Examination / Selection? | Yes / No |
| i. Is any case pending against you in any Court of Law at the time of filling up these Attestation Forms? | Yes / No |
| j. Is any case pending against you in any University or any other Educational Authority / Institution at the time of filling up these Attestation Forms? | Yes / No |

-: 5:-

- NOTE:** i. Please also see the 'Warning' at the top of this Attestation Form.
ii. Specific answers to each of the questions should be given striking out "Yes" or "No" as the case may be.

13. Names of two responsible persons 1. _____
of your locality or two references
to whom you are known.
2. _____

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment under Government.

Signature of Candidate : _____
Date : _____
Place : _____
Mobile No. : _____

IDENTITY CERTIFICATE

(Certificate to be signed by anyone of the following)

- i. Gazetted officers of Central or State Government.
- ii. Members of Parliament or State Legislature belonging to the Constituency where the Candidate or his parent / guardian is ordinarily resident.
- iii. Sub-Divisional Magistrate / Officers.
- iv. Tehsildars or Naib / Deputy Tehsildars authorized to exercise Magistrate powers.
- v. Principal / Head Master of the recognized School / College / Institution where the candidate studied last.
- vi. Block Development Officer.
- vii. Post Master.
- viii. Panchayat Inspector.

Certified that, I have known Shri / Smt. / Kum. _____

_____ Son / Daughter / Wife of
Shri _____ for the last
_____ years _____ months and that to the best of my knowledge and belief
the particulars furnished by him / her are correct.

Place : _____ Signature of the candidate : _____

Date : _____ Designation or Status
& Address : _____

TO BE FILLED BY THE OFFICE

- i. Name, Designation & full address : **Addl. Commissioner of Customs,**
of the Appointing Authority **Personnel & Estt. Deptt., New Custom**
House, Ballard Estate, Mumbai-400001
- ii. Post for which the candidate is : **Inspector (Examiner)**
being considered

PERSONNEL & ESTT. DEPTT.,
New Custom House,
Ballard Estate,
MUMBAI – 400 001.

I hereby declare that,

I am a Citizen of India.

I was not a member of any unlawful organization.

I am not a member of any unlawful organization and I shall not take part in activities of any unlawful organization.

I have not been convicted by the Court of Law for any offence.

I shall not be a member of, or be otherwise associated with, any political party or any organization which take part in politics nor shall I take part in, subscribe in aid of, or assist in any other manner, any political movement or activity.

I further declare that I am **not** a member of Provincial Unit of Territorial Army.

I am unmarried / married.*

I take the appointment as _____ in Mumbai Custom House, on service conditions laid down in the Mumbai Custom House, Appointment Memo _____ dated _____.

I will produce the Domicile Certificate within a month of this date.

I accept the seniority in the cadre of **Inspector (Examiner)** in order of ranking assigned to me by the Selection Commission.

PLACE: _____

DATE : _____

SIGNATURE OF THE CANDIDATE

Note*- Please strike out which is not applicable

DECLARATION

1. I, Shri / Smt. / Kum.

_____ declare as under
:-

- i. That I am unmarried / a widower / a widow.
- ii. That I am married and have only one wife living.
- iii. That I am married and my husband has no other living wife to the best of my knowledge.
- iv. That I am married and have more than one wife living. Application for grant of exemption is enclosed.
- v. That I am married to a person who has already one wife or more living. Application for grant of exemption is enclosed.
- vi. I will not marry any woman / man having a living husband / wife without Government's consent.

2.** I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

DATE : _____

SIGNATURE _____

NOTE: Please delete the not applicable clauses.

** Applicable in the case of Clauses (i), (ii) & (iii) only.

**VERIFICATION FORM FOR CANDIDATES UNDER CONSIDERATION FOR
APPOINTMENT TO A SUBORDINATE SERVICE UNDER THE GOVT. OF INDIA.**

I, _____ a candidate for
the appointment to _____ hereby certify that my
answers to the following questions are correct.

- a. Have you previously been employed by the Central or any Provincial Government ?

NO / YES

Department or Office in which previously employed. Designation of appointment.
Reasons for termination of appointment.

- b. Have you previously applied without success for any appointment under the Central
or a Provincial Government?

NO / YES

Department or office in which
an appointment was sought.

Designation of appointment
applied for

I understand that if the above statement is false in any material respect my appointment is
liable to be terminated.

PLACE : _____

DATE : _____

SIGNATURE

-: 10 (A):-

CHARACTER CERTIFICATE

Certified that I have known Shri / Smt. / Kum. _____
_____ son / daughter of Shri / Smt. _____
_____ for the last _____ years _____ months
and that to the best of my knowledge and belief he / she bears a reputable character and has no
antecedents which will render him / her unsuitable for Government employment.

Shri / Smt. / Kum. _____ is not related to me.

PLACE: _____

GAZETTED OFFICER'S NAME & SIGNATURE

DATE : _____

DESIGNATION: _____

OFFICE ADDRESS:

 -: 10 (B):-

CHARACTER CERTIFICATE

Certified that I have known Shri / Smt. / Kum. _____
_____ son / daughter of Shri / Smt. _____
_____ for the last _____ years _____ months
and that to the best of my knowledge and belief he/she bears a reputable character and has no
antecedents which will render him / her unsuitable for Government employment.

Shri / Smt. / Kum. _____ is not related to me.

PLACE : _____

GAZETTED OFFICER'S NAME & SIGNATURE

DATE : _____

DESIGNATION: _____

OFFICE ADDRESS:

IDENTITY CERTIFICATE

[Certificate to be signed by any one of the following (*) Competent Authorities]

[To be furnished in **Duplicate** at the time of joining]

Certified that I have known Shri / Smt. / Kum. _____
son / daughter/wife of Shri _____
for the last _____ years _____ months, who is residing at

_ and it is also certified that the signatures and photograph attested below are of
Shri / Smt / Kum _____. His / Her identification
marks are _____.

Recent Photograph
duly attested by
Competent
Authority with seal
(partly on
photograph and
partly on this
certificate)

(Signature of Candidate)

Name, Designation, Signature and Address
of the Competent Authority

PLACE : _____

DATE : _____

(*)

- i) Gazetted officers of Central or State Government.
- ii) Member of Parliament or State Legislature belonging to the Constituency where the candidate or his parent/guardian is ordinarily resident.
- iii) Sub-Divisional Magistrate/Officers.
- iv) Tehsildars or Naib/Deputy Tehsildars authorized to exercise Magistrate powers.
- v) Principal/Head Master of the recognized School/College/Institution where the candidate studied last.
- vi) Block Development Officer.
- vii) Post Master.
- viii) Panchayat Inspector.

INSTRUCTIONS TO BE FOLLOWED WHILE FILLING THE ATTESTATION FORM

(Sr.No.)

1. Please read the instruction carefully and keep a blank copy extra before filling the Attestation forms.
2. Please bring four sets of Attestation forms duly filled in **ORIGINAL** with complete address and Pin Code detail
3. Page 6 consists of Identity Certificate which has to be signed by Gazetted Officer of Central or State Government and the same officer should sign the first Character Certificate on page 10(A).
4. Page 10(B) consists of Second Character Certificate which has to be signed by different Gazetted Officer and the same officer should sign another Identity certificate on page 11.
5. Please note both the Gazetted officers must be different as mentioned in the serial number 3 and 4 above.
6. All the 4 attestation forms should be filled identically.
7. Failure to comply with the instructions would lead to **undue delay in appointment.**

General Instructions

1. Arrange the document in following order(Bring **04 sets-self attested with date**)
 - A. 10th Mark sheet and passing certificate
 - B. 12th Mark sheet /Diploma Mark sheet and passing certificate
 - C. Graduation mark sheets
 - D. Degree Certificate (Graduation)
 - E. Caste Certificate in required format (if applicable)
 - F. Domicile Certificate
 - G. Identity card (Aadhar card/Pan card/Passport)
 - H. Certificate of Physical Disability (if applicable to the candidate)
 - I. Service Leaving Certificate/Discharge book of Ex-Servicemen (if applicable to the candidate)
 - J. Attestation Form (**04 Sets in original**)

CANDIDATE'S STATEMENT AND DECLARATION

The candidate must make the statement required below prior to this medical examination and must sign the declaration appended thereto. His attention is specifically directed to the warning contained in the Note below.

1	State your name in full (In Block Letters)	
2	State your age & Place of Birth	
3	a) Have you ever had Small pox, Intermittent or any other Fever, Enlargement or Suppuration of Glands, Spitting of blood, Asthma, Heart Disease, Lung Disease, Fainting attacks, Rheumatism, Appendicitis? (OR) b) Any other disease or accident requiring confinement to bed and medical or surgical treatment?	
4	When you were last vaccinated?	
5	Have you or any of your near relations been afflicted with Consumption, Scrofula, Gout, Asthma, Fits, Epilepsy or Insanity?	
6	Have you suffered from any form of nervousness due to overwork or any other cause?	
7	Have you been examined and declared fit for Government service by a Medical Officer/ Medical Board, within the last three years?	

8. Furnish the following particulars concerning your family:

Father's age if living and state health	Father's age at death and cause of death	No. of brothers living, their ages and state of health	No. of brothers, dead, their ages at death and causes for death
---	--	--	---

--	--	--	--

-- 2 --

Mother's age if living and state health	Mother's age at death and cause of death	No. of Sisters living, their ages and state of health	No. of Sisters, dead, their ages at death and causes for death

I declare all the above answers to be, to the best of my belief, true and correct.

I also solemnly believe that I have not received a disability certificate / pension on account of any disease on other condition.

Signed in my presence

Candidate's Signature

Signature of Medical Officer

Note: The candidate will be held responsible for the accuracy of the above statement. By wilfully suppressing any information he/she will incur the risk of losing the appointment, and, if appointed, or forfeiting all claims to superannuation allowance or gratuity.

Medical Certificate of Fitness of First Entry into Government Service

I hereby certified that I have examined Shri/Smt
..... for the
post of Inspector (Examiner) for the employment in the Customs
Department and cannot discover that, he/she has any disease,
constitutional weakness or bodily infirmity except
.....
.....

I do not consider this a disqualification for employment in the office
of the Principal Commissioner of Customs (G), P&E New Customs House,
Ballard Estate, Mumbai-400 001.

His/Her age is according to own statement..... years and by
appearance aboutYears. He/She has been vaccinated.

- Height.....cms.
- Chest before expansion.....cms. (for male candidate)
- Chest after expansion.....cms. (for male candidate)
- Weight kgs. (for female candidate)

Mark of Identification: -

.....
.....
.....

Seal & Signature of Civil Surgeon/Medical Officer

Place:

Name:

Date:

Reg. No.