## EXTRAORDINARY PUBLISHED BY AUTHORITY

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#### **WOMEN & CHILD DEVELOPMENT DEPARTMENT**

#### **NOTIFICATION**

The 20th May 2015

No. 8653—WCD-WW-SCHEME-4-0017/2014-W&CD.—Pursuant to the provisions contained in Section 21 of the Immoral Traffic Prevention Act (ITPA), 1956 and the provisions laid down in Prevention of Immoral Traffic Odisha Rules, 1959, State Government has formulated the following guidelines for issuing license to establish and maintain protective Homes for Women in need of Care and Protection such as rescued victims of sexual exploitation/trafficking.

Procedure of license (First time License):

#### 1. (A) Existing Homes:

Organisations running without license have to apply for license in Form - III (Annexure-I) to the Collector of the concerned district where the Home is functioning within prescribed time frame through online application portal of NIC (www,wcdodisha.gov.in/ngoproject monitoring). They will also submit one set of documents in hard copy format to the concerned District Social Welfare Officer (D.S.W.O.).

#### (B) New Homes:

Organisations have to apply for license in Form - III (Annexure-I) to the Collector of the concerned district where the Home is functioning through online application portal of NIC (www,wcdodisha.gov.in/ngoproject monitoring). They will also submit one set of documents in hard copy format to the concerned District Social Welfare Officer (D.S.W.O.).

- **2.** The Application for license should contain documents as per the Checklist enclosed in Annexure II.
- **3.** After receipt of the application the District Inspection Committee shall conduct full and complete investigation as per the Physical Verfication Format enclosed in Annexure III.
- **4.** The District Inspection Committee (DIC) shall comprise of the following members from the concerned district:

Chairperson: A.D.M.

Convenor: D.S.W.O.

#### Members:

- Representative of C.D.M.O.
- Representative of S.P. or nearest I.A.H.T.U. or Mahila Sishu Desk
- One lady member of Child Welfare Committee of concerned district
- Protection Officer
- C.D.P.O. of the area where the Home is proposed to be located
- **5.** The District Inspection Committee through its Convenor shall place the Physical Verification Report along with the application to the District Collector.
- **6.** After careful verification of the report of the District Inspection Committee, the Collector will either reject the application or recommend to W.C.D. Department for issue of license under I.T.P.A., 1956 to the applicant organisation. In case of rejection of application, a copy of Collector's order shall be forwarded to W.C.D. Department for record.
- **7.** The inspection report of the D.I.C. and the recommendation of the Collector shall be forwarded by the District Collector to the Women & Child Development Department, Government of Odisha for processing of the grant of license to the Home under I.T.P.A., 1956.
- **8.** The entire process leading up to rejection or recommendation as the case may be must be completed within 60 days from the date of receipt of the application.
- **9.** Recommendation of the Collector shall be examined by the W.C.D. Department and appropriate decision shall be taken within 30 days from the date of receipt of Collector's recommendation. In case it is decided to issue license, the same shall be issued to the applicant by the Women & Child Development Department with a copy to the District Collector of the concerned district within 45 days of receipt of the Collector's report as per Form IV (Annexure IV) for a period of one year from the date of issue of the license.

#### Procedure of license (Renewal Cases):

- **10.** For renewal of license, application shall be made to the Collector where the Home is located in From V (Annexure V) enclosing the documents as per Checklist in Annexure II, 60 days before the date of expiry of the license. The D.I.C. shall complete the inspection process within 30 days from the date of application.
- 11. On receipt of the report of the D.I.C., the District Collector shall take a decision within 30 days to renew the license or reject the renewal application. Renewal of license shall be for one year starting from the expiry date of the previous license period.

Revocation of license:

12. License granted under I.T.P.A., 1956 may be revoked:

• If the holder commits breach of any condition of the license/provision of the Act/Rules

If the condition, management or superintendence of the Home is not satisfactory

If the standards of care are not maintained properly

If any act of omission or commission by the management of the Home is detrimental to

the interest of the inmates in particular and the society in general.

**13.** However before deciding on revocation of license, the Collector of the district shall issue a show cause notice to the holder of the license giving the organisation reasonable opportunity to

defend the case. If the reply to show cause notice is not satisfactory or if no reply is submitted, the

Collector will issue written order of revocation of the license under intimation to the W.&C.D.

Department.

**14.** The Home shall cease to function from the date of revocation of license.

Provision of Appeal:

15. Anybody aggrieved by any order or decision of the Collector regarding revoking the license

can appeal to the Secretary of the W.&C.D. Department, Government of Odisha who shall dispose

of the appeal petition within 60 days.

Punitive Provision:

16. As per Section 21(10) under I.T.P.A., 1956 whoever establishes or maintains Home without

license shall be punishable in the case of a first offence with fine which may extend to one thousand

rupees & in the case of second or subsequent offence, with imprisonment for a term which may

extend to one year, or with fine which may extend to two thousand rupees or with both.

Annexure - I: Form III — Form of application for license

Annexure - II: Checklist of Documents to be enclosed in Application Form

Annexure - III: Physical Verification Format of the Home for District Inspection Committee

Annexure - IV : Form IV — License

Annexure - V: Form V — Form of Application for renewal of license

By order of the Governor

**SASWAT MISHRA** 

Commissioner-*cum*-Secretary to Government Women & Child Development Department

#### **LIST OF ANNEXURE**

Annexure - I

#### Form - III

### [See Rule 7(i) of the (Prevention of Immoral Traffic) Odisha Rules, 1959] Form of application for license

- (1) Full name of the applicant/association/organisation:
  - (if registered, copy of the registration certificate and particulars of all members of the association shall be given)
- (2) Religion:
- (3) Residence (Town or village):

Police Station

District

(Note—In case of association, particulars regarding items 2 and 3 be mentioned in respect of each member)

- (4) Name of the institution/organisation:
- (5) Aims and objectives of the institution/organisation:
- (6) Details about the financial condition of the institution/organisation; funds, property and sources of income:
- (7) Arrangements made or proposed to be made for boarding and lodging. Also details of the building, whether owned by the institution or rented:
- (8) Arrangements in respect of general health of inmates and facilities for their medical treatment and arrangements proposed to be made for the education and vocational and moral training designed to make them fit for rehabilitation in life as normal citizens:
- (9) Full address of the proposed institutions/home/existing homes including the name of the city or town and the locality:
- (10) If any such application has been made previously, please state its result together with its date, month and year.
- (11) If the institution/home exists at present the date of its commencement, Annual Reports of its working if prepared or its working to date.
- (12) Number and particulars of inmates at the time of opening the institution
- (13) Maximum number of accommodation for children and women.
- (14) Any other particulars.

I/We ......hereby solemnly affirm that the above and annexed particulars are true according to my/our best of knowledge and belief.

#### Checklist of Documents to be enclosed in Application Form

The following documents are to be enclosed along with the Application :

S1I. No.	Name of Document	Copy Enclosed in Annexure
1	2	3
1	Registration certificate of Organisation	
2	PAN Card copy/TAN Card copy of organisation :	
3	Constitution of the organisation/ Bye Law & Memorandum of Association :	
4	Annual Report for the last 3 years :	
5	Audited Accounts for the last 3 years :	
6	Ownership record of land/Rent deed of rented accommodation of Home :	
7	Grant/Sanction Letter for home (currently running or have been sanctioned a Home for victims of trafficking):	
8	Affidavit that no criminal case has been filed against any member of the organisation or the staff/office bearers of the Home:	
9	Authorisation of the organisation in favour of the Chief Functionary towards submitting the application for licensing/renewal:	

## Physical Verification Format of the Home for District Inspection Committee (For Grant of License/Renewal)

Basic Information :									
l.	State:								
II.	District:								
III.	Name and Addr	ess of the applicant Orga							
IV.	Name of the Chi	Name of the Chief Functionary of organisation with e-mail address and phone numbers :							
V.	Home sanction	ed under which Scheme :							
VI.	Grant received	for the Home, give details	:						
VII.	Name & Addres	s of the Home :							
	•	ime of Inspection:tion, e-mail id and Addres	ss of the Inspecting Offic	cials :					
	Name	Designation	E-mail id	Address					
X.	Time of inspect	ion completed :		,					
XI.	Does the organ	isation have license unde	er I.T.P.A. (Yes/No):						
XII.	XII. If Yes, please provide the license No. & period of validity:								
XIII.	Is the institution	registered under Section	n 34 of J.J. Act, 2000:						
XIV.	If Yes, please p	rovide the registration nui	mber & period of validity	<b>'</b> :					
XV.	Registration Nu	mber of the Society/Trus	t:						

#### 1. Human Resource of the Home:

Is the organisation maintaining an Attendance Registrer for the staffs in the Home (Yes/No):

SI. No.	Designation	Name	Age	M/F	Qualification	Part/ full time	Since the date working in this home	Remarks (Mention if any personnel is available on 24 hours basis)
1	2	3	4	5	6	7	8	9
1	Manager/ Project Director/ Superintendent							
2	Doctor							
3	Psychiatrist							
4	Clinical Psychologist/ Counsellor							
5	Clerk/ Accountant							
6	Any other							

2. Infrastructure: Is the Home functioning/proposed to function from own or rented premises, give details

#### 2.1. Location:

SI. No.	Indicators	Remarks
1	2	3
	Is the name board of the Shelter Home prominently displayed in the premise.	
	Whether the shelter home is easily accessible from the road.	Yes/No

#### 2.2. Space:

SI. No.	Indicators	Remarks (Mention about availability, cleanliness, ventilation size etc.)
1	2	3
1	Total Number of rooms	
2	Number of toilets	
3	Approximate area of the building	(Sq. Ft.)
4	Approximate area of the premise	(Sq. Ft.)
5	Does the premise have a compound wall	
6	Security Arrangement	

#### 2.3. Assets:

SI. No.	Indicators	Remarks
1	2	3
1	No. of beds & mattress and their condition	
2	Any other movable/immovable assets	
3	Whether the organisation maintains an Asset Register.	Yes/No

#### 3. Number of Beneficiaries/inmates:

Sanctioned Strength		Present Strength		Total inmates at t	REMARKS	
Women	Children	Women	Children	Women Children		
1	2	3	4	5	6	7

#### 4. Basic Facilities:

SI. No.	Indicators	Remarks			
1	2	3			
Foo	od				
1	Details of the daily menu for the beneficiaries				
Clo	thing and sanitation				
1	Whether beneficiaries are provided with clothing and toiletries.				
Others					
1	Availability of water & electricity				
2	First Aid Box facility				

#### 5. Case Management:

SI. No.	Indicators	Remarks
1	2	3
1	Is the organisation maintaining Admission register of the beneficiaries.	
2	Is the organisation maintaining Attendance register of the beneficiaries.	
3	Does the organisation maintain separate case files of the beneficiaries.	
4	Please verify whether the following registers/records are being maintained as per prescribed format (This forms are as per Sections 8(i), 10, 11, 19(2), 38(6&7) of "The [Prevention of Immoral Traffic (Orissa) Rules, 1959".]	Form - VI: Inmate's register Form - VII: History Ticket Form - VIII: Statement showing the gain or loss in weight of inmates in * ( for the month of) Form - IX: Medical Officers Journal Form - X: Disposal Register Form - XI: No. of persons discharged during the year

6. Others:

6.	Others:	
SI. No.	Description	Remarks (Mention about availability, operationalization)
1	2	3
1	Disaster Managamant plan in place	
2	Linkage of pregnant & lactating women and children below 6 years to the nearest Anganwadi Center.	
3	Registration of births and deaths	
4	Educational facility for children & women	
5	Tie up with O.S.L.S.A./D.L.S.A.	
6	Grievance redressal system for the inmates	
7	Periodic report of the Shelter Home	
7.	Overall Assessment of the home by the District Inspe	ection Committee on :
	i. Quality of staffs in Home and their behaviour toward	ds the Beneficiaries :
	ii. Quality of facility (Infrastructure, Space) provided b	y the Institution to the Beneficiaries :
	iii. Quality of Services (fooding/clothing/medical/cour	nselling/etc.) for the Beneficiaries:

8.	3. Recommendation by the District Inspection Committee regarding issue of license/renewal to the Home under I.T.P.A., 1956:				
	A. Recommended for issue of License/renewal : Yes/N	0			
	B. If No, Please give reasons :				
	Name of D.I.C. Members : Signatur	res with date :			
	1				
	2				
	3				
	4				
	5				
	6				
	7				
9.	Forwarded to District Collector:				
	Date :				
10.	RECOMMENDATION OF THE DISTRICT COLLECTOR	:			
	Recommended for issue of License/renewal : Yes/No				
	Name the District Collector :	Date :			
	Signature :				

# FORM - IV [See Rule 7(2) of the (Prevention of Immoral Traffic) Orissa Rules, 1959] License

Serial	Name and	Name and full	Name in full of	Particulars of	Restriction	Date of	REMARKS
No. of	full address	description and	the Manager/	services to be	as to	expiry of	
License	of the	residence of	Project Director	rendered by	number of	license	
	Protective	license/Name of the	of Protective	the institution	inmates		
	Home	Chief Functionary &	Home				
		registered address of					
		the organisation					
1	2	3	4	5	6	7	8

The day of 20	(2001)
The day of Zu	 เอยสม

Licensing Authority

#### Conditions

- 1. This license is granted subject to all the provisions of the Immoral Traffic (Prevention) Act, 1956 (No. 104 of 1956) and the Prevention of Immoral Traffic (Orissa) Rules, 1959.
- 2. The license shall affix on a conspicuous part of the Protective Home, a signboard on which shall be painted in large letters in English and Hindi/Odia, the name of the Protective Home.
- 3. The license shall not be transferable.
- 4. The license shall remain in force for a period of one year from the date of issue.

#### FORM - V

## See Rule 7(3) of the [Prevention of Immoral Traffic (Orissa) Rules, 1959] Form of Application for renewal of license

1.	Full name of the applicant or Association :
	(If registered, a copy of the registration certificate and particulars of all members of the Association should be given)
2.	Religion:
3.	Residence (Town or village):
	Police Station :
	District:
	(Note—In case of association, particulars regarding items 2 and 3 be mentioned in respect of each member)
4.	Name of the institution :
5.	License No. and Year:
ô.	Any other particulars :

Signature (s) with date and place and names in Block Letters