## **User Guide for Online Application Process**

Candidates may apply online with the relevant documents by visiting the Live Online Portal <u>https://lmcaarunachal.nic.in/</u> of Department of Legal Metrology & Consumer Affairs, Govt. of Arunachal Pradesh. Click on the "**Click here to Apply**" Link.

CONTACT US: aplegalmet@gmail.com	24.5 PR		
Department of Legal Metrology & Consumer Affairs Government of Arunachal Pradesh	НОМЕ	BRANCHES	CONTACT US
Advertisement for the post of President, State Commission and Members, District Redressal Commission.	ct Commission under Arunachal Pradesh	State Consume	er Disputes

After clicking on the Apply Online Link, the website will ask you to login. <u>For Existing Registered Users</u>: User can proceed with existing Login Id & password. <u>For a new User</u>: Click on the "**Register Here**" link as shown in the image below

Apply For Service	× \ +				
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Fill in the details and click on "Submit" as shown below

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	Enter a valid Er	mail Address				
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An OTP will be sent to the user provided email address and mobile no. for verification purpose.

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## Enter the OTP received in the email address and Mobile Number and proceed to "Submit"

## Successful registration of email ID on the application has been completed.

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ARDICHAL	User registration on https://eservice.arunachal.gov.in/ has been completed successfully. Please go back and login to avail the services being offered.				
1 6-1	It is advised to change the password atleast in 45 days.				
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Click on the online application link again in the college website and login with your User Name and Password as created above, to get the application form.

**"Download**" both the Pre-defined documents. Fill up both the documents then scan them and keep them ready for upload.

serviceonline.	gov.in/configure/popUp.do?serviceId=24160001	I&primary=T&OWASP_CSRFTOKEN=LJ8
DOWNLOAD	PRE-DEFINED FORM/TEMPLATE	
o submit this a n/signed form/t on the link prov	application, you need to download the following of emplate in 'Attach Enclosures' screen. Please d ided below:	document(s) and upload the filled- download the form/template by clicking
SI.No.	Document Name	Action
1	Affidavit	Download
2	Certificate of Physical Fitness	Download

## Click on "Proceed to apply" to get the application form.

serviceon	line.gov.in/cont	igure/renderAppl	icationForm.	do?serviceId=	24160001&OW	ASP_CSRFTOK	(EN=LJ8W-UTL1	-T5ZT-M11Q-06CG-8WL7-UTWA-9I0X	&UUID=091a1ab	f-1842-46aa	ic ☆ ♥ \$	Paused
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		Work Exper	ience Details		
Work Experience Details					
Designation *	Organization *	Field of Experience *	Period *	Full Time or Part Time *	
				Please Select	~ 😣 🔂
		Decl	aration		
do hereby declare that t	he above particulars are true and corr	ect to the best of my knowledge and belie	f and in case of any false state	ment / information shall be liable for any	action under appropriate
ection of law.					
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		Addition	al Details		
pply to the Office *					
Consumer Affairs					
		Word	verification		
		JW62			
		Please enter the c	haracters shown above		

After filling the form click on Submit button.

The Preview of the application is displayed as shown below:

Applicant's Information								
Application Reference Number	er :	Draft_AF	RCA/2022/00007					
Post Applied For :		President	t State Commission					
Full Name :		XYZ						
Date of Birth :		01/03/198	86					
Mobile Number :		99999999	999					
E-Mail :		abc@gm	ail.com					
Present/Permanent Address :		ITANAGA	AR					
Education Qualification :		POST GF	RADUATE					
Photo :		儹	ingen a					
Work Experience Details								
Work Experience Details								
Designation	Organization	1	Field of Experience		Period		Full Time or Pa	t Time
TEST	TEST		TEST		2000-2010		Full Time	
Declaration	above particulars are true and correct to	o the best of my	knowledge and belief an	l in case of any false statement	at / information	shall he liable	for any action under ann	ronriate section of law
I Agree :		Yes						
Additional Details								
Apply to the Office		Consume	er Affairs					
i/2022 11:04:42 IST								http://serviceonline.gov.in/confi

If you are satisfied with all the entries, click on "**Attach Annexure**" button or if you want to change any of the entries click on the "**Edit**" Button.

Following form will appear if you click on the "Attach Annexure" button.

Pre-defined Form/Template:		
Note: To submit this application, you need to attach some document(s)	as prescribed. Please click here to download the pre-defined form/te	emplate and upload the filled-in/signed form/template at the below grid
sl.No.	Document Name	Action
1	Affidavit *	Choose File No file chosen
2	Certificate of Physical Fitness	Choose File No file chosen
Enclosure(s):		
Type of Enclosure	Enclosure Document	File/Reference
Age Proof	Select ~	Choose File No file chosen
		Scan
		Fetch from DigiLocker
Education Qualification	Select ~	Choose File No file chosen
		Scan
		🍐 Fetch from DigiLocker
Experience Certificates	Select 🗸	Choose File No file chosen
		Scan
		Setch from DigiLocker
Certificate/ Documents Showing That The Applicant Is Or Has	Select ~	Choose File No file chosen
·		Scan
		5 Fetch from DigiLocker
		🗋 Save Annexure 🛛 😣 Cancel 🗲 Back

Upload all the mandatory documents and click on "**Save Annexure**". You will again get the preview of the application form along with the uploaded document.

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Application Reference Nun	nber :	Draft_ARCA/2022/00007							
Post Applied For :		President State Commission							
Full Name :		XYZ							
Date of Birth :		01/03/1986							
Mobile Number :		9999999999							
E-Mail :		abc@gmail.com							
Present/Permanent Addres	SS :	ITANAGAR							
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Photo : Vork Experience Detai	ils								
Nork Experience Details									
Designation	Organization	Field of Experience	Period	Full Time or Part Time					
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	the above particulars are true and	correct to the best of my knowledge and belief a	nd in case of any false statement / infor	mation shall be liable for any action under a	appropriate section of lav				
I do hereby declare that t									

1)	Age Proof	Birth Certificate/ जन्म प्रमाण पत्र					
)	Education Qualification	Education Qualification					
)	Experience Certificates	Experience Certificates en Certificate/ Documents Showing That The Applicant Is Or Has Been Qualified To Be A District Judge					
4)	Certificate/ Documents Showing That The Applicant Is Or Has Been Qualified To Be A District Judge						
5)	Predefined Template	Affidavit					
6)	Predefined Template Certificate of Physical Fitness						
Ad	litional Details	Consumer Affairs					
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Click on "**Submit**" button to conclude the application form submission. Thereafter a system generated acknowledgement will be displayed, make sure to note down the "**Application Reference Number**" for future use.

To track the Status of successfully submitted application visit the Portal http://eservice.arunachal.gov.in/ and click on "Check Your Application Status" as shown below.

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	Check Your Application Status		Verify Ye	ur Certificate		SUMMARY	REPORT		

Select a suitable option (through "Application Reference Number" or through "OTP/Application Details") to tract the application as per convenience.

