## APPLICATION FORM UNDER THE NATIONAL FAMILY BENEFIT SCHEME

(Fields ma	rked * are mandator	ry)						
Name of Applicant		÷			Name of Spouse		<b>:</b>	
Gender		<b>:</b>			Date Of Birth		÷	
Name of Father/Husband		<b>:-</b>						
Address of	the Applicant :							
Village / Town *		<b>:</b>			GP	/ Ward *	÷	
Mouza		÷			Dist	rict	÷	
Sub Division		÷			Rev	enue Circle	<b>:</b>	
<b>Block Development Office</b>		<b>:</b>						
Post Office		<b>:</b>			Poli	ce Station	÷	
Pin No.								
Phone No.		91 (STD Code without 0 prefix + Phone No.)			Mol	b. No.	91 (10 Digit Mobile No.)	
e-mail ID,i	f any :		· 1					
Category of the applicant * :			÷			Name of the deceased :person *		
Date of Death of the : deceased person *				Relationship of the Applicationship of the Application with the Deceased Person			nnt : *	
Details of o	other Family Mem	bers of the	appli	cant :				
Sl.N	Sl.No Name of other Member		•   0		-		Annual Income of all Earning Family Members	
1							, i	
2								
3								
5								
6								
Details of I District	Land Holding of th			Family Membe		Division	÷	
Revenue Circle		÷				age / Town	;	
Mouza		÷			Patta No.		;	
Dag No.		;			Land Area		;	
	s stayed in the add							
•	-					e required: Yes	— No	
Date of sul Authority	bmission of the ap concerned before a submitted	plication*	<b>:-</b> .			<del>-</del>	140	
Any Other			<b>:-</b> .					

## **DECLARATION**

All the information furnished above are correct to the best of my knowledge and belief.

Date:- Signature of Applicant

## **Supporting Documents Required**

- \* In case, each supporting document has multiple pages, please convert the same to a single document, with a file size of less than 2MB(2048 kb) and upload.
- 1. Death certificate of the deceased person (1<sup>st</sup> August 1998 onwards)
- 2 . Certificate from the concerned PHC/Ward Commissioner certifying that the deceased was a person below the poverty line and main family earner.
- 3. Income Certificate of the applicant
- 4. Age proof certificate of the applicant
- 5. Other Documents (if any)
- 6. Recommendations of GP Secy./Ward Commissioner & duly signed by B.D.O/Chairman or chairperson
- 7. Passport size photograph of the applicant