



SHR - 12

**FORM FOR FINANCIAL AID GIVEN TO NOMINEE / LEGAL HEIR
UNDER SHARE HOLDERS' WELFARE FUND**

Mr./Smt./M/s. _____
SURNAME FIRST NAME MIDDLE NAME

Room & Floor No. _____ Name of Building _____

Road Name / Lane No. _____ Area / Locality _____ City _____

Pin Code Contact No. _____

Date :

To,
The Chief Executive Officer,
The Kalyan Janata Sahakari Bank Ltd.,
Kalyan (West)

Dear Sir / Madam,

Late _____ was a member of the bank (Membership no. _____). He / She expired due to natural cause/due to accident on .

As a nominee / legal heir I Mr./Mrs./Smt. _____

request you to grant me the financial aid under the **Share Holders' Welfare Fund Scheme**.

Please credit the proceeds to my SB / CD A/c

with _____ Branch or through NEFT / Pay order.

Enclosed :

(Signature of Applicant)

- (1) Photocopy of death certificate of shareholder.
- (2) Photocopy of Panchnama. (in case death due to accident)
- (3) KYC of Applicant. (Proof of Identity & Address : PAN & Aadhaar Card)
- (4) Cancelled cheque/ Photocopy of bank passbook. (In case applicant do not have account with us)

*** This facility should be availed within 2 years from the date of death of the member along with share refund/transfer application only.**

Amount of Financial Assistance : In case of natural death : ₹ 1,000/- & In case of death due to accident : ₹ 5,000/-

FOR BRANCH USE ONLY

Copy of documents received & Verified from originals.

Branch : _____

Date

EMPLOYEE NO.	SIGNATURE

(Signature of Branch Official with Branch Stamp)

FOR HEAD OFFICE USE ONLY (SHARE DEPARTMENT)

Remark :

Financial Aid given to nominee/legal heir under Share Holders' Welfare fund on

EMPLOYEE NO.	SIGNATURE