

From : _____

To : The Secretary
Zila Sainik Board

**APPLICATION FOR GRANT FROM WEST BENGAL EX-SERVICEMAN
CHARITABLE FUND (W.B.E.C.R.F.)**

Eligibility : (Only Non-Pensioners whose gross total income upto Rs 5000/- p.m.)
For the Year : _____

PART-I

Sir,

I hereby apply for grant from W.B.E.C.R.F. Information/ certificate required in connection with obtaining grant are as under :-

1	Name of the Ex-Serviceman (In Block Letters)	:	
2	Particulars of the Ex-Serviceman		
	(a) No	:	
	(b) Rank	:	
	(c) Unit last served	:	
	(d) Length of service	:	
	(e) Date & cause of discharge	:	
	(f) Date, place and cause of death (if alive, state alive)	:	
	(g) Amount of pension, if any	:	
	Amount of F/pension, if any		
3.	Name of the applicant and his relationship with Ex-serviceman. If the Ex-serviceman himself be the applicant, state "Self".	:	
4.	Particulars of the Applicant		
	(a) Present address	Vill : PS : State: W.B.	PO : Distt : PIN Code :
	(b) Present Age	:	
	(c) Occupation	:	
	(d) Monthly Income	:	
	(e) If the applicant has no income and no children to help him/her how does he/ she live ?	:	

SELF DECLARATION

I declare that the statement made above is true to the best of my knowledge and belief.

(Signature of the applicant)

No : _____ Rank: _____

Name : _____

Date :

PART-II**REMARKS BY THE RECOMMENDING OFFICER**

1. The particulars furnished by the applicant are true to the best of my knowledge and I recommend a grant of Rs _____ p.a.
2. It is also certified that there is no hope of obtaining assistance from the near relatives of the applicant who are in a financial position to render such assistance.

Date : _____ Signature of the Recommending Officer
(Ward Commissioner/ Councillor/ Anchal Pradhan)

REMARKS BY PRESIDENT/ SECRETARY ZILA SAINIK BOARD

Recommended/ Not Recommended

Details given in Part I & II have been verified and found correct.

Place :

Date : _____ (Rubber Seal)

APPROVED BY SECRETARY RAJYA SAINIK BOARD, W.B.

Pay Rs _____ (Rupees _____).

Place : _____ Secretary Rajya Sainik Board
Govt of West Bengal
Date : _____ (Rubber Seal)

NB : (Documents to be enclosed) : Applicant's Iden Card, Disch Book/Service Certificate, Bank Pass Book(front page)/ Cancelled Cheque Book, Non Income Certificate from Councillor and Aadhaar Card.

PART-III
VERIFICATION FORM

Verification report of No _____ Rank _____ Name _____

1. Name of the applicant :
2. Present age of the applicant :
3. Date of Enrolment of ESM :
4. Date of Discharge of ESM :
5. Pension/Family Pension/
Disability Pension :
6. **Monthly income from all sources** :-
 - (a) Income from Pension :
 - (b) Income from Agricultural Property :
 - (c) Income from House Property :
 - (d) Income from fixed deposits :
 - (e) Income from other sources :
 - (f) Income from service on
re-employment :
7. No of children the applicant has with their ages, relation, occupation and monthly income.

Ser No	Name of the Individual	Relationship	Age	Occupation	Monthly Income

8. Whether the children helping to the applicant :
9. Financial assistance received from all source :
10. Whether the applicant is living in own House/
rented house. :
11. Remarks/ Recommendation of Councillor/
Panchayat Pradhan/Chairman. :

Date :

Signature
(Ward Commissioner/ Councillor/ Anchal Pradhan)

COUNTERSIGNED

Place :

Secretary Zila Sainik Board
(Rubber Seal)

Date :

CHECK LIST FOR GRANTS FROM W.B.E.C.R.F.

(TO BE ATTACHED ON TOP OF EACH APPLICATION)

(Eligibility) : only Non-Pensioners whose Gross total income from all sources is upto Rs 5000/-)

1. Application in specific format along with verification report duly completed.
2. **Enclosures** : (please put tick mark against each as mentioned below)
 - (i) Applicants (ESM/Widow) Identity Card.
 - (ii) Discharge Book/ Service Particulars.
 - (iii) Non Income certificate by Gram Panchayat.
 - (iii) Bank details of the applicant (Pass Book/ Cheque book).

Name of Applicant	Gross total Income p.m. (Upto 5000/-)	Identity Card	Disch Book or Service Particulars	Non Income Certificate by Gram Panchayat	Bank Details (Pass Book/ Cheque Book)	Signature of Secy ZSB