

GENERAL MOHYAL SABHA (REGD.)

A-9, Qutab Institutional Area, U.S.O. Road,
Jeet Singh Marg, New Delhi – 110067
Telephone: 011-26560456, 25561504, 41783232
Email: gmsoffice2003@gmail.com Website: www.mohyal.com

Affix Passport size Photo of Applicant

APPLICATION FOR GRANT OF FINANCIAL AID TO WIDOWS FOR THE FINANCIAL YEAR- 20..... - 20..... PART-I

		1 111(1-1				
Sub Caste: Ba	li/Bhimwa	d/Chhibber	/Datta/Mo	ohan/L	au/Vaid	
Name of the Widow with Cas	ste	:				
Date of Birth/Age		:				
Postal Address with Pin Code	<u>,</u>	:				
where staying at present		:				
(Mention if own house / on re	ent)	:				
		·				
Permanent Address with Pin	Code	:			•••••	
T. 1						
Telephone/Mobile Number		:	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	
Name of deceased husband		:				
Date of death of husband		:				
(Please attach photocopy of 1	Death Certific	cate)				
Occupation of husband while	alive	:	Business / Self	f employe	d / Govt Service/ Pvt	
Details of Children		:				
Name of Child	Age	Married / Unmarried / Divorcee	Mon Inc	thly ome	Contact details (Address & Telephone Number)	
Are you in receipt of family	nancian from	m the employe	r of the decor	sad hushe	and	
(If yes, mention amount) Are you in receipt of pension Central / State Govt			Rs			
Existing source of income						
(a) From service						
(b) From self-employment						
(c) From any other source						
(d) Support from family men	nbers/relative	es :	Rs			
(e) From Local Mohyal Sabh	ıa	:	Rs			

Rs.

(f) How did you support yourself earlier

When no aid was received?

13.	Details of Immoveable Property					
	(a) House with size and number of floors,	:	Size	2.77	Sq. yds.	
	and its present market value.	:	Number Market	r of Floors	Rs	
	(b) Who, other than the widow, are the	•	Market	value	Ks	
	beneficiaries of this property?	:				
	(a) Are you staying in your own house / rente	d house /v	vith fami	lv/rolotivo	0	
	(c) Are you staying in your own house / rente (Please specify)	u nouse /v :		-		
It is co	ertified that the information given above is corre	ect.				
Date:				(Signature of the widow)	
Note:	Details of Bank Account in which the wido lled cheque/bank passbook to be attached)	ow pension	n given	by GMS i	is to be credited. (Photocopy of	
1.	Name of Bank with full address		:			
2.	Account No. and type of A/c (Saving or Curre	nt)	:			
3.	IFSC No. of Bank		:			
Date:				(Si	gnature of the widow)	
Docui	ments to be attached					
(3) Pr	otocopy of Ration Card/Election Identity Card esent income proof from employment or any other supporting documents.	er source			husband's Death Certificate. lhaar Card	
	Verification Certificate from the Local Mo Patron/Partisht/ GMS Life M		na or tw			
1.	 Local Sabha representatives visited the house and verified the details furnished by the applicant 					
2.	2. How much financial assistance the Local Sabha is giving or proposes to give.					
recom	It is certified that the particulars and facts statemended that the application may be considered to					
Signa	ture of President	Signat	ure of So	ecretary		
Mohyal Sabha		Mohyal Sabha				
Name		Name				
Addre	ess	Addres	s			
Phone No			Phone No			
Date			Date			

OR

Two prominent Mohyals who are either Patron/Partisht/ GMS Life Member, where Local Sabha does not exist

Signature	Signature
Name	Name
Address	Address
Phone No	Phone No
Life Membership No	Life Membership No
Date	Date

<u>PART – III</u>

Recommendation of Finance Advisory Committee of GMS

Secretary Finance