

Form-VII

(Application for Assistance under West Bengal Transport Workers' Social Security Scheme)

To
The Authorised Officer
West Bengal Transport Workers' Social Security Scheme

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Sir,

I do hereby submit my claim for assistance under the scheme for Rs.

(Rupees) as detailed below.

(Necessary documents in support of the claim to be enclosed)

SI No	Assistance towards	Amount
1	Pension	
2	Death - Accidental Death / Natural Death	
3	Permanent Disablement -	
4	Medical Benefit for – TB/Cancer/Leprosy/Cardiac Problems/ Malfunctioning of Kidney/AIDS/ Thalassemia	
5	For Surgical case	
6	MATERNITY BENEFIT	
7	Purchase of Spectacles	
8	Educational Assistance –HS/Graduation/Post Graduation/ Engineering/Medical	
9	Marriage of self or children	
10	Funeral Expenses	

I undertake to refund the entire amount or part thereof if my claim is found to be false.

Name:

Transport Worker Regn No.

Date:

(Signature of the beneficiary)