

Application No.

346



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

APPLICATION FORM

FOR ADVANCE REGISTRATION OF A FLAT AT

"Jeevan Niketan", M Block, Kolkata

5, BRAHMA BANDHAB UPADHYAY SARANI, NEW ALIPUR, KOLKATA

EASTERN ZONAL OFFICE, KOLKATA (To be filled in by the Applicant)

APPLICATION FORM (NOT TRANSFERABLE)

FOR ADVANCE REGISTRATION OF A FLAT AT *"Jeevan Niketan", 'M' Block, Kolkata*
5, BRAHMA BANDHAB UPADHYAY SARANI, NEW ALIPUR, KOLKATA

(Incomplete Forms / Forms not accompanied by registration fee are liable for rejection)

Photograph

A. PARTICULAR OF THE APPLICANT:

1. a) Name (in Block Letters)	*Mr. / Mrs. / Miss
b) Mother's Name:	
c) Father's Name:	
d) Spouse name:	
e) Marital Status:	[] Married [] Single
f) Identity proof - Any Two (PAN card / Voter ID / Driving License / Passport copy)	
2. a) Residential Address: (Attach Documentary evidence) Passport / Bank A/C / Electricity bill / Ration card / Telephone bill)	
b) Office / Business Address	
c) Telephone / Fax / E-Mail ID:	Office: Residence: Mobile No.: Fax No.: Email ID:
3. Date of Birth:	
4. Nationality of the Applicant:	

5. State whether Resident / Non-Resident Indian. If Non Resident Indian, state the Country of Residence.	
6. Name of nominee with full address and contact no.*	
7. Whether there is any flat / house in the applicant's / spouse name in the city of Kolkata. (Please give details)	
8. Bank Particulars: i) Account number in full ii) IFSC number iii) MICR number iv) Bank name & address	

* In case any mis-happening to the applicant till flat is finally handed over (if successful on draw of lots), the nominee shall be contacted.

B. OCCUPATION OF THE APPLICANT :

a) If Employed	
i) Name/s and Address/es of the Employers	
ii) Designation of the Applicant/s and his / her / their total Monthly Emoluments:	
b) If Self Employed:	
i) Nature of Profession / Business	
ii) Gross Annual Income from Profession / Business	
c) Permanent Account Number (PAN) allotted by the Income Tax Department	

C. TYPE OF FLAT :

(a) Location of FLAT - Preference

[Tick (✓) the floor desired in the appropriate box mentioning

1st preference, 2nd preference & initial by the side].

(Please do not mention Specific flats - only 2 options).

Pencil correction not incorporated

FLOOR	Please Tick (✓)	A, B, C & D type	Signature
1st & 2nd floor			
3rd to 6th floor			
7th to 9th floor			
10th to 12th floor			
13th floor			

(b) If unsuccessful in preferential allotment, are you willing to prefer any other flat, if available? : YES / NO

(c) Mark only one 1st preference and only one 2nd preference. Marking more than above may lead to Cancellation of Application.

D. DETAILS OF IN-FORCE LIC POLICIES HELD BY THE APPLICANT :

Sl. No.	Policy No.	Sum Assured (Rs.)	Plan and term	Date of Commencement	Mode of payment (Mly. / Qly. / Hly. / Yly.)	Due date of last premium paid	Name of Branch office servicing the policy

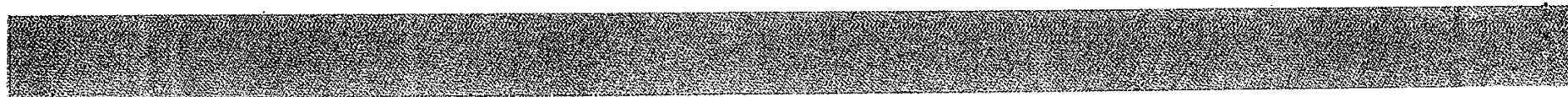
(Copies of latest premium paid receipt / certificate from servicing Branch / employer to the effect that the premiums have been received / deducted must be enclosed.

E. PARTICULARS OF REMITTANCE OF REGISTRATION FEES THROUGH NEFT :

Amount Rs. _____

Bank Name. _____ UTR _____

Date _____



F. BANK DETAILS OF APPLICANT/S FOR REFUND:

Account No. _____ Bank / Branch Name _____ IFSC Code _____

Note: 1. Particular in respect of both individual to be furnished in case of joint application. 2. Keeping in view of absence of the applicant due to any circumstances Power of Attorney shall be submitted.

Signature of the Applicant with name & address

DECLARATION

I/We hereby declare and affirm that the particulars given in this application are true in all respects and that the above referred flat, if allotted as per terms & conditions of the brochure will be purchased for Residential use and occupation AND THAT THE herein before made affirmation shall form the basis for consideration of allotment of a flat to me / us by LIC of India and if any untrue averment is made by me / us herein the LIC is at liberty to cancel the allotment of the flat and also take such other action / actions against me / us as the deem fit and / or as the may be advised by their Legal Advisers.

Further I / We, hereby declare that the initial deposit of Rs. 2,00,000/- (Rupees two lacs) will be remitted by me / us to the LIC of India in terms of relevant provisions in relation thereto contain in the Brochure setting out the terms and conditions for Sale of flats at JEEVAN BIMA NAGAR – M Block, Kolkata. I / We also agree that the allotment and Sale of the flat is subject to the terms and conditions set out in the Brochure.

Dated at _____ on the _____ day of _____ 2012

Signature of Witness: _____

Name: _____

Address: _____

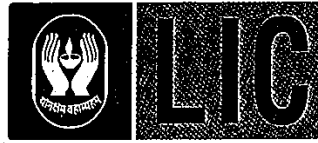
Signature of Applicant / s: _____

Name: _____

Address: _____

Name: _____ Occupation: _____

Address: _____



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

Office of the Chief Engineer, Eastern Zonal Office
Hindusthan Building, 4th floor, Engineering Department
4 C.R. Avenue, Kolkata - 700 072
www.licindia.in



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA
CHIEF ENGINEER'S OFFICE, Kolkata (To be filled in by the Applicant)

Application No. **346**

Application Acknowledgement Slip

Application No:	
Date of payment:	
Received from:	
Drawn from (Bank):	
Branch:	
Address for Communication:	
Date of receipt:	Signature & Stamp of LIC



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