DELHI DHAN KUBER CO-OPERATIVE (U) THRIFT & CREDIT SOCIETY LTD.

(Registered Under Delhi Co-operative Society Act, 2003 vide Regn. No. 10707 Dated 22-10-2020)

Regd. Office : U.S.B. 191-A, Mandawali Fazalpur, Delhi-110092

Phone : 9873177011, 8368764476

MEMBERSHIP APPLICATION FORM

Dated .....

Membership No.

Cross Sign on Photo is must

To
The Secretary / President,
Dear Sir,
I apply for admission as a Member of your Society.

I understand the Rules & Bye-laws of the Society and hereby agree to abide by them and any subsequent modifications thereto. I also hereby declare that I am neither a member of any other Co-operative Thrift & Credit Society operating or working in the State of Delhi nor taken any kind of Loan which is outstanding as on date.
I request that the Managing Committee may please allot me **1 Share** of **Rs. 500/-** each and I also agree to deposit **Rs. 200/-** per month on account of Compulsory Deposit as well as Admission Fee of Rs. 200/- and other sums towards Building Fund, Kalyan Fund, Misc. Rec., etc., as applicable on the date of my Admission as Member.
I hereby nominate the following person to whom all money due to me by the Society or payable by me to the Society, in the event of my death, may be paid or recovered, as the case may be.

1. Name of Applicant Mr./Mrs./Miss :
2. Father's / Husband's Name :
3. Mother's Name :
4. Date of Birth : Own House Property : Yes ☐ No ☐
5. Sex : Male ☐ Female ☐ Marital Status : Single ☐ Married ☐
6. PAN No. : Aadhar No.
7. Monthly Income : ₹ _____/= (Occupation : Service/Business/Others)
8. Present / Correspondence Address : H.No. _____ Block _____ Gali No. _____
   Near by _____ Area Name _____
   Distt. _____ State _____ Pin Code _____
9. Permanent Address : Vill./H.No. _____ P.O. _____ Teh. _____
   Distt. _____ State _____ Pin Code _____
10. Phone/Mobile/Contact No., If any : (M)_____ (R) _____ (O)_____
11. **E-MAIL** : _____ **Whatsapp No.** _____
12. Name & Address of the Employer or Business : _____
13. Name of the Nominee ..... Relationship with Member ..... Age of Nominee ..... Years
14. Signature of Introducer .....
15. Introducer Full Name : .....
16. Membership No. ..... Mobile No. ..... **E-MAIL** .....

.....
(Signature of Applicant)

(FOR OFFICE USE ONLY)

Admitted Shri/Smt./Miss.....

as a Member of the Society vide Resolution No. .....(4)..... PRESIDENT/SECRETARY/MANAGER

case Book Dt. & M.C. Meeting Date ..... and allotted Membership No. .....

Note Required Documents : Photo Copy Electric Bill / Water Bill / PAN Card /Aadhar Card (Compulsory) / 2 Passport Size Photo

Amount Payable for New Membership as under :- Share Money Rs. 500/-, C/D Rs. 200/- = (700/- Refundable)
Admission Fee Rs. 200/-, K/Fund Rs. 200/-, Bldg. Fund Rs. 200/-, Misc. Rs. 150/- = Total Rs. 1,450/- (Rs. 750/- Not Refundable)
Membership Closing Charges Rs. 200/-

E-mail : delhidhankuber@gmail.com • Website : www.delhidhankuber.com

SPECIMEN SIGNATURE CARD

Name of Applicant .....

Father's/Husband's Name .....

Membership No. .....

Mobile No. .....

Cross Sign on Photo is must

Signature .....

Signature .....

Signature .....

Signature .....