

The Bank of Behar Employees' Co-operative Society Ltd.

SBI Building Campus, J. C. Road, Patna

MEMBERSHIP FORM

Office Use

The Committee of Management
The Bank of Behar Employees' Co-operative Society Ltd.
J. C. Road, Patna

Membership No. :

Date :

Comrades,

I hereby apply for admission as a member of Bank of Behar Employees' Co-operative Society Ltd. I have carefully read the Bye-laws and rules of the above Society and I hereby agree to abide by the same.

I also request you to please allot to me shares of the Society and hereby agree to accept the same or any lesser number that you may allot to me.

I also do hereby nominate the person named below as the person to whom shall be transferred my shares, deposits and loans or any other interest in the Society after my death.

Yours faithfully,

Signature of Applicant.

Mobile No..... E-mail:.....

PF. Index No.

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 SB A/c No.....

Full Name (In Block Letters)

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Father's or Husband's Name

Date of Birth..

D	D	M	M	Y	Y	Y	Y
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 Designation

Date of Joining in Bank

D	D	M	M	Y	Y	Y	Y
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 Aadhar No.....

Native Village

P.O. P.S. District Pin.....

Present Address : STATE BANK OF INDIA,Code :

Name of the Nominee

Relationship Age of Nominee

Address.....

We recommended that Shri be admitted as a member of the Bank of Behar Employees' Co-operative Society Ltd. and certify that the applicant has signed the application in our presence.

1.....at SBIBranch

2.....at SBIBranch

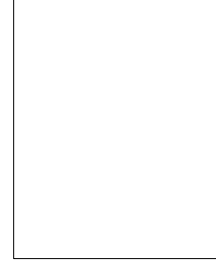
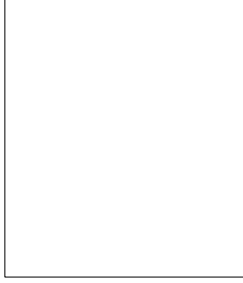
(Signature of Introducer's)

THE BANK OF BEHAR EMPLOYEES' CO-OPERATIVE SOCIETY LTD.

J.C. ROAD, PATNA – 800 001.

Regd. No. - PAT / 33 / 58.

Tel No. 0612-2677499



सदस्य का नाम :

Member's Name :

सदस्यता संख्या :

Membership No.:

शाखा/कार्यालय का नाम :

Name of the Branch / Office :

स्थायी पता :

Permanent Address :
.....
.....

सदस्य का हस्ताक्षर :

Member's Signature :

नामांकित व्यक्ति का नाम :

Nominee's Name :

सदस्यों के साथ रिश्ता :

Relationship with the Member.....

नामांकित व्यक्ति का हस्ताक्षर/अंगुठे का निशान :

Nominee's Signature / Thumb impression :

Hon's Secretary

Date of Issue

(Signature of Introducer's)

**Form of Application
For Membership to the Family Welfare Fund**

To,
The Committee of Management
The Bank of Behar Employees' Co-operative Society Ltd., Patna

Sir,

I hereby apply to become a member of the "FAMILY WELFARE FUND" of the Bank of Behar Employees' Co-operative Society Ltd., Patna.

I have carefully read the rules of the fund and I hereby agree to be abide by the same.

I am member of the Bank of Behar Employees' Co-operative Society Ltd., Patna.

I also do hereby nominate the person named below as the person to whom shall be transferred my fund and deposits or any other interest in the Fund after my death.

THE NAME AND ADDRESS OF THE NOMINEE :

Name : Age

Relationship :

Address Permanent

Address Present

Yours faithfully,

(Signature in full)

Signature of witness with full address

1. Name :
..... Address :

2. Name :
..... Address :

SIGN. ATTESTED CONTROLLING AUTHORITY WITH SEAL

Shri aforesaid admitted as a member of the Family Welfare Fund of the Society.

Date

Hon. Secretary.

The Bank of Behar Employees' Co-operative Society Ltd.

J.C. Road, PATNA

DECLARATION

I son of / wife of / daughter of
working as in the State Bank of India Branch hereby
declare as under :

- (I) That I am not a member of loaner member of any other Credit Co-operative Society functioning through-
Out the State Bank.
- (II) That I shall not become member of any other Credit Co-operative Society, in the State of Behar, unless I
Shall withdraw or ceased to be the member of the Bank of Behar Employees' Co-operative Society Ltd., J.C.
Road, Patna.
- (III) That the contents of the above declaration made by me, are true & correct to the best of my knowledge.

Signature of Applicant

Name (In Block Letters)
Address : State Bank of India. Branch

***(Counter signed by the controlling authority where the employee is posted).**

Dated/20...

**LETTER OF AUTHORITY
OF
Family Welfare Fund and Retirement Benefit Fund Contribution
(To be submitted in Duplicate)**

From :

Full NameDesignation

PF Index No. :.....State Bank of IndiaBranch

Date/20.....

To,

The Chief Manager/Office Manager/Branch Manager

State Bank of India

.....Branch.

Dear Sir,

The Bank of Behar Employees' Co-operative Society Ltd., Patna

<u>FAMILY WELFARE FUND</u>	<u>RETIREMENT BENEFIT FUND</u>
I hereby authorize you to deduct from my salary and pay to the The Bank of Behar Emp. Co-op. Soc. Ltd. Eachmonth until further notice, a sum of Rs. 200/- representing my monthly contribution to Family Welfare Fund of the Society.	I hereby authorize you to deduct from my salary and pay to the The Bank of Behar Emp. Co-op. Soc. Ltd. Eachmonth until further notice, a sum of Rs. 200/- representing my monthly contribution to Retirement Benefit Fund of the Society.

Witness : (By any member of the Society)

Signature.....

Yours faithfully,

Full Name

State Bank of IndiaBranch

(Signature in full)

**LETTER OF AUTHORITY
OF
Family Welfare Fund and Retirement Benefit Fund Contribution
(To be submitted in Duplicate)**

From :

Full Name

Designation

Address

Date/20.....

To,

The Chief Manager/Office Manager/Branch Manager

State Bank of India

.....

Dear Sir,

The Bank of Behar Employees' Co-operative Society Ltd., Patna

<u>FAMILY WELFARE FUND</u>	<u>RETIREMENT BENEFIT FUND</u>
I hereby authorize you to deduct from my salary and pay to the The Bank of Behar Employee's Co-op. Soc. Ltd. Each month until further notice, a sum of Rs. 200/- representing my monthly contribution to Family Welfare Fund of the Society.	I hereby authorize you to deduct from my salary and pay to the The Bank of Behar Employee's Co-op. Soc. Ltd. Each month until further notice, a sum of Rs. 200/- representing my monthly contribution to Retirement Benefit Fund of the Society.

Witness : (By any member of the Society)

Signature.....

Yours faithfully,

Full Name

State Bank of IndiaBranch

(Signature in full)

To,

**THE BANK OF BEHAR EMPLOYEES' CO-OPERATIVE SOCIETY LTD.
J. C. Road, Patna**

Sir,

I hereby apply on prescribed forms for admission as a member of your Society. According to regulations of your Society, I send herewith a Cheque /Draft No. dated payable at for Rs. 410/- (Rupees four hundred and ten only) in favour of **The Bank of Behar Employees' Co-operative Society Ltd.** Or Transfer Society Current A/c : **10331726259, IFCS Code : SBIN0001233** and write remarks Pfindex No.

Membership fee	:	Rs.	15.00
Share Capital			
@ Rs. 10/- for Share of ten shares	:	Rs.	100.00
Admission of Retired Banifit Fund	:	Rs.	50.00
Admission of Family Welfare Fund	:	Rs.	220.00
Documentation Charge	:	Rs.	15.00
Form	:	Rs.	10.00
		Rs.	410.00

(Rupees Four Hundred and ten Only.)

Signature of Applicant.

Office Correspondent Address

Secretary,
The Bank of Behar Employees'
Co-operative Society Ltd.
State Bank of India,
J.C. Road Branch Campus,
J.C. Road, Patna – 800 001.
Phone – 0612-2677499
Mobile : 91-9470610618
E-mailed : bankofbehar@yahoo.co.in

**All Forms download in www.thebankofbeharempcoop.org & Account Statement.
Your Membership No is User Id and Password is 1234 (By default).**