

APPLICATION FOR MEMBERSHIP

The Chairman/Secretary
Steel Authority of India Employees'
Cooperative Credit Society Limited
"Ispat Cooperative House"
12, Charu Chandra Place (East)
Kolkata-700 033

Membership No.

Dear Sir,

I am desirous of becoming a Regular Member of your Society and shall be obliged if you kindly put up this application at the next meeting of the Board of Directors for their consideration. I hereby declare that I am not a member of any other Credit Society.

I would request you for the allotment of.....number(s) of Shares to me and I do hereby agree to accept the same or any less number, subject to the Bye laws of the Society.

I also declare that I was a member of your Society (Memb. No.) upto.....

Name in Block Letters

Father's/Husband's Name

Date of Birth

Present Address

Permanent Address

Name of Office/Department

Designation Date of Joining in SAIL

Contact No. Tele. Mobile

E-mail Address

I also hereby declare that I shall abide by the Bye-laws and Rules and amendments thereto as may be made from time to time.

Yours faithfully,

(Signature in Full)

We know Shri/Smt.personally and intimately and having regard to the object of the Society and the rights, obligations and responsibilities of the members, we are of opinion that he/she is a fit and suitable person for admission as a member. Accordingly, we recommend his/her case the Board of Directors of the Society for consideration. (Recommendation by any two Members only)

Full Name in Block Letters : Full Name in Block Letters :

Signature Signature

Membership No. : Membership No. :

Date : Date :

PARTICULARS OF DECLARATION AND NOMINATION

Affix Nominee (s)
Photograph

I, hereby nominate the person (s) mentioned below to whom, to the exclusion of other persons, the amount standing at the credit in my membership account of the above Society, in the event of my death, the Society shall dispense of all my Shares, Dividends, excess recovery in respect of Loan contracted by me or otherwise subject to recovery of dues on account of my liabilities, if any, towards the Society in favour of the nominee who shall give valid and effectual receipt and discharge thereof.

Sl. No.	Name of the Nominee	Full Address	Relationship	Date of Birth*	Share %

* in case of minor

As the nominee(s) at Sl. No.us/are minor (s), I appoint Shri/Smt./Kumari.....
..... (Full address).....

.....to recover the sum due in the event of my death during the phase of minority of the nominee(s).

(Signature)

Certified that Shri/Smt.was a Member of the Society and the particulars furnished above by him/her are true as per his/her service record.

Date..... Signature of the Chairman/Secretary

For Office use only

Admitted BOD Meeting Dt.
Secretary Chairman

Membership No.