

Form No 1: Artisans/ Weaver/ Traditional Craftsman Enlistment ID No. (if available): _____

Application for Death Benefit to Artisans/ Weaver

A. Personal Details of Deceased Artisan / Weaver:

Tick* (Any one): Artisan ☐ Weaver ☐ Traditional Craftsman ☐

Name of the deceased * _____

Aadhaar No.:* _____

Gender:* Male ☐ Female ☐ Others ☐ (Tick on appropriate box)

Date of Death (as per Death Certificate issued by competent Authority) :* _____

Date of Birth (as per Aadhaar/ Epic) :* _____ Age: _____

Address:* _____

District: * _____ Sub Division: * _____

Tick* (Any one): Block ☐ Municipality ☐ Corporation ☐

Block/ Municipality/ Corporation Name:* _____

Police Station: * _____ Post Office: * _____ Pin Code: * _____

Craft/ Trade Details:

Craft/Trade Category:* _____ (Refer Annexure-1 for Trade Category)

Craft Details (if Trade category is selected as **Others**): _____

B. Personal Details of Claimant(s):

Details	Claimant 1	Claimant 2	Claimant 3
# Name of Claimant*			
Contact No.*			
Relationship with Deceased*			
Address of Claimant			
Address*			
District*			
Sub Division*			
Block / Municipality / Corporation Name*	☐ B/ ☐ M/ ☐ C	☐ B/ ☐ M/ ☐ C	☐ B/ ☐ M/ ☐ C
Police Station*			
Post Office*			
Pin Code*			
Bank Details of Claimant			
Bank Name*			
Account No.*			
IFSC*			

(In case of more than 3 applicants, details of others are to be annexed in a separate sheet in the same format as above)

C. Supporting Document of Deceased:

Artisan's Enlistment no. ☐ Aadhaar Card * ☐ Death Certificate* ☐

D. Supporting Document of Claimant(s): (In case of multiple applicants, Documents of each applicant are to be submitted)

Eligibility certificate by Competent Authority* ☐ Photocopy of Bank Passbook* ☐

Declaration –

I / We being the eligible kin(s) of the deceased Artisan / Weaver above, do hereby apply for the ex-gratia under the Death Benefit Scheme for the weavers/artisans of West Bengal. I/ We have not received any grant/assistance from any Govt.- Central/ State under any Death Benefit Scheme.

All information provided in this application are true to the best of my /our knowledge & belief.

* Star-marked fields are mandatory

Full Signature of Claimant (s)