

CMTD A/c. No. _____

ECCS - 1 (Revised)
Enclose latest attested payslip

If Compassionate Appointment Details of F/ Name

Desgn. P.F. No. DOR / DOD



**SOUTH CENTRAL RAILWAY
EMPLOYEES' CO-OP. CREDIT SOCIETY LTD.,
SECUNDERABAD - 500 025.**

APPLICATION FOR ADMISSION / RE-ADMISSION

Photo to be
affixed and
attested by
Department

To
The Secretary,
S.C. Rly, Employees' Co-op. Credit Society Ltd.
Secunderabad - 500 025.

As I wish to become a shareholder of the Society, I request you to kindly enroll me as a member of the Society. I shall abide by the Rules and Regulations of the Society.

I. ADMISSION

Name of Applicant _____
(In Block Letters as per Railway Records)

Father's / Husband's Name _____
(In Block Letters as per Railway Records)

Designation _____ Ticket No. _____ Dept. _____

Name of the Office _____ Pay Bill Unit No. _____ Station _____

Date of Birth _____ Date of Appointment _____

P.F. Account No. _____ Gaztted / Non-Gaztted _____

Basic Pay Rs. _____ Scale of Pay _____ Grade Pay _____

Bank account No. _____ Bank Name _____

Bank IFSC Code _____ Branch _____

Permanent Residential Address _____

Cell No. _____ E-mail ID _____

II. NOMINATION FOR CMTD & MBF

I hereby nominate the following person / persons and confer on him/her/them the right to receive the amount that may be sanctioned by the society under CMTD/MBF in the event of death while I am a shareholder as specified below:

Name and Address of Nominee / Nominees	Relationship with shareholder	Age	Share amount to be paid to each (%)

If the nominee is a miinor, Guardian's name Smt. / Sri _____

Relationship _____

Address _____

III. DECLARATION

(STRIKE OUT WHICHEVER IS NOT APPLICABLE)

- I hereby declare that I was not a member of any Co-operative Credit Society of the Railways since my appointment in Railways. (OR)
- I hereby declare that I was a member of the following Co-operative Credit Society during the period from _____ to _____
 - Name of the Society _____
 - Place _____ iii) CMTD Account No. _____
 - Date of closing of the Account with file No. _____
 - Whether the clearance certificate from that Society is enclosed _____

NOTE: IN CASE OF RE-ADMISSION NECESSARY CMTD, MBF., ETC., WILL BE RECOVERED AS PER THE EXISTING RULES.

I DECLARE THAT IN CASE THE PARTICULARS FURNISHED ABOVE ARE PROVED TO BE FALSE AT A LATER DATE I AM LIBALE TO BE DEBARRED FROM THE SOCIETY BESIDES DISCIPLINARY ACTION TO BE TAKEN BY RAILWAY ADMINISTRATION FOR SUPPRESSION OF FACTS. **MEMBERSHIP SHOULD BE MINIMUM 3 YEARS.**

Date _____ Signature / LTI of applicant _____

To be Attested by Immediate Supervisor _____

Signature & Stamp _____

