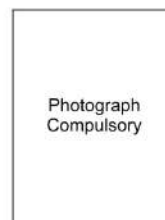


## APPLICATION FOR MEMBERSHIP

Form No. \_\_\_\_\_

### **Bharat Petroleum Corporation Employee's Co-operative Thrift & Credit Society Ltd.**

28A, ECE House, KG Marg, Cannaught Place, New Delhi-110001  
(Regn. No. 139 Dt. 9.3. 1931)



Dated \_\_\_\_\_

E. D. P. No. \_\_\_\_\_

The Secretary,  
Bharat Petroleum Corporation Employee's Co-op  
Thrift & Credit Society Limited  
New Delhi-110001

Admitted on \_\_\_\_\_

**(Competent Authority)**

Dear Sir,

I apply for admission as a member of the Bharat petroleum Corporation Employee's Co-operative Thrift & Credit Society Ltd. I have carefully read the buy-laws and rules of the Society and I hereby agree to abide by them.

**I am not a member of any Co-operative Credit Society of unlimited liability.**

I promise to deposit ₹ \_\_\_\_\_ as monthly compulsory savings deposit as under :

**Share A/cs ₹ \_\_\_\_\_ Withdrawable A/c. ₹ \_\_\_\_\_ Non-withdrawable A/c. ₹ \_\_\_\_\_**

I also beg to nominate and do hereby nominate my (relation) \_\_\_\_\_

(Name) \_\_\_\_\_ Age \_\_\_\_\_ Ph. \_\_\_\_\_ Mobile No. \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Pin No. \_\_\_\_\_ to whom the value of

the shares I may be permitted to hold and the profit which may accrue thereon should be paid in the event of my death or permanent insanity.

Date of Birth : \_\_\_\_\_

Your faithfully

Email : \_\_\_\_\_

(Signature Applicant)

Name in Block Letter's \_\_\_\_\_

Father's / Husband's Name \_\_\_\_\_

Applicant's Age \_\_\_\_\_ Department \_\_\_\_\_ Designation \_\_\_\_\_

Salary per month \_\_\_\_\_ Whether a Member of Provident Fund \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_ Ph. (O) \_\_\_\_\_ (R) \_\_\_\_\_ (M) \_\_\_\_\_

Present Address \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_ Ph. (O) \_\_\_\_\_ (R) \_\_\_\_\_ (M) \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_ Ph. (O) \_\_\_\_\_ (R) \_\_\_\_\_ (M) \_\_\_\_\_

Certified that Ms./Mr. \_\_\_\_\_ EDP No. \_\_\_\_\_ holds permanent post in the \_\_\_\_\_ and has been confirmed in his appointment.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature Head of the Department

(Name & Office Rubber Stamp)

#### **Witness :-**

We know Ms./Mr. \_\_\_\_\_ personally and intimately and wing regard to the objects of the Society and the rights obligations and responsibilities of the members. we are of opinion that he is a fit and suitable person for admission as a member.

\_\_\_\_\_  
(Signature)

Name \_\_\_\_\_

E.D.P. No. \_\_\_\_\_ Department \_\_\_\_\_

Office Address \_\_\_\_\_

Ph. (O) \_\_\_\_\_ (R) \_\_\_\_\_ (M) \_\_\_\_\_

#### **COMPULSORY REQUIRED DOCUMENT**

1. Photo copy of BPCL I-Card (Both side) Self attested
2. Photo copy of latest pay slip self attest.
3. Photographs