



GOVERNMENT OF MANIPUR
DEPARTMENT OF SOCIAL WELFARE

APPLICATION FORM FOR NATIONAL FAMILY BENEFIT SCHEME(NFBS)
(This benefit will not be given to those availing widow pension)

A. Details of Deceased

Name : _____ S/o _____

Gender (Male/Female/Transgender) : _____ Age at the Time of Death: _____

Address:: _____

Village: _____

Gram Panchayat:/Ward/locality : _____

B. Details of the Family Member to be provided Assistance

Name : _____ S/o, W/O _____

Gender (Male/Female/Transgender) : _____ Date of birth (with proof): _____

Address:: _____

Village: _____

Gram Panchayat:/Ward/locality : _____

Sub District/Block : _____

District : _____

State : _____ PIN _____

Annual Income Certificate (Certificate to be enclosed) (Issued by SDC/SDO/BDO concerned)

Annual income per annum _____ (Rupees _____)

NAFSA Card Details:

Card No.: _____ Family ID No.: _____

Member ID No.: _____

Mobile Number _____ Aadhaar No. _____

Bank Account No. _____ Name of Bank Branch _____

IFSC code: _____

Documents required:

- 1) Aadhaar Card details
- 2) Bank Account details
- 3) Death certificate issued by Registrar death and birth.
- 4) Income Certificate(issued by competent officer)/NFSA card details
- 5) 2(two) passport size photograph
- 6) Age proof certificate issued by the competent Authority .

Signature of the Applicant/Thumb Impression

Counter Signature
of Verification Officer _____

Name _____

Designation _____