

**FORM – XXVII [See Rule 268(4)]**  
**APPLICATION FORM FOR REGISTRATION**  
**(Mizoram Building & Other Construction Workers Welfare Board)**

Name of Worker		
House Number & Address		
District		
Voter ID Number		
Aadhaar Number		
Phone Number		
Whether SC/ST		
Gender		
Marital Status		
Date of Birth		
Name, Address, & Register No. of the establishment where the applicant is working		
Nature of Job (Hnathawh Hming)		
Name of Father		
ESI/PF No., if any		
Name and Address of employer		
Total Service		
Bank Information	Account Number	
	Bank IFSC	
	Bank Name	
	Bank Branch	
If the applicant is already a member of any other Welfare Board, the name of such Board & Registration No.		
Nupui / Pasal te member nih chuan an hming leh registration number		

A chung a ziak hi a dik vek a, tih dik loh emaw phuahchawp a awm anih chuan ka dil angin siam mahse englai pawhin sut (cancel) sak theih a ni tih ka pawm a, engmah ka sawisel loang tih ka intiam e.

**Date :** .....

**Place:** .....

**Name & Signature  
of the Employer**

**Name & Signature  
of the Applicant**

**DOCUMENT THIL TEL TURTE:**

1. Voter I.D. card photocopy (Voter ID a Date of Birth lang lo te tan piankum lan chhianna document dang thiltel bawk tur a ni.)
2. Aadhaar Card photocopy (As per section 142 of Code on Social Security, 2020)
3. Family Ration Card attested photocopy.
4. Bank Passbook attested photocopy.
5. Passport size photo 2 copies.
6. Local Council/Village Council leh Branch YMA/YLA/MTP hriatpuina.

**NOMINATION FORM**  
**FORM NO. XXVIII {(See Rule 268(7))}**

I nominate the following person/persons as rightful dependents to receive all the dues from the fund on my behalf and in the event of my death, as rightful heirs to receive all benefits due to me.

Sl. No.	Name and address of Nominee/Nominees	Relationship with Member (Inlaichinna)	Age of Nominee	Amount to be given to each Nominee
1				
2				
3				

The particulars of the present members of my family are furnished below:

Sl. No.	Name	Date of Birth/Age	Relationship with member (Inlaichinna)	Whether residing with him/her or not
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

I hereby declare that the particulars above have been given by me and are true to the best of my knowledge and belief.

I further declare that the particulars furnished by me tally with those which I have already furnished earlier from time to time.

**Place :** .....

**Date :** .....

**Name & Signature  
of the Applicant**

