

**APPLICATION FOR ISSUE OF IDENTITY CARD FOR WIDOW /  
WAR WIDOWS OF EX-SERVICEMEN**



**STAMP SIZE  
PHOTOGRAPHS**

1. Name of the applicant \_\_\_\_\_
2. Date of Birth / Age \_\_\_\_\_
3. Address : H.No. \_\_\_\_\_  
Village \_\_\_\_\_ Post:- \_\_\_\_\_  
Tehsil Or Police Station \_\_\_\_\_ Mandal \_\_\_\_\_  
District \_\_\_\_\_ State \_\_\_\_\_  
Mobile No. \_\_\_\_\_ E-mail ID: \_\_\_\_\_
4. Wife of late \_\_\_\_\_
5. Service Particulars of husband (a). No. \_\_\_\_\_  
(b). Rank \_\_\_\_\_ (c). Date of Birth \_\_\_\_\_  
(d). Date of enrolment \_\_\_\_\_ (e). Date of death \_\_\_\_\_  
(f). Discharge Book No & date \_\_\_\_\_ (g) PPO No & Date \_\_\_\_\_
6. Death details of husband.  
War / Operation in Which died \_\_\_\_\_  
Attributable \_\_\_\_\_  
Non Attributable \_\_\_\_\_  
After retirement \_\_\_\_\_
7. Pension received      Ordinary family      Special family  
Pension Rs. \_\_\_\_\_      Pension Rs. \_\_\_\_\_  
Liberalized special family pension Rs. \_\_\_\_\_
8. Identification Mark \_\_\_\_\_
9. Left Thump Impression \_\_\_\_\_

**DECLARATION**

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

Date: \_\_\_\_\_

Place \_\_\_\_\_

Signature of the Applicant.

(P.T.O)

REQUIRED DOCUMENTS FOR ISSUE OF WIDOW OF ESM IDENTITY CARD

- 1). Passport Size Photographs - 4 No's
- 2). Discharge Book / Service Particulars - Original + (One Copy of Xerox).
- 3). Pension Book / Pension Payment Order - (One Copy of Xerox).
- 4). For NON Pensioner's – Family Members Certificate Issued by Thasildhar (Or)  
Certificate from the Corporator of that area
- 4). Aadhar & ECHS Cards (All Family Members Copy of Xerox.
- 5). Pension Bank A/c Pass Book First Page / Cheque - Xerox Copy
- ⑥ exSM old I' card
- ⑦ exSM Death certificate

**REGISTRATION FORM - WIDOW / WAR WIDOWS OF EX-SERVICEMEN**

1. Name \_\_\_\_\_

2. Date of Birth / Age \_\_\_\_\_

3. Address : H.No. \_\_\_\_\_

Village \_\_\_\_\_ Post \_\_\_\_\_

Tehsil or Police Station \_\_\_\_\_ District \_\_\_\_\_

Pin. Code \_\_\_\_\_ State \_\_\_\_\_

Mobile No. \_\_\_\_\_ E-mail ID: \_\_\_\_\_

PHOTO

4. Particulars of Husband:-

No. \_\_\_\_\_ Date of Enrolment \_\_\_\_\_

Rank \_\_\_\_\_ Date of Discharge \_\_\_\_\_

Name \_\_\_\_\_ Discharge Book No.&date \_\_\_\_\_

Decoration \_\_\_\_\_ Regt/Corps \_\_\_\_\_ PPO.No.&Date \_\_\_\_\_

Religion \_\_\_\_\_ Caste \_\_\_\_\_

5. Details of husband's

War / Operation \_\_\_\_\_ Attributable \_\_\_\_\_

Non Attributable \_\_\_\_\_ After retirement \_\_\_\_\_

6. Details of family (only dependent Children upto 25 Yrs and dependent parents of deceased ex-servicemen).

Name	Age	Relationship	Educational Qualification
------	-----	--------------	---------------------------

i).

ii).

iii).

iv).

7. Amount of family pension Ordinary Rs. \_\_\_\_\_ Special Rs. \_\_\_\_\_

Liberalised special family pension Rs. \_\_\_\_\_

8. Lumpsum Payment Received:

Gratuity Rs. \_\_\_\_\_ Group Insurance Rs. \_\_\_\_\_

Encashment of leave Rs. \_\_\_\_\_ Financial Assistance Rs. \_\_\_\_\_

Communicated Pension Rs. \_\_\_\_\_

9. Present Occupation & monthly income

Service Rs. \_\_\_\_\_ Business / Industry Rs. \_\_\_\_\_

Agriculture Rs. \_\_\_\_\_ Un-employed \_\_\_\_\_

10. Other relevant information, if any \_\_\_\_\_

11. Identification of Mark \_\_\_\_\_

12. Left Thumb Impression: \_\_\_\_\_

**DECLARATION**

I hereby declare that the above information is true to the best of my knowledge and belief.

Date: \_\_\_\_\_

(Signature of Applicant)

Place: \_\_\_\_\_

**FOR OFFICE USE**

STATUS AS WIDOW

Yes / No

Category

War Widow \_\_\_\_\_

Attributable \_\_\_\_\_

Non Attributable \_\_\_\_\_

After Retirement \_\_\_\_\_

No. & date of Identity Card Issued \_\_\_\_\_

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(Signature of Zilla Sainik Welfare Officer)  
With Office Stamp & Date