From KYC Version 3 - 2014-IOC/BPC/HPC

Paste your

		AEEC CO-O	PERATI	VE STO	RESI	TD (C	5-216	50) K	YC F	ORN	Λ			.	pho	oto	here	9
	(To be filled in	i black ink w	ith BLC	OCK LET	TTERS	. Field	ds ma	arkec	wit	h * a	are n	nand	atory)				
		(For Inst	ruction	s to fill	form	plea	se se	e Ov	erlea	at)								
1) Perso	nal Details			-	-								-					
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b) Gas Consumer Num	per								D	ate	or	BIM)*[]	DN	1 M	-, _	Y	Υ
I) Close Relative													_	-	1			
Father'	Name*										_	_		-				
Mother's	Name*														J			
			5 7 M		700 - 11 - 13													
2) Addre	ess for LPG conn	ection / Co	ntact I	nforma	ation													
Proof of Address (P	OAL category Co	de* P C	DIA		_													
House No	on colegory co	ue / C	1	++	T	TT		TT	Floo	or N	o*						_	-
Street / Avenue					++													-
Road Name			++												-			
City/Town/Village	X-10-00-00-00-00-00-00-00-00-00-00-00-00-											Pin	Code	,*		-		-
District*									Sta						-	-	-	-
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Email id																		
	Relevant Detai	ils																
3) Other	Neievani Detai																	_
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Card Number*			1															__
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State Of Issue																		
Ration Card Number Declaration: I here	y declare that the	e informatio	n provi	ded by	me ab	ove i	s true	and	corr	ect t	o the	e best	of m	y kno	wled	ge a	ind	
Declaration: I here belief. I also confirm	n that in the ever	at of any inf	iormatic	on prov	ided l	oy me	is f	ound	inco	rrec	t / is	Inco	mplet	e and	aiso TPC >	nn will	he	
belief. I also confine event of any violation	on of Governmen	n Regulatio	n relate	d to th	e sup	ply ai	nd di	stribi v dan	non	or I	JPU, Jevy	of p	enal o	harge	s as	per	the	
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within its right to di policy and guideline	and may initiate	legal action	арриса	able un	der pr	0 11510	J113.											
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Name & Signature																		
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Consumer Number (1	anotted):													ь.				
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Signature of Distribu	or		4															
			1															

APPLICATION FOR INDANE: TERMINATION / TRANSFER VOUCHER

200

CO	~	(5)	CP1		2	w		2	-	
8. Deposit Amount	7. Type of Installation	Reason	Place to which TV is required		Indane Consumer No.	I.C. No Unit		2 Address (present)	Name (in capital letter as per S V)	The Special Officer, A.E.E.C. Co-op. Stores Ltd., Kalipakkam – 603.102.
Rg	SEC / DBC	transferrencementalista in manufactura de la formación de la constante de la c	CONTRACTOR OF THE PROPERTY OF	S.V. No	S.V. No	Membership No.	Distribution of the Control of the C	and the continuous and the conti	or advantage appropriate but and a state of the state of	

has elapsed since my taking the SV. lunderstand that preferential connection against this voucher will be given only if a period of six months

Not applicable for Government officials on transfer.

Asst. Secretary / Asst. Manager (LPG)

Signature of the Customer

** The customer has to hand over the empty cylinder/s and regulator to the LPG Section In-charge.

FOR OFFICE USE ONLY

Regulator handed over to the LPG Section in-charge. Collected one/two number/s of empty cylinder/s and Deposited in Godown. One No. of Pressure

 Cylinder No. ... 2. Cylinder No. ...

Signature of the Gas Delivery Boyl Godown Keeper

Updated the Following Register

- Empty cylinder vide page No.
- Customer Register vide S. No. Outgoing TVs vide S. No. Pressure Regulator vide page No.

All entries checked by me.

TV prepared for signature for release LPG Section In-charge

CO-OPERATIVE STORES LTD., G-2160 - KALPAKKAM - 603 102 ATOMIC ENERGY EMPLOYEES' CONSUMERS

To

Name of the Nomince & Relationship Entrance Fee / Cost of Purchase book allotment of shares Amount tendered towards Occupation: Father's / Husband's Name Amount rendered towards Present Residential Address Name (in block letters) Here by apply for the Membership / Trade Deposit Holder of the Stores. I furnish below the particulars *I hereby declare that I have read the bye-law of the Stores and agree to be found in all matters to my I, the undersigned Smt / Shri Kalpakkam - 603 102 Male / Female A.E.E.C. Co-op. Stores Ltd., The President / Special Officer, Designation Identity Card No. Mobile No Aadhaar Card No. APPLICATION FOR ADMISSION OF MEMBER SHIP / TRADE DEPOSITE HOLDER Community: : Rs. Emp. No...... : Rs.Unit..... SC / ST / General KALPAKKAM-603 102. Age:

Sex:

OFFICE USE

Membership No. / T.D. No....

Name & Address:.... Signature of the witness with date:

*I further declare that the information give above is true and correct to the best of my knowledge.

transaction with the Stores.

Approved

Signature of the applicant

with date

President / Vice-President

Receipt No. & Date:

Allotted Share No. / T.D. No.

Note: Enclose Xerox copy of

1. Identity Card

House Allotment Order by GSO

Aadhaar Card

Kalpakkam	,				
Date:					
From					
			Member	ship No	
			4-22		
То					
The Presider A.E.E.C. Co Kalpakkam	-op. Stores Ltd.,		AST.		
Sir,	Sub: Cancellation of N	Membership – re	eg.		
I have	been retired / transfer from our stores and I	red from Govt.	Service. So I v		
TT 1					
I hank	ing you,			Yours fait	hfully
				i ours fait	inully,
				Signature of t	he member

RENEWAL VOUCHER FOR FIXED DEPOSIT AEEC Co-op. Stores Ltd., G.2160 Kalpakkam - 603 102 ADJUSTMENT

M.No.	IC No.	Name
	• •	• •
	<	D

Ph. No.: Address:

>)ate: oucher No.:

F/D No.	PRINCIPLE	INTERSEST	RENEWAL AMOUNT

CLERK

ASST. MANAGER (ACCTS)

SECRETARY

PRESIDENT

Thanking you.

AEEC CO-OP. STORES LTD., G-2160 KALPAKKAM - 603 102 APPLICATION FOR RENEWAL OF FIXED DEPOSIT

From			DATE:
Name			То
IC No.			The President,
M.No.			AEEC CO-op. Stores Ltd.,
Pan No.	Harry Mary		Kalpakkam
Address			603 102
Phone / I	Mobile No.:		
Sir,			
I / We re	quest you to rene	w the fixed deposite No	
account i	n my / our name	(s) for Rs	(Rupees
**********			only)foryears
months	days.		
I / We ag	ree the interest r	ate @ Per annum	
Thanking	you.		
			Yours faithfully
			Signature of the depositor(s)
			signature of the depositor(s)
	Clerk	Asst. Manager (Acct	s) Secretary

Fresident