

BOARD OF AUQAF, WEST BENGAL

6/2, MADAN STREET, KOLKATA 700 072

District :

Block / Municipality :

Paste recently
Passport Size
Colour Photo

Life Certificate

Name:

Father's Name:

Address:

Address of Mosque : Village / Premises:

P.O. P.S. Pin No.

Land particulars of Mosque: Mouja J.L. No.

Khatian No. Plot No. Area of Land.

Name of Bank IFSC Code of Bank.

Bank Account No.

Last date of drawing honorarium.

Contact No. of Imam / Moazzin

Present Age Date of Birth

Educational Qualification:

Period performing duties as Imam / Moazzin:YearMonthDay

I do hereby declare that the above mentioned statements are true, I am rendering my services under the scheme "Administration, Protection, Supervision and Development of Wakfs Scheme, 2013" and also fulfilling my duties in the said mosque.

Signature of President /Secretary of Mosque Committee
(with date & seal)

Signature of Imam / Moazzin

Contact No.

I do hereby declare that the applicant is alive as on date and aforesaid statements are correct.

Signature of M.P./M.L.A/ SDO/DOMA/B.D.O/ Chairman or
Councilor or E.O. of the Municipality/ District Imam Representative
(with date & seal)

Date of submission:

N.B. Life Certificate of each and every beneficiary must be submitted to the concerned DOMA office only on and from 1st December to 31st December every year. Otherwise honorarium will not be disbursed to the beneficiaries.