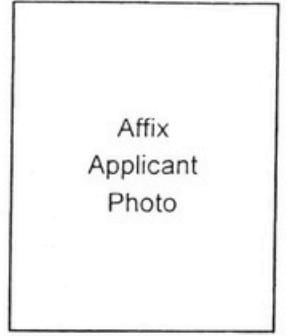


**Application for Sanction of “Maternity Benefit”  
for women Construction workers and their daughters  
under BOCW Act**



Registration No. of the worker with date :

ALO Circle No. :

Renewed upto :

Challan No. Date & Amount :

1. Name of the Construction Worker : .....

a) Address : .....

b) Phone No. : .....

c) Caste : SC / ST / BC / Minority / others

2. Name of the person (Daughter/wife) : .....  
benefited from the scheme(if not herself)

3. Date of Delivery : .....

a) Age : .....

b) 1st / 2nd Daughter : .....

1st / 2nd Confinment : .....

4. Name of the Hospital & Address : .....

5. Name of the authority issued the birth certificate : .....

6. Bank Account No. : .....

a) Name of the Bank with Branch : .....

b) IFSC Code : .....

7. Whether one year of registration completed : (Yes) (No)

Date :

Station :

**Documents submitted :**

- 1) Regn. card under BOCW Act (Attested copy)
- 2) Renewal Challan Copy
- 3) Delivery certificate issued by the Hospital (Attested copy)
- 4) Birth Certificate of the child
- 5) Advance stamped receipt
- 6) 1st page of Bank Pass Book (Attested copy)

**Signature / Thumb impression  
of the Applicant**