

(APPLICATION FOR COMPENSATION CLAIM FOR DEATH/INJURY ETC. IN ACCIDENT TO TRAIN OR UNTOWARD INCIDENT)

To,
The Registrar,
Railway Claims Tribunal,

I _____ Son/daughter/wife/widow of _____ (residing at) _____ having been injured in accident to a train or untoward incident hereby apply for the grant of compensation for the injury sustained.

I) _____ Son/daughter/wife/widow of _____ (residing at) _____ hereby apply as a dependent for the grant of compensation on account of the death/injury sustained by Shri/Kumar/Srimati _____ Son/daughter/wife/widow of Shri/Srimati) _____ who died/was injured in accident to train or untoward incident referred to hereunder :-

Necessary particulars in respect of the deceased/injured in the accident or untoward incident are given below :-

1. Name and father's name of the Person injured/death :
(Husband's name in the case of married women or widow)
2. Full address of the person injured/dad :
3. Age of the person injured/dead:
4. Occupation of the person injured/dead:
5. Name and address of the employer of the deceased, if any :
6. (a) Brief particulars of the accident indicating the date and place of accident and the name of the train involved:
(b) Brief particulars of the untoward incident indicating the Date and place of the untoward incident :
7. Class of travel and ticket/pass/Platform Ticket number, to the extent known :
8. Name of injuries sustained along with Medical certificate :
9. Name and address of the Medical officer/Practitioner, if any who attend on the injured/ Dad and period of treatment :
10. Disability for work, if any, caused :
11. Details of the loss of any luggage of account of the accident to the train :
12. Has any claim been lodged with any other authority if so, particulars thereof :
13. Name and permanent address of the Applicant :
14. Local address of the applicant if any :
15. Relationship with the deceased/injured :
16. Amount of compensation claimed :
17. Where the application is not made within one year of the occurrence of the Accident/to the Train or untoward incident the grounds thereof :
18. Any other information or documentary evidence that may be necessary of help in the disposal of the claim :
19. Mention the documents, if any, Filed along with application :

I _____ solemnly declare that _____ (a) The particulars given above are true and correct to the best of my knowledge and (b) I have not claimed or obtained any compensation in relation to the injury/death/loss of luggage which is the subject matter of this application.

Date _____
Place _____

Signature or thumb impression of the applicant

Name of witness and his address in case thumb impression is put by applicant.

I _____ (Name of the applicant) Son/daughter/wife of _____ Age _____ resident of _____ Do hereby verify that the contents of paragraphs _____ to _____ are believed to be true to the best of my knowledge or the legal advice given to me and that I have not suppressed any material fact.

Date : _____
Place _____

Signature or thumb impression of the applicant
Full address :

NAME OF THE WITNESS AND HIS ADDRESS IN CASE LEFT THUMB IMPRESSION IS PUT BY APPLICANT

VERIFICATION

I, _____ (Name of the applicant) S/o, D/o, W/o _____ Age _____ resident of _____ do hereby verify that the contents of paragraphs to _____ are true to my personal knowledge and paragraph _____ to _____ are believed to be true to the best of my knowledge or the legal advice given to me, and that I have not suppressed any material fact.

Date : _____

Signature of the applicant

Place : _____

Full address

To,
The Registrar,
Railway Claims Tribunal,

FORM - II

Application under Sec. 16 of the Act in respect of claim for compensation arising out of accident to a train.

PART ----1

PART----II

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1.

2.

For use in Tribunal's office

Signature of the applicant

Date of filing or date of receipt by

Registration No. :

Signature for Registrar.