

**ODISHA MOTOR TRANSPORT DRIVER & WORKERS' WELFARE BOARD
(BOARD CONSTITUTED UNDER ODISHA MOTOR TRANSPORT DRIVER
& WORKERS' WELFARE SCHEME 2023)**

Letter No. LX-135/2023/ 14828 /TC


Date-29.09.2023

Public Notice

As per Resolution made in the Board Meeting it was decided the motor transport workers who died after 12.06.23 are to avail the benefit the scheme. The legal heirs of those deceased will be eligible for the benefit under the scheme. Since the software for member registration is under progress, it was decided in the 1st board meeting to receive the claim application manually.

In view of above decision of the board the manual claim form is attached herewith. The desirous member are requested to apply for claim in this prescribed form by enclosing the required document so as to process their claim. The completed application is required to be submitted at the Office of the Transport Commissioner, 6th floor, Rajaswa Bhawan, Cuttack.

By Order of
Transport Commissioner

 29/9

Joint Commissioner Transport (Tech)

Copy to PMU to host in the web portal.

**Application for Availing Benefit from Odisha Motor
Transport Driver & Workers' Welfare Scheme 2023
(Refer clause No. 5 dated 16.09.2023 of board reservation)**

DETAIL OF THE DECEASED PERSON.

1. Name:
2. Age:
3. Date of birth:
4. Aadhar No:
5. Nature of Transport:
 - ☐ Driver
 - ☐ Conductor
 - ☐ Helper

IN CASE OF DRIVER FURNISHED THE FOLLOWING DETAIL.

1. DL No:
2. DL Validity (DD/MM/YYYY):
3. *Enclose a certified copy of DL*
4. Class of Vehicle authorized to drive:
5. Name of the employer:
6. *Enclosed the employer certificate as per annexure 1*

IN CASE OF CONDUCTOR

1. CL No:
2. CL Validity (DD/MM/YYYY):
3. *Enclose a certified copy of CL*
4. Name of the employer:
5. *Enclosed the employer certificate as per annexure 1*

IN CASE OF HELPER

1. Name of the employer:
2. *Enclosed the employer certificate as per annexure 1*

**IF DEATH IS DUE TO ACCIDENT THE PLEASE FURNISH THE FOLLOWING
DETAILS:**

1. Date of Accident:
2. Time of Accident:
3. Place of Accident:
4. PS case No:
5. *Death certificate to be enclosed*
6. *Postmortem Report*

IF DEATH IS DUE TO ANY OTHER REASON:

1. Date of death:
2. Time of death:
3. Place of death:
4. *Death certificate to be enclosed*
5. *Postmortem Report*

DETAIL OF LEGAL HEIR

1. Name:
2. Age:
3. Gender:
4. Aadhar No:
5. Mobile No:
6. Relationship deceased Person:
7. *Please enclosed self-attested copy of legal heir certificate*

UNDERTAKING

I Sri/Smt/Ku _____, age _____, S/D/W of
Sri/Smt/Ku _____ Resident of PO _____
PS _____ Dist. _____, State _____ Pin code _____
do here by declare that I'm the legal heir of deceased late Sri./Smt/Ku
_____, a motor transport worker. The information furnished above are
true to best of my knowledge in case any information found false or not correct then I
shall be held personally liable.

This application is furnished for availing benefits from Odisha Transport
Workers Welfare Scheme as per the board resolution number _____
dated _____ of _____ Board.

Signature

ANNEXURE 1

CERTIFICATE BY THE EMPLOYER

I Sri/Smt/Ku _____, S/D/W _____ of
Sri/Smt/Ku _____ Resident of _____
PO _____ PS _____ Dist. _____,
State _____ Pin code _____ is the owner of vehicle
no _____ type _____.

Sri/Smt/Ku _____, age _____, S/D/W _____ of
Sri/Smt/Ku. _____ resident of _____
PO _____ PS _____ Dist. _____,
State _____ Pin code _____ was working as driver/helper/
conductor in my vehicle as a paid employee for the period
from _____ to _____.

Signature

CHECK SLIP

Sr. No	Documents	Check Box
1.	Copy Of DL (In case of Drivers)	<input type="checkbox"/>
2.	Copy of CL (In case of conductor)	<input type="checkbox"/>
3.	Employer Certificate in Annexure – 1	<input type="checkbox"/>
4.	FIR Copy	<input type="checkbox"/>
5.	Copy of Death Certificate	<input type="checkbox"/>
6.	Copy of <i>Postmortem Report</i>	<input type="checkbox"/>
7.	Copy of Legal Heir Certificate	<input type="checkbox"/>
8.	Identity Proof of Legal Heir (Like Aadhar)	<input type="checkbox"/>
<i>All Copies must be self-attested by the applicant.</i>		