

# Soldier Housing Welfare Organization

## MEMBERSHIP FORM FOR FEATURED PROJECTS Affordable

Housing for Officers & Employees of all Central & State Govt.

Ministries & Departments, Retired Officers & Employees & Civil Category

Name: - \_\_\_\_\_ Last Name:- \_\_\_\_\_

Correspondence Address:- \_\_\_\_\_

Permanent Address: - \_\_\_\_\_

Fathers Name: - \_\_\_\_\_ Phone No: - \_\_\_\_\_

Email ID: - \_\_\_\_\_ Mobile No: - \_\_\_\_\_

Desg. / Rank /Dept. / General Public \_\_\_\_\_

Res. Status  Indian  NRI  Others

Future Proposed Project:-

Delhi  Rajasthan  Haryana  Punjab

UP  South India  Uttaranchal

Interested in: - \_\_\_\_\_

References:-

1) Name: - \_\_\_\_\_ Mobile No: - \_\_\_\_\_

Email ID: - \_\_\_\_\_

2) Name: - \_\_\_\_\_ Mobile No: - \_\_\_\_\_

Email ID: - \_\_\_\_\_

Membership Fees: -  Rs. 11,000/-

**PAYMENT DETAILS**

I hereby remit the Membership Registration Amount as under:-

Cheque No. / DD No. \_\_\_\_\_ Dated \_\_\_\_\_ Issued by  
(Bankers) \_\_\_\_\_ Branch \_\_\_\_\_

For Rupees (In words) \_\_\_\_\_

In favor of "Soldier Housing Welfare Organization" payable at New Delhi.

Forwarded to: 1/218/9-A, C.V.D LANE, SADAR BAZAAR, DELHI CANTT,  
NEW DELHI - 110010

**Terms & Conditions:-**

I will abide by the general rules and conditions of SHWO. All Information given by me is correct and if found Incorrect, I shall be responsible for disqualification of my provisional registration / allotment of dwelling unit. All agreement between SHWO / its representative and parties concerned or with local land and housing development authorities in connection with the land purchased from such agencies or as the case may be, shall be binding on me, since they will be affecting the interest of other members of the housing project as well.

I undertake to abide by the Rules & Regulations that may be announced by the Governing Body / Executive Committee of SHWO from time to time related to ongoing future proposed projects.

I authorize SHWO to accept or apply or deal for provisional registration / allocation / allotment / booking / cancellation of a plot / dwelling unit in their proposed future projects as per the details given above, on my behalf.

I confirmed that I have carefully verified all the details above and accurately represented them on this form.

Name: - \_\_\_\_\_ Position: - \_\_\_\_\_

Signature: - \_\_\_\_\_ Date: - \_\_\_\_\_

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**FOR USE BY ACCOUNTS SECTION, SHWO ONLY**

Provisional Membership Registration Number \_\_\_\_\_

Receipt Number \_\_\_\_\_ amount correctly received as per

Scheme / location Date \_\_\_\_\_

(Authorized Signatory)

(SHWO)