CHANDIGARH ADMINISTRATION FORM OF APPLICATON FOR COMPENSATION FROM SOLATIUM FUND

I, Son of/daughte	er of
window of Shri	
Residing at	
Having been grievously injured in motor vehicle accident hereby apply for gracompensation for the grievous injuries sustained. Necessary particulars in respective injury sustained by me are given below:-	
I, Son of/daught	er of
Window of Shri	
Residing at	
hereby apply as legal representative/agent for the grant of compensation on accoudeath/injuries sustained by	nt of
Shri/Shrimati/Kumari	
Son of /Widow of /daughter of Shri	
who had died/had sustained injuries in motor vehicle accident on	
at Particulars in respect of accident and other information	tion
are given below:-	
1. Name Father's Name	
Person injured (husband's Name in Case of Married women or widow)	
2. Address of the person injured/dead	
3. Age Date of Birth	
4. Sex of the person injured/dead	

5. Place	date	
and time of the accident.		
6. Occupation of the person injured/dead		
7. Nature of injuries sustained		
8. Name		
Address of the police state in whose Jurisdiction accident took place		
or was registered.		
9. Name		
Address of the Medical Officer/Practitioner Who attended on the injured/dead		
10. Name		
Address of the claimant /claimants		
11. Relationship with the deceased		
12 Any other information that May be considered necessary		
Helpful in the disposal of the claim		
I hereby swear and affirm that all the facts noted my knowledge and belief	above are true	e to the best of
SIGN	IATURE OF THE	CLAIMANT

REGISTER OF DOCUMENTS REQUIRED FOR SOLATIUM SCHEME/ MACT CASES (TO BE MAINTAINED BY INCHARGE VICTIM ASSISTANCE CELL, SSP/UT OFFICE)

List of Columns of the Register

1. S.No. 2 FIR No 3.Police Station
4. Name
Address of deceased/injured
5. Name
Address of next of kin(where applicable)
6. Documents Received from Police Station
7. Diary of receipt of documents from Police Station.
8. Diary No. Date of dispatch of documents to victim.
9. Remarks (Confirmation of receipt of documents, Additional assistance required by victim etc.)