

**Annexure I-Welfare Grant Application Form I**



འབྲུག་རྒྱུག་མེ་ལས་འཛིན།  
**Bhutan Power Corporation Limited**  
Registered Office: Thimphu

**STAFF WELFARE APPLICATION FORM-I**

*(To be applied by the employees for the death of their family members)*

Chief Executive Officer,  
Bhutan Power Corporation Limited,  
Thimphu.

Date:

**Subject:       Application for Staff Welfare Claim**

Dear Sir,

I hereby certify that Mr/Ms.....  
Father/Mother/Spouse/Son/Daughter/Father-In-Law/Mother-In-Law of the undersigned  
has expired on ..... at .....

I would like to request BPC to kindly sanction the welfare claim as per the provision in BPC  
Staff Welfare Scheme. The Death certificate/Letter from the Gup is attached herewith as  
evidence for verification and kind consent.

I declare that the claim is true and in the event of a false claim, I am willing to bear a penalty  
as deemed fit to be imposed by the Competent Authority. Thanking you,

Yours faithfully,

*(Affix Legal Stamp here)*

(Signature)

Name and Employee ID No:

Designation:

Grade:

Office:

The concerned reporting supervisor of the employee should certify the authenticity of the  
claim.

**Supervisor's Note - In case if the claim is false, the undersigned can be held fully  
responsible.**

**(Seal and Signature of the Supervisor)**

**Annexure II-Welfare Grant Application Form II**



འབྲུག་སྐྱེག་མེ་ལས་འཛིན།  
**Bhutan Power Corporation Limited**  
Registered Office: Thimphu

**STAFF WELFARE APPLICATION FORM-II**

*(To be filled up by the family members of the employees for the death of BPC employees)*

Chief Executive Officer,  
Bhutan Power Corporation Limited,  
Thimphu.

Date:

**Subject:       Application for Staff Welfare Claim**

Dear Sir,

I Mr/Ms.....bearing CID No.....  
hereby certify that I am..... (Relation) of late Mr/Ms  
.....who served as .....  
(Designation of the deceased) during his/her service with BPC.

I would like to request BPC to kindly sanction the welfare claim as per the provision in BPC Staff Welfare Scheme. The Death certificate/Letter from the Gup is attached herewith as evidence for verification and kind consent.

I declare that the claim is true and in the event of a false claim, I am willing to bear a penalty as deemed fit to be imposed by BPC.

Thanking you,

Yours faithfully,

*(Affix Legal Stamp here)*

(Signature)

Name:

Address:

Contact #: