

**SOUTHERN RAILWAY
APPLICATION FOR WIDOW COMPLIMENTARY PASSES**

Page Index No:

ID Card No:

Dt.

Valid up to :

1.	Name of the Widow (In block letters)	
2	Name of the Deceased Employee	
3	Designation & Station	
4	Department	
5	Date of Death	
6	Class of Pass	Pass applied for: Single/Return
(a)	From:	To:
(b)	Via	
(c)	With Break journey at:	
(d)	In favour of SELF	DB: Age:
(e)	Scholar Son	DB: Age:
(f)	Unmarried Daughter	DB: Age:
(g)	With one Attendant/Companion in second class	
7.	Date from which pass required	
8.	Residential Address:	
9	(i) I will take delivery of pass in person. (ii) Shri..... is authorized to take delivery of the pass on my behalf. (iii) I declare that the attendant is employed on a monthly Salary. (iv) please arrange to sent pass thro RPAD in the above mentioned address.	

(Strikeout whichever is not applicable)

Old Pass No.

Date

valid up to:

Date:

Signature of the Widow

Note: Old pass should be returned to this office for record.