

The Managing Director,  
National Cooperative Consumers'  
Federation Of India Ltd,  
NCUI Complex,  
3, Siri Institutional Area,  
August Kranti Marg,  
Hauz Khas,  
New Delhi – 110016

Dear Sir,

It is requested that (Name of the society with complete address) \_\_\_\_\_ may be admitted as a member of NCCF in accordance with the Bye-law No. \_\_\_\_\_ of NCCF. Further, this it is requested that society may be allotted \_\_\_\_\_ shares of the value of Rs. 2,000/- each. The following documents are attached herewith for the purpose of considering the enrolment of the society as member of NCCF :-

- a) An attested copy of the bye-laws of the Society.
  - b) An attested copy of the resolution passed by the Board/Executive Committee or any other competent committee authorising a person or the society to apply for membership of NCCF and to sign, verify and complete all necessary formalities in this regard.
  - c) Certificate of Registration of society issued by the Registrar of Cooperative Societies.
  - d) A copy of the Annual Report (containing audited accounts) of the year preceding the date of application for membership.
  - e) A demand draft/ cheque/RTGS and, if amount remitted through RTGS, details thereof, for Rs. \_\_\_\_\_ towards value of \_\_\_\_\_ shares of Rs.2000/- each and admission fee (non-refundable) of Rs.10,000/-
2. We certify that:
- (a) We have read the Bye-Laws of the NCCF and we undertake to abide by them.
  - (b) There is nothing in the Bye-Laws of the Society to prevent in seeking membership of NCCF.
3. Application form duly filled in is enclosed herewith.

Yours faithfully,

SIGNATURE \_\_\_\_\_  
NAME \_\_\_\_\_  
DESIGNATION \_\_\_\_\_  
SEAL OF SOCIETY \_\_\_\_\_

DATE: \_\_\_\_\_  
PLACE: \_\_\_\_\_

**NATIONAL COOPERATIVE CONSUMERS' FEDERATION**  
**OF INDIA LTD.**

**NCUI COMPLEX, 3, SIRI INSTITUTIONAL AREA, AUGUST**  
**KRANTI MARG, HAUZ KHAS, NEW DELHI – 110016.**

**APPLICATION FORM FOR MEMBERSHIP OF NCCF**

1. Name & Postal address of the Society. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Area of operation \_\_\_\_\_
3. No. & Date of Registration of the Society \_\_\_\_\_
4. Authorised Share Capital of the Society \_\_\_\_\_
5. Paid up Share Capital of the Society as on \_\_\_\_\_ Rs. \_\_\_\_\_
6. i) Sales Turnover (as per audited balance sheet) of the Society in the year  
preceding the date of application for Membership Rs. \_\_\_\_\_
- ii) Business done with NCCF during the  
above mentioned period. \_\_\_\_\_

**SIGNATURE WITH STAMP**