Form - Trust formation (to be multiplied depending on trust deed)

:: Contact Person Details ::

Name *	
Address *	
Email *	
Phone No *	

TRUST DETAILS

NAME OF TRUST *	
OBJECTIVE OF THE TRUST *	
Maximum 500 Character	

ADDRESS OF REGISTERED OFFICE OF TRUST

STATE *	
DISTRICT *	
SUB-DIVISION *	
AREA TYPE *	⊖ Rural ⊖ Urban
BLOCK / MUNICIPALITY / CORPORATION *	 BLOCK MUNICIPALITY CORPORATION
BLOCK / MUNICIPALITY / CORPORATION NAME *	
VILLAGE / WARD *	O VILLAGE O WARD
VILLAGE / WARD NAME *	

POLICE STATION *	
POST OFFICE *	
PLOT NO / KHATYAN NO / MOUZA NAME *	
PIN NO *	

TRUSTEES MEMBERS DETAILS

NAME OF SETTLORS 1 *	
DATE OF BIRTH * (DD/MM/YYYY)	
GENDER *	 Male Female Trans Gender
MOBILE NO *	
E-MAIL ID	
AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF SETTLORS 2	
DATE OF BIRTH (DD/MM/YYYY)	
GENDER	 Male Female Trans Gender
MOBILE NO	
E-MAIL ID	
AADHAAR NO	

ADDRESS House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF PRESIDENT *	
DATE OF BIRTH * (DD/MM/YYYY)	
GENDER *	 Male Female Trans Gender
MOBILE NO *	
E-MAIL ID	
AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF VICE-PRESIDENT *	
DATE OF BIRTH * (DD/MM/YYYY)	
GENDER *	 Male Female Trans Gender
MOBILE NO *	
E-MAIL ID	
AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF SECRETARY *	
DATE OF BIRTH * (DD/MM/YYYY)	

	○ Male
GENDER *	○ Female
	○ Trans Gender
MOBILE NO *	
E-MAIL ID	
AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF ASST. SECRETARY *	
DATE OF BIRTH * (DD/MM/YYYY)	
GENDER *	 Male Female Trans Gender
MOBILE NO *	
E-MAIL ID	
AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF TREASURER *	
DATE OF BIRTH * (DD/MM/YYYY)	
GENDER *	 Male Female Trans Gender
MOBILE NO *	
E-MAIL ID	

AADHAAR NO	
ADDRESS * House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	
NAME OF MEMBER	
DATE OF BIRTH (DD/MM/YYYY)	
GENDER	 Male Female Trans Gender
MOBILE NO	
E-MAIL ID	
AADHAAR NO	
ADDRESS House or Plot No,Vill/Ward,PO,PS,Block/Municipality /Corporation name,Sub Division , Dist,State, Pin,	

SUPPORTED DOCUMENTS

(only JPEG or PDF files are supported / each file should be less then 2MB)

PHOTO IDENTITY PROOF FOR ALL GOVERNING BODY MEMBERS * Any One (Aadhaar Card/Votar Id Card/Driving Licence/Pan Card)	Browse No file selected.
OWNERSHIP PROOF FOR PRIVATE CASES	Browse No file selected.
NOC (IN THE FORM OF AFFIDAVIT, IN CASE OF INDIVIDUAL OWNER) FROM THE PREMISES OWNER OR FROM APPROPRIATE AUTHORITY	Browse No file selected.
PHOTOGRAPH OF ALL GOVERNING BODY MEMBERS *	Browse No file selected.

SPONSORED INFORMATION AND FINAL SUBMISSION

SPONSORED NAME *	○ Yes ○ No
IF Yes, GIVE THE SPONSORED USERNAME	