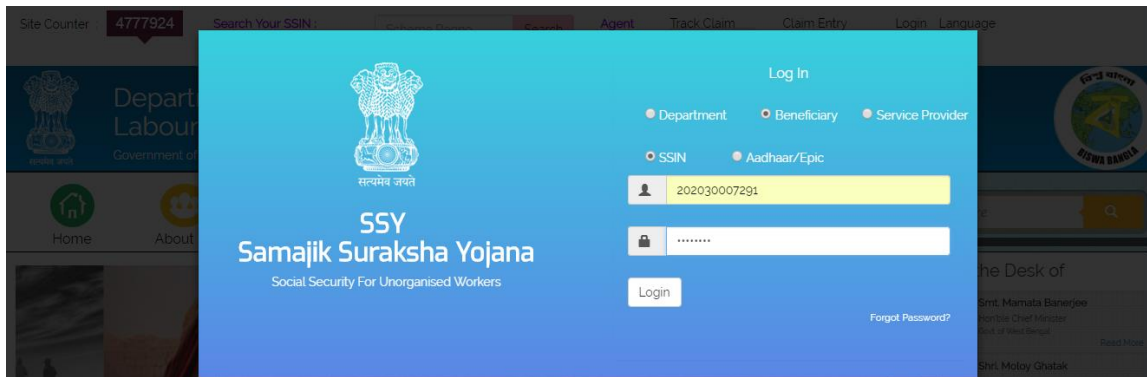
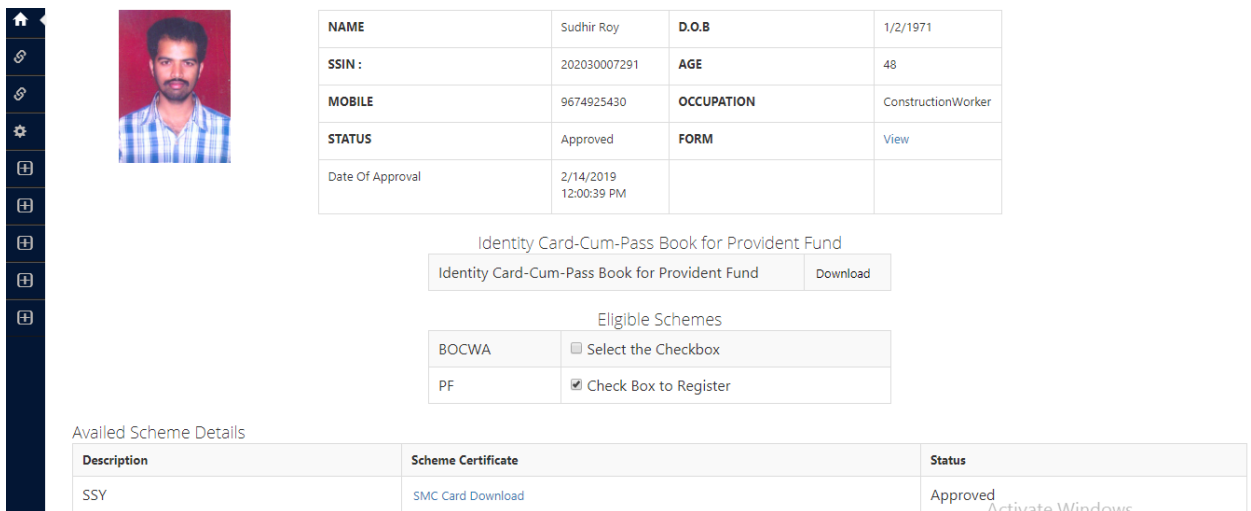


Beneficiary's Claim Entry

1. Open SSY application, and then login as “Beneficiary” with SSIN as shown in below screen.



2. Then display “Beneficiary Dashboard” page as shown in the below screen.



NAME	Sudhir Roy	D.O.B	1/2/1971
SSIN :	202030007291	AGE	48
MOBILE	9674925430	OCCUPATION	ConstructionWorker
STATUS	Approved	FORM	View
Date Of Approval	2/14/2019 12:00:39 PM		

Identity Card-Cum-Pass Book for Provident Fund

Identity Card-Cum-Pass Book for Provident Fund [Download](#)

Eligible Schemes

BOCWA	<input type="checkbox"/> Select the Checkbox
PF	<input checked="" type="checkbox"/> Check Box to Register

Availed Scheme Details


Description	Scheme Certificate	Status
SSY	SMC Card Download	Approved

3. Now select “Claim Entry” option form left side menu as shown in below screen.

Dashboard

Scheme Information
Procedures
FAQ's
Master Edit
Report
Claim
Claim Entry
Claim Status
Draft Claims
Refer Claim
Legacy Claims

SSIN NO: 202030007291 , Worker Type: ConstructionWorker



NAME	Sudhir Roy	D.O.B	1/2/1971
SSIN :	202030007291	AGE	48
MOBILE	9674925430	OCCUPATION	ConstructionWorker
STATUS	Approved	FORM	View
Date Of Approval	2/14/2019 12:00:39 PM		

Identity Card-Cum-Pass Book for Provident Fund

Identity Card-Cum-Pass Book for Provident Fund
Download

Eligible Schemes

BOCWA	<input type="checkbox"/> Select the Checkbox
PF	<input checked="" type="checkbox"/> Check Box to Register

- Then display Claim Entry page, here beneficiary should select any one of the benefit whatever he/she wants as shown in below screen.

Claim Entry

Beneficiary Details

Beneficiary Name: Sudhir Roy

SSIN: 202030007291

Bank Name: ALLAHABAD BANK

Account No: 4324234234324234

IFSC Code: AL320123123

Branch: ALIPURDUAR

☐ PF(Provident Fund)
☐ Health & Family
☒ Disability
☐ Education

Disability

Date of release from hospital/Accident *

01/02/2019

Nature of Disability *

Loss of Both eye

Details of Disability
Loss vision of both the eyes

Activate Windows
Go to PC settings to activate Windows.

- Once complete the claim entry and then click on “Generate Pdf” button, and then click on “Download formV” button as shown in below screen.

Eligible Amount: 200000

Upload Documents

Certificate of disability from
certificate.jpg

☒ I Certify that the Death or permanent disability not caused by intentional self injury, suicide or attempted suicide, insanity or immorality or under influence of intoxicating liquor, drug or narcotic *

☒ I Certify that Death or permanent disability not caused by injuries resulting from riots, civil commotions, or racing of any kind *

☒ I Certify that I am not in receipt of any financial assistance of similar nature from the government *

Upload Documents

Form - V duly filled and signed *

Form-V Pdf

Form-V generated, Please print or download.

6. Once download the formV, then upload it and click on “Submit” button, then display success message as shown in below screen.

Eligible Amount: 200000

Upload Documents

Certificate of disability from
certificate.jpg

☒ I Certify that the Death or permanent disability not caused by intentional self injury, suicide or attempted suicide, insanity or immorality or under influence of intoxicating liquor, drug or narcotic *

☒ I Certify that Death or permanent disability not caused by injuries resulting from riots, civil commotions, or racing of any kind *

☒ I Certify that I am not in receipt of any financial assistance of similar nature from the government *

Upload Documents

Form - V duly filled and signed *

FormV (22).pdf

Success Message

Your claim was successfully submitted, your claim ticket id: 201800000029 (Disability) .You are requested to submit the relevant documents and original application form to the concerned inspector for further process

!! Thank You !!