

## **Enrolment Form** NATIONAL CRIME INVESTIGATION BUREAU

(An ISO 9001: 2015 Certified Non Governmental Organization)

Ref By :				Rules & Regulations of NCIB
Xerox Copy of Form Acceptab	le		1.	The Members and Officers of NCIB are
Website: www.ncib.in		Photo		working on voluntary basis and no
Email: info@ncib.in		Self Attested		payment is given to them. Enrolment is non-transferable and once the Donation
Helpline - +919792580000		Cross Signature		payment is made, it is non-refundable.
To,		Required on Photo	2.	Any kind of misbehavior or misconduct
The HR Officer,				mat result in rejection of Enrolments of NCIB. All disputers subject to
National Crime Investig	ation Bureau			jurisdiction of Gonda.
Opp: Civil Court, Lucknow Roa	d, Post – HPO, Gonda (U.	P) India – 271001	3.	NCIB will not be responsible for any
Please enroll me in	Unit Team.			misuse of identity Card issued to the
My Particular are as below: US	SE CAPITAL LETTER	S		Membership during the course of their Membership with NCIB
Name :			4.	On expiry, the Identity Cards must be
Father's Name:				Submit to the HR Office. After
Date of Birth:				expiry, renewal is a must under 30 days for regular membership.
Profession:			5.	In case of change of Address / Mobile
Education:				number, Member should inform the
Mailing Address:			6	same to the HR Office by Post / Email. In case of loss the identity Card, inform
				the HR Office in writing along with the
Post :	District :			F.I.R. and ADHAR card immediately.
State				All NCIB members should contact their
Nearest Police Station:				respective Area Units / State Units / National unit office once in a month.
Mobile :				Applicant can use photocopy of the
E-mail (Capital Letters)				application form which will be duly
Cheque / Draft / NFT No :				acknowledged by the HR Office once revived duly filled in.
Bank and Branch:				Strict action will be taken against the
Dank and Branen			·······	Member, if found guilty floating the
Date :			10	rules and regulation of NCIB.  If you have any doubt, question or
Place:	Sin	nature		problem, contact NCIB Headquarters.
riace	Sig	nature	-	
<b>Important Inform</b>	ation :-			nimum Qualification:-
Please Do not pay any Membe	AND AND ADDRESS OF THE PARTY OF	Members / Officers		eral Member : High School
cash / cheque or Bank deposit			-574E5W1070	rict Unit Officer: Intermediate
सदस्यता शुल्क सिर्फ नीचे दिये ग	ाये NCIB के बैंक खाते मे	िही जुमा करे। सदुर	स्यता 📗	
शुल्क / डोनेशन सम्बन्धित चेक	अथवा बेंक ड्राफ़्ट सिर्फ ा	NCIB के नाम से ही	दे। Ber	refits For Enrolment:-
किसी भी सदस्य को नगद / चेक	अथवा उसक व्यक्तिंग ब	क खात में धनराशि	जमा   U1.	Unique ID Card 02. Appointment Letter 03. rict Officers Post 04. Joining Information
ना करे। WE WILL NOT RESPONSIBALE I	FOR ANY TRANSACTION T	TO OUR MEMBERS		1 Local Police to SP / CP Office 05. Vehicle
आपके द्वारा किसी सदस्य से पैरे	का लेनदेन करने पर 🖪	NCIB जवाबदेह नहीं		kers 06. Online Verification 07. Legal Help
Online Payment Tran		1,3 100 2,480 18	All C	Officers Required Submit your Activity Reports
	ttps://imjo.in/tMQ4q	4	Qua	rterly. More Information Call: +91-9792580000
1B. District Unit Officer: h				
	apsarinjonia od w cpt	•		
Bank Details:-			.,	
NATIONAL CRIME INV				
Account No:- 24810055				
Bank Name: - Punjab Na				e and Signature of Attesting Authority
PLEASE DON'T GIVE CAS	SH TO ANY MEMBER	S / OFFICERS.		re seal / Branch Code and Unique Id number NCIB Branch Office / Members use only )
Category	<b>Donation Amount</b>	P.A Renewal	(1.0	For Office Use:-
1A General Member	Rs. 7500/-	Rs. 1000/-	Unique Id	:
1B District Unit Officer	Rs. 15000/-	Rs. 1000/-		•
1C State Unit Officer	CLOSED	CLOSED		ea:
1D National Unit Officer	CLOSED	CLOSED		on Letter No:
TO MACIONAL CHILCH	CLOSED	CLOSED	Appointm	ent Letter No:

# NCIB

## Donation Form

## NATIONAL CRIME INVESTIGATION BUREAU

Opp:- Civil Court, Main Lucknow Road, Gonda (U.P) India – 271001 Helpline: +919792580000 / +918795111000 / +919532555111

Email: info@ncib.in Website: www.ncib.in

# Donor Information

Name of Donor:

Father's Name :	***************************************
Date of Birth :	***************************************
Profession:	
Mailing Address :	
***************************************	
Nearest Police Station:	
Tel.: Whatsapp:	Mobile:
E-mail Id:	
Date :	
Place :	SIGNATURE OF DONOR
-1	
धायण	<u> </u>
मैं अपने पूरे होशो हवास में निम्	नांकित घोषणा करता ह कि:-
1. मैं उपरोक्त धनराशि स्वेक्षा से नेशनम क्वाइम इन्वेस्टीवेशन व्यूरो को सदस्यता हेतु	
कोई दाया नहीं करूमा / करूँमी।2,मेरे द्वारा दी गयी धनराशि जनसीआईबी मुख्यानय	
<ul><li>13. मैं उपरोक्त धनराशि अनुदान के रूप में संस्था के विकास हेतु स्थेक्षा से दे रहा ह</li></ul>	
प्रलोमन नहीं दिया गया है 14 मेरे द्वारा दी गयी अनुदान राशि वैंक चेक / द्वापट /	
धनराशि संस्था को अनुदान के रूप में नही दी गयी है। 6. मेरे द्वारा दी गयी अनुदान	
जाएगी। 7.संस्था मुख्यालय द्वारा प्रति वर्ष प्राप्त अनुदान राशि एव संस्था विकास कार सरकार के आयक्त विमाग को देना आयश्यक है एव मेरे द्वारा मांगे जाने पर आयक्त	
गया है। 8. मेरे द्वारा किसी प्रकार की कोई आपराधिक / संस्था नियमावली के विरुद्ध	
के पास सुरक्षित हैं। 9. संस्था मुख्यालय के पास मेरे द्वारा किये गए कार्यों को देखत	
उपरोक्त किसी भी हिंचल में भेरे द्वारा दी गयी अनुदान राशि की वापसी हेलु कोई दावा	
2.min:	
₹ <b>श</b> 7	घोषणाकर्ता के हस्ताक्षर
S. A. S. A.	
Donation Details :-	For Office Use Only :-
	We Received Rs/- In favor of Donation From Mr/-
Rs. (In Words)	in lavor of Donation From Mr
Type of Donation (Marking Must)	By Cheque / Draft / RTGS / eBanking / Bank Transfer
Cheque / Draft / RTGS / Bank Transfer / Net Banking	Cheque / Draft No :
(Note: Kindly note down we can't accept any type of Donation by Cash)	Donation Receipt No :
	Received By:
Bank Details :-	Recivers Designation:
NATIONAL CRIME INVESTIGATION BUREAU	Receivers Unique Id :
Account No :- 2481005500000290 IFSC :- PUNB0248100	Office Code :
Bank Name: - Punjab National Bank Branch: - Haripur DON'T GIVE CASH PAYMENTS TO ANY NCIB OFFICERS	Receivers Signature with Stamp
DOMESTIC OF THE PROPERTY OF THE PERSON OF TH	

# Affidavit format

( For District Member / District Officer / State Officer Membership) Affidavit on Stamp paper of Rs. 100/- attested by Notary Officer / Magistrate. Paste your Photo Photo attested by Notary Officer

To,	95
	Crime Investigation Bureau. il Court, Main Lucknow Road, Gonda, UP, India - 271001
Dear Sir,	
R/O	
	g for the membership of National Crime Investigation Bureau do hereby firm / declare / certify as under:
1.	I will follow all the rules & regulations of NCIB as per the membership form.
2.	I do not have any criminal background & do not have any criminal FIR/Case
	lodged/pending against me.
3.	NCIB will not be responsible for any/such illegal/Wrong/immoral act for omission done by me.
4.	Whenever required I will present my Identity Card / Certificate.

- 5. I will never misuse my membership / Identity Card.
- I have read & understood the Terms & Conditions and undertake to comply with 6.
- 7. In case the above submitted information is found incorrect / false, I will be subject to the Law of the land and The Chairman reserves the right to cancel the membership without assigning any reason.
- 8. The Chairman of NCIB reserves the right to reject any membership form without assigning any reason.
- 9. The Chairman of NCIB may terminate / cancel / suspend the membership without any prior intimation / information / reason.

Deponent

## Verification

Verified that the above statement is true and	correct to the be	est of my know	ledge and belief &
nothing has been concealed therein.			

Date	
Place	Deponent

To, The HR Officer,

# National Crime Investigation Bureau

(NGO Registered Under Indian Trust Act 1882 Vide No : 327/IV/2012)

Opp: Civil Court, Main Lucknow Road, Post – HPO District – Gonda, Uttar Pradesh, India – 271001 Email: info@ncib.in, Website: www.ncib.in Paste Photo Here
Photo
Self Attested
Cross Signature
Required on Photo

# **Police Verification Authority Letter**

(Valid only for membership of National Crime Investigation Bureau - NGO)

District:			
District:	S/o, D/o, W/o:		
District: State: Pin Code:  Police Administration Details:- Police Station Name and Address:  SP / SSP / CP Office Address:  District: State: Pin Code:  Declaration:-  I am authorizing NCIB to conduct my Police Verification at my own discretion.  I am / have not been involved in any criminal activity and no any FIR registered in any police station against me. I know very well that the work of NCIB is voluntary bases and no any type salary. NCIB have not given any kind of greed for membership. I know NCIB is not a linvestigation agency, that the main work of NCIB is to transmit criminal information to the Police departments / Administrative department and to help the victim in every possible way.  Date:	Resident of:		
Police Administration Details:- Police Station Name and Address:  SP / SSP / CP Office Address:  District:  State:  Pin Code:  Pin Code:  Pin Code:  Pin Code:  Declaration:-  I am authorizing NCIB to conduct my Police Verification at my own discretion.  I am / have not been involved in any criminal activity and no any FIR registered in any police station against me. I know very well that the work of NCIB is voluntary bases and no any type salary. NCIB have not given any kind of greed for membership. I know NCIB is not all Investigation agency, that the main work of NCIB is to transmit criminal information to the Police departments / Administrative department and to help the victim in every possible way.  Date:  Applicant Signature			
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Investigation agency, that the main work of NCIB is to transmit criminal information to the Police departments / Administrative department and to help the victim in every possible way.  Date:	-		, , , ,
Police departments / Administrative department and to help the victim in every possible way.  Date:			
Date : Applicant Signature			
	Police departments / Adr	ninistrative department and t	o help the victim in every possible way.
	Date :		Applicant Signature
/WINCITY	Place :		Adhar No :

## **Documents Check List**

(All Documents must be self Attested)

#### General Member :-

- 1.Membership Form
- 2. Donation Form
- 3. Adhar Card Copy
- 4. PAN / DL / Voter Id Copy (Any one)
- 3. Residential Proof (If address is different from Voter Id / DL / Adhar Card)
- 4. Education Proof (Minimum High School for Rural Area and Intermediate for Urban / City area)
- 5. Passport Size Photo (4)
- 6. Affidavit attested by Notary Officer with Photo.
- 7. Police Verification Authority Letter
- 8. Local Police Station Name and Address

### District Unit Officer :-

- 1.Membership Form
- 2. Donation Form
- 3. Adhar Card Copy
- 4. PAN / DL / Voter Id Copy (Any one)
- 3. Residential Proof (If address is different from Voter Id / DL / Adhar Card)
- 4. Education Proof (Minimum High School for Rural Area and Intermediate for Urban / City area)
- Passport Size Photo (7)
- 6. Affidavit attested by Notary Officer with Photo.
- 7. Police Verification Authority Letter
- 8. Proper Office address details of your District officers Like:-

All Police stations Name / SSP Office / SP Office / CP Office / DM Office Address.

## State and National Unit Officer :-

- 1.Membership Form
- 2. Donation Form
- 3. Adhar Card Copy
- 4. PAN / DL / Voter Id Copy (Any one)
- 3. Residential Proof (If address is different from Voter Id / DL / Adhar Card)
- 4. Education Proof (Intermediate for Rural and Bachelor Degree for Urban / City area)
- 5. Passport Size Photo (10)
- Affidavit attested by Notary Officer with Photo.
- 7. Police Verification Authority Letter
- 8. Proper Office address details of your Distt / State officers Like:-

Local Police station / SSP / SP / DM / DIG / DGP / Governor / Home Minister / Chief Minister / CBI / CID / Anti-Corruption Bureau / Vigilance / RAW / Distt Court / High Court and all Print and Electronic Media's Office address for sending your Joining Information

#### For Car / Bike Stickers:-

- 1.Self attested RC copy of Vehicle
- 2. Latest Pollution Certificate copy
- 3. Valid Driving license copy of owner
- 4. Permission letter copy (in case of family members ownership)
- 5. Notary attested Sell Deed copy (In case of 2nd ownership RC not transferred)