별첨1 | **휴면보험금 지급신청서**

휴면보험금 지급신청서

(Application form to receive the dormant insurance)

접수번호 (Registration No.)		접 수 일 자 (Registration date)	
국적(Nationality)		여권번호(Passport No.)	
성명(Name of Person)		외국인등록번호 (Foreigner Registration No.)	
주소(Address)			
우편번호(Zip code)			
집전화(Home phones)		휴대전화(Cellular phone)	
e-mail			

상기 본인은 휴면보험금 관리위원회에 이전된 휴면보험금의 지급을 아래와 같이 신청합니다.(I submit this application form to receive the dormant insurance as below)

☐ **입금 신청 내역**(the account to receive the dormant insurance)

o **금융기관명**(Bank) :

o **계 좌 번 호** (Account Number) :

o **예 금 주 명** (The owner's name of the account) :

신청인(또는 대리인) : (인 또는 서명)

Applicants(Or attorney) : (Signature)

* 대리인은 직계가족만 해당됨(Attorney is only possible immediate family such as parents, grandparents, children of the owner.)

첨부서류(Attached documents)		**접 수 자**(Receivers)			
본인일 경우	대리인일 경우	EPS센터		공단 소속기관	
1. 원권리자의 여권 또는 신분증 사본 1부. 2. 원권리자의 통장사본 1부. 3. 출국예정신고서(고용부 발행) 또는 비행기 티켓 사본(국내체류중인 외국인 근로자가 귀국비용보험을 신청한 경우) 1부.	1. 대리인의 여권 또는 신분증 사본 1부. 2. 휴면보험금 지급 위임장 1부. 3. 공인가족관계증명서 1부. 4. 본인 또는 대리인의 통장사본 1부. 5. 출국예정신고서(고용부 발행) 또는 비행기 티켓 사본(국내체류중인 외국인근로자가 귀국비용보험을 신청한 경우) 1부.	센터명		기관명	
		센터장 성 명	(인 또는 서명)	담당자 성 명	(인 또는 서명)

แบบฟอร์ม 2

휴면보험금 지급신청서

วิธีการยื่นขอเงินประกันเกิน3ปี (กรอกเป็นภาษาอังกฤษ)

휴면보험금 지급신청서

(Application form to receive the dormant insurance)

접수번호 (Registration No.)		접 수 일 자 (Registration date)	วันที่ยื่นขอเงินประกัน
국적(Nationality)	ประเทศ	여권번호(Passport No.)	หมายเลขหนังสือเดินทาง
성명(Name of Person)	นามสกุล-ชื่อ	외국인등록번호 (Foreigner Registration No.)	หมายเลขบัตรประจำตัวต่างด้าว
주소(Address)	ที่อยู่ในประเทศไทย		
우편번호(Zip code)	รหัสไปรษณีย์		
집전화(Home phones)	โทรศัพท์บ้าน.....	휴대전화(Cellular phone)	โทรศัพท์มือถือ
e-mail			

상기 본인은 휴면보험금 관리위원회에 이전된 휴면보험금의 지급을 아래와 같이 신청합니다.(I submit this application form to receive the dormant insurance as below)

☐ 입금 신청 내역(รายละเอียดสมุดบัญชีธนาคาร eceive the dormant insurance)

- o 금융기관명(Bank) : ชื่อธนาคาร
- o 계 좌 번 호 (Account Number) : หมายเลขสมุดบัญชีธนาคาร
- o 예 금 주 명 (The owner's name of the account) : ชื่อบัญชีผู้รับเงิน

신청인(또는 대리인) : ลายเซนต์ (인 또는 서명)

Applicants(Or attorney) : (Signature)

* 대리인은 직계가족만 해당됨(Attorney is only possible immediate family such as parents, grandparents, children of the owner.)

첨부서류(Attached documents)		접 수 자(Receivers)			
본인일 경우	대리인일 경우	EPS센터		공단 소속기관	
1. 원권리자의 여권 또는 신분증 사본 1부. 2. 원권리자의 통장사본 1부. 3. 출국예정신고서(고용부 발행) 또는 비행기 티켓 사본(국내체류중인 외국인 근로자가 귀국비용보험을 신청한 경우) 1부.	1. 대리인의 여권 또는 신분증 사본 1부. 2. 휴면보험금 지급위임장 1부. 3. 공인가족관계증명서 1부. 4. 본인 또는 대리인의 통장사본 1부. 5. 출국예정신고서(고용부 발행) 또는 비행기 티켓 사본(국내체류중인 외국인근로자가 귀국비용보험을 신청한 경우) 1부.	센터명		기관명	
		센터장 성 명	(인 또는 서명)	담당자 성 명	(인 또는 서명)

별첨1 휴면보험금 지급신청서

휴면보험금 지급신청서

ตัวอย่างการกรอกแบบฟอร์มขอเงินประกันเกิน3ปี
(กรอกเป็นภาษาอังกฤษ)

(Application form to receive the dormant insurance)

접수번호 (Registration No.)		접 수 일 자 (Registration date)	2017. 05. 16
국적(Nationality)	THAILAND	여권번호(Passport No.)	AA 852146
성명(Name of Person)	SRIUTHAI ROERNGCHAI	외국인등록번호 (Foreigner Registration No.)	770928156324857
주소(Address)	91/12 SOI 17 T. KHONGNUENG AM. KHONGLUANG PATHUMTHANI		
우편번호(Zip code)	12120		
집전화(Home phones)	02-000-0111	휴대전화(Cellular phone)	082-000-0001
e-mail			

상기 본인은 휴면보험금 관리위원회에 이전된 휴면보험금의 지급을 아래와 같이 신청합니다.(I submit this application form to receive the dormant insurance as below)

☐ **입금 신청 내역**(the account to receive the dormant insurance)

- o **금융기관명**(Bank) : Bangkok Bank
- o **계 좌 번 호** (Account Number) : 178-0-02910-1
- o **예 금 주 명** (The owner's name of the account) : MR. ROERNGCHAI SRIUTHAI

신청인(또는 대리인) : ลายเซนต์ (인 또는 서명)
Applicants(Or attorney) : (Signature)

* 대리인은 직계가족만 해당됨(Attorney is only possible immediate family such as parents, grandparents, children of the owner.)

첨부서류(Attached documents)		**접 수 자**(Receivers)			
본인일 경우	대리인일 경우	EPS센터		공단 소속기관	
1. 원권리자의 여권 또는 신분증 사본 1부. 2. 원권리자의 통장사본 1부. 3. 출국예정신고서 (고용부 발행) 또는 비행기 티켓 사본 (국내체류중인 외국인 근로자가 귀국비용보험을 신청한 경우) 1부.	1. 대리인의 여권 또는 신분증 사본 1부. 2. 휴면보험금 지급 위임장 1부. 3. 공인가족관계증명서 1부. 4. 본인 또는 대리인의 통장사본 1부. 5. 출국예정신고서(고용부 발행) 또는 비행기 티켓 사본(국내체류중인 외국인근로자가 귀국비용보험을 신청한 경우) 1부.	센터명		기관명	
		센터장 성 명	(인 또는 서명)	담당자 성 명	(인 또는 서명)

ตัวอย่างหนังสือเดินทาง
ต้องเป็นฉบับเดียวกัน
กับหนังสือเดินทางเล่ม
ที่อยู่เกาหลี

หนังสือเดินทางฉบับนี้
มี ๓๒ หน้า
This passport contains
32 pages

ตรา
ค่าธรรมเนียม
FEES

ต่ออายุ
EXTENSION OF VALIDITY

ต่ออายุถึงวันที่
Extended to

ต่ออายุ ณ
Done at

วันที่
Date

CANCELLED

ลายมือชื่อและตราเจ้าพนักงานผู้ต่ออายุหนังสือเดินทาง
Signature and Seal of authorized issuing official

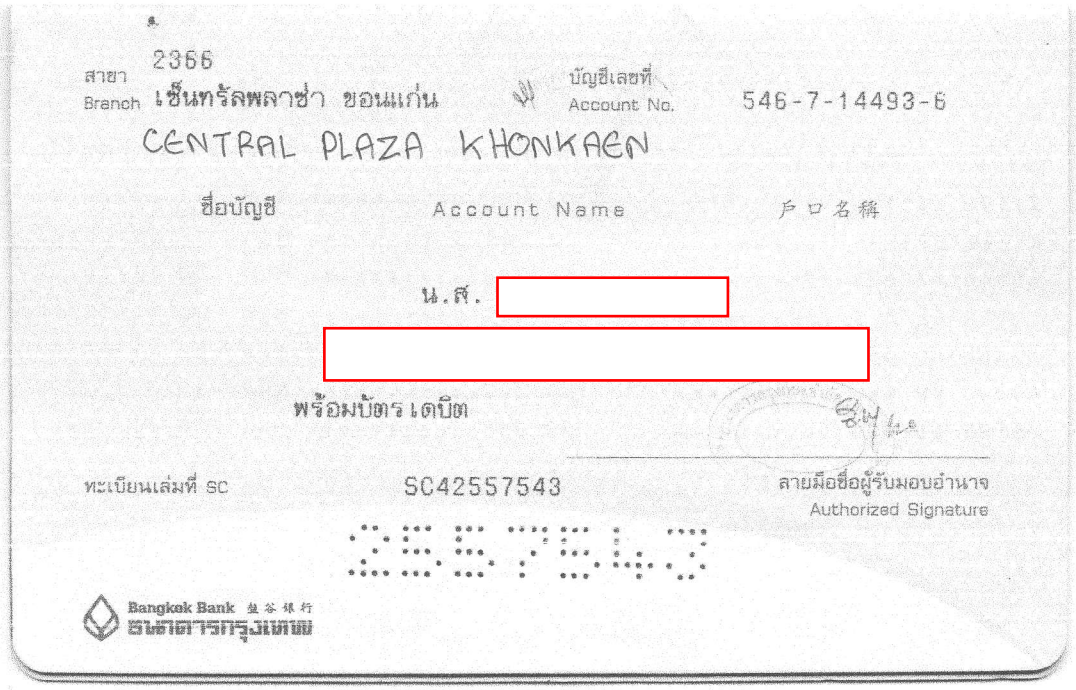
PASSPORT
หนังสือเดินทาง

Type / รหัส: P
Country Code / ประเทศ: THA
Passport No. / หนังสือเดินทางเลขที่:
Surname / ชื่อสกุล:
Name / ชื่อ:
Name in Thai / ชื่อภาษาไทย:
Nationality / สัญชาติ: THAI
Date of birth / วันเกิด:
Personal No. / เลขประจำตัวประชาชน:
Sex / เพศ: F
Height / ส่วนสูง: 1.54
Place of birth / สถานที่เกิด: KHON KAEN
Date of issue / วันที่ออก: 8 JUL 2004
Date of expiry / วันที่หมดอายุ: 7 JUL 2009
Authority / ออกให้โดย: PASSPORT DIVISION BANGKOK
Signature of bearer / ลายมือชื่อผู้ถือหนังสือเดินทาง

สำเนาถูกต้อง

เซนต์ชื่อรับรองสำเนาถูกต้อง

ตัวอย่างสำเนาสมุดบัญชีธนาคาร



สาขา Branch 2366 เซ็นทรัลพลาซ่า ขอนแก่น CENTRAL PLAZA KHONKAEN

บัญชีเลขที่ Account No. 546-7-14493-6

ชื่อบัญชี Account Name 戶口名稱

น.ส. [redacted]

พร้อมบัตรเดบิต

ทะเบียนเล่มที่ sc SC42557543

ลายมือชื่อผู้รับมอบอำนาจ
Authorized Signature

Bangkok Bank 盤谷銀行
ธนาคารกรุงเทพ

สำเนาถูกต้อง

ครัญญา ขอดสุวรรณ