# Minutes of the 91<sup>st</sup> meeting of the Committee of Management of the Seafarers' Welfare Fund Society held on 25.05.2020

The 91<sup>st</sup> virtual meeting of the Committee of Management (the COM) of the SWFS was held on 23.05.2020 for discussion and finalisation of new welfare scheme for seafarers and their families due to outbreak of coronavirus. The COM has finalised the new welfare scheme called "SWFS – Novel Coronavirus (COVID-19) Assistance Scheme" for seafarers and their Families. (Encl.1)



#### SEAFARERS WELFARE FUND SOCIETY, MUMBAI

Nau Bhavan, Ground Floor, 10, R.Kamani Marg, Ballard Estate, Mumbai – 400 001

Tel No. 022-20826980 E-mail id-swfs1966@gmail.com

Ref. No.: SWFS/Cir./2020

Date:23.05.2020

#### Circular No. 1 of 2020.

Subject: Welfare scheme for Seafarers & their families who suffer from novel coronavirus (COVID-19) outbreak- reg.

The corona virus (COVID-19) pandemic has created a global crisis which has impacted all aspects of life and badly impacted the world of work. The Indian seafarers, who are working or retired may also get affected by this virus.

This is to bring to the notice of all Indian seafarers, holding Indian CDCs, that the Seafarers Welfare Fund Society (SWFS) an autonomous society under the administrative control of the Ministry of Shipping, Govt. of India, which is a Central Welfare organisation providing welfare facilities to the seafarers and their families has decided to provide the financial assistance to the Indian seafarers and their families who may suffer from novel coronavirus (COVID-19) outbreak. This welfare scheme called "SWFS-NOVEL CORONAVIRUS (COVID-19) ASSISTANCE SCHEME FOR INDIAN SEAFARERS" is specific and for limited period.

This scheme will be effective from 1.2.2020 till 31.12.2020. This scheme will provide financial assistance to the seafarers & their family members for 'in-patient treatment' for coronavirus (COVID-19) and in case death of seafarers. Under this scheme the SWFS will provide the financial assistance maximum up to Rs. One lac, for novel coronavirus (COVID-19) affected seafarers or their families if they are admitted in COVID notified hospital for treatment. Further in case of death of a seafarer due to novel coronavirus (COVID-19), the financial assistance amounting to Rs. Two lacs will be paid to the next of kin of the seafarer.

The complete details of the scheme and application forms are annexed with this Circular as Annexure I, II, III also available at the website of the Directorate General of Shipping, i.e. www.dgshipping.gov.in.

This scheme has been approved by the Board of Trustees of the Seafarers Welfare Fund Society.

(Amitabh Kumar)

Chairman-SWFS

Copy to:

(1) Secretary, Ministry of Shipping, Gol, New Delhi...for information.

(2) The Director General of Shipping, Gol, Mumbai. .

(3) All Indian Shipping Companies

(4) All Registered RPSL Companies

(5) INSA/MASSA/FOSMA

(6) All Seafarers' Unions/Associations

to provide the publicity of this circular on their websites for information to seafarers.

Annexure-l

#### SEAFARERS WELFARE FUND SOCIETY

#### DETAILS OF 'SWFS-NOVEL CORONAVIRUS (COVID-19) ASSISTANCE SCHEME.

#### <u>Preamble</u>

- (a) The name of the proposed scheme will be "SWFS Novel Coronavirus (COVID-19) Assistance Scheme for Indian seafarers".
- (b) The scheme will cover all seafarers in possession of Indian CDC and their families and the spouse of deceased seafarers, as per eligibility criteria mentioned below.
- (c) To implement this scheme the Seafarer's Welfare Fund Society (SWFS) herein after referred as 'society' will earmark an initial fund of Rs. 12 crores from its welfare fund corpus which will be supervised by the Steering Committee as mentioned in para 7 (2).
- (d) The proposed scheme is to be introduced with effect from 1st February, 2020.
- (e) The scheme will apply to the Indian seafarers having Indian CDC and/or their family members who are affected and then admitted to COVID hospital. notified as such, by their respective States/authorities or succumb to novel coronavirus (COVID-19) infection.
- The definition of 'family members' under this scheme, hereinafter referred (f) above includes the spouse of the seafarer, the minor children and dependent parents only and in respect of spouse of the seafarer her/his minor children only if he/she has not re-married.
- 1. Eligibility Criteria: Eligibility criteria for qualifying for benefit under this proposed scheme will be as follows:
- All Indian seafarers holding Indian CDC and their family members (as defined 1.1. above) are covered under this scheme.
- Spouse of deceased seafarer is eligible for the scheme provided she/he is not re-1.2. married. Juilah 1 2000



## OTHER TERMS AND CONDITIONS:

- treatment at a notified COVID hospital in India only. The claimant will be required to submit self-attested copy of hospital discharge card with summary and medical reports, medical bills duly certified by the Chief Medical Officer (CMO) or designated doctor of the said hospital and in case of death, the copy of Death Certificate and a certificate issued by the hospital showing cause of death due to coronavirus (COVID-19) infection. The SWFS reserves the right to verify / confirm the details from the concerned hospital or other sources, and act accordingly.
- (ii) The claim will be entertained only for novel coronavirus (COVID-19) infection cases.
- (iii) If any claim found false / forged, before / after the financial assistance is paid by the SWF Society, an appropriate legal action including the claimant being barred from receiving any financial assistance from welfare schemes implemented by this society, presently or in future,
- (iv) The seafarer who is below 60 years of age will be required to submit the self-attested copy of the latest CDC to confirm the last sea-service period. through the Indian Shipping Company/ Register RPSL Company.
- (v) The seafarer who is below 60 years of age and cancelled the CDC on medical grounds or voluntary retirement on or after attaining 50 years of age, will be required to submit the self-attested copy of latest CDC book to confirm the bonafides and self-attested copy of CDC cancellation order issued by the respective Government Shipping Office.
- (vi) The seafarer who is above 60 years of age will be required to submit selfattested copy of his latest CDC book for verification and records.
- (vii) The Spouse of deceased seafarer is required to submit the self-attested copy of CDC Book of her/his deceased seafarer and a declaration that

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she/he has not re-married after the death of the seafarer, till the date of submission of claim.

(viii) This scheme will not apply to any seafarer who is at legal liability of employer / RPSL Company during the course of employment and in treatment during sign on and sign off.

#### 3. THE QUANTUM OF FINANCIAL ASSISTANCE:

The financial assistance will be paid as follows:

- (i) The society will provide financial assistance of 50% of total medical expenses incurred for the seafarer and his/her family members, or Rs.1,00,000/-, whichever is less, for treatment at a COVID notified hospital for coronavirus. Benefit is for 'in-patient' only.
- (ii) The society will provide the financial assistance of Rs. 2,00,000/- in respect of death of the seafarer due to novel coronavirus (COVID-19), to the next of kin as recorded in the last article of agreement entered into with the shipping company / registered RPSL company. This benefit shall not be extended to the death of any family member of the seafarer.
- 4. To claim the assistance under this scheme only such application will be entertained which are as per SWFS format in Annexure I & II. The application can be sent to the following e-mails dedicated for this scheme:

swfs.coronavirus20assistance@gmail.com swfs.covid19assistance@gmail.com

5. The application under this scheme should be submitted by the claimant as per SWFS format along-with the requisite documents as mentioned above at point 2, and should be received by the society within three months from the date of discharge from the hospital or/ death. The application which are not as per SWFS format and received without any supporting requisite documents will be summarily rejected and communicated to the applicant.

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- 7. (i) The SWFS Novel Coronavirus (COVID-19) Assistance scheme is a one time and limited period welfare scheme and currently will be implemented till 31.12.2020. The Steering Committee for this scheme reserves the right to dispense with and/ or curtail, suspend / extend or completely withdraw the scheme at any-time without giving any prior notice. The decision of the committee in this regard shall be final and binding.
  - (ii) The SWFS Steering Committee shall consist of five members i.e. (i) Two Officers from DGS nominated by Director General of Shipping, (ii) Member Secretary of the SWFS (iii) Representative of the seafarer's union and (iv) Representative of Shipping companies.
  - 8. Notwithstanding anything contained herein above in all doubtful / disputed and / or exceptional cases, the Steering Committee will examine, review and decide the cases, on case to case basis and the decision of the Committee shall be final and binding to all the claimants.
  - The scheme is a one time and specific scheme and has no bearing to the other schemes being operated by the society. Applicant for death benefit under this scheme will not be eligible for 'Survival Benefit Scheme' of the SWFS.

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(Annexure-II)

# SEAFARERS' WELFARE FUND SOCIETY.

Nau Bhavan, Ground Floor, R. Kamani Marg, Ballard Estate, Mumbai – 400 001.

Tel No. 022-20826980 e-mail id - <a href="mailto:swfs1966@gmail.com">swfs1966@gmail.com</a>

# APPLICATION FORM FOR ASSISTANCE UNDER 'SWFS-NOVEL CORONAVIRUS (COVID-19) SCHEME. ( FOR 'IN-PATIENT' ONLY)

(Please refer notes given below before submitting this application form.)

Seafarer's name in Full		
(As per CDC Book) OR	N/r /N/no /N/a	
Name of Spouse in case of deceased	Mr./Mrs./Ms.	
seafarer.		
CDC Number of seafarer		
Name of Indian shipping Co. OR		
Registered RPSL Co. for last sea service.		
		The date of sign off
The name of the vessel last sign-off		from the last vessel:
Applicant's correspondence address		nom the last vessel:
	Tol No	
Telephone No. (with STD Code) /	Tel. No.	Mobile No
Mobile No. and e-mail id.	e-mail id :	
Name of Coronavirus infected person &		
his/her relationship with seafarer		
Name of the nominated COVID hospital		
& the period of in-patient treatment.		
the undersigned making an application to		
the undersigned, making an application for ssistance scheme for 'in-patient' treatmen	nt taken for more	r SWFS-Noval Coronavirus (COVID-19)
me 707 in patient treatmen	it taken for myself	r/spouse/son/daughter/father/mother

who was infected by coronavirus (COVID-19). I now request you to grant me, financial assistance under the said scheme, as per SWF Society's rules as applicable for the scheme. I am submitting herewith following documents, to receive the assistance under the scheme. I give below my Bank account details. (Bank details are mandatory, without which the application will not be processed.)

Sr. No.

Document

Sr. No.	Document
1	Self-attested copy of latest Indian CDC Book showing last sign-off vessel name and date.
2	Self-attested copy of CDC cancellation order (in case CDC is cancelled.)
3	Original medical bills duly certified by the Chief Medical Officer/designated doctor of COVID hospital.
4	Self-Attested copy of discharge card/certificate and medical report card issued by the nominated COVID hospital (where the patient was admitted for the treatment.)
5	Self attested copy of ID proof of the patient & in case of minor child his/her birth certificate.

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6	In case of claim from spouse of deceased seafarer, she/he has to submit declaration that she/he has
	not remarried after the death of seafarer till the time of submission of claim. Also the copy of death
	certificate of late seafarer to be submitted alongwith the application form.

Details of the bank, where the financial assistance amount to be credited (mandatory)

Name of the bank	Branch name	Branch address	S.B. A/c no.	Branch IFSC code	
attach a legible copy o ame and cancelled cha	of the Front page of B	Bank Pass Book of SB Acc II accounts will not be co	count showing applica	ant's	
and direction of	eque, Michino/Mi	accounts will not be co	insidered.		
leclare that I am clair	ming this financial as	ssistance on the strengt	h of the documents	submitted	
above, and at later	date if it is proved	that my claim was fou	ind fraudulent, I und	dertake to	
fund the financial as	sistance in full to th	ne SWF Society and also	authorize the SWF	Society to	
tions against me.	n me trom my any	source of Income or m	ay take any approp	riate legal	
and against me.					
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ite:		£ 1			
pression)	····	(Applicar	(Applicant's Signature/ Thumb		
. ,			•		
	Name	of Applicant:			
te 1: This application	on form is to be subm	nitted by seafarer, holdi	ng Indian CDC or spor	ise of	
tient treatment from	nominated COVID b	r as defined in the scher ospital for coronavirus (	ne rules who had tak	en in-	
te 2: The applicatio	n for financial assista	ance should be received	by the Society withir	three	
onths after discharge	from the nominated	COVID hospital.	,		
				12.44-2.	
FOR S.W.F.S. OFFICE	USE ONLY		Application No.		
Cumanto attack - 1	autical out				
contents attached vi	eriffed & the applica	ant found eligible/not e	ligible under 'SWFS	-NOVFI	
onavirus (COVID-10	Assistance schom	e' for financial assistanc	o of 3		

Checked by D.A. Verified by (A.A.O.) Recommended by (CAAO) Approved by MT/MS



(Annexure-III)

### SEAFARERS' WELFARE FUND SOCIETY.

Nau Bhavan, Ground Floor, R. Kamani Marg, Ballard Estate, Mumbai – 400 001.

Tel.No. 022-20826980 e-mail id- swfs1966@gmail.com.

# <u>APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER</u> <u>'SWFS-NOVEL CORONAVIRUS (COVID-19) SCHEME'</u> <u>(IN RESPECT OF DEATH OF SEAFARER)</u>

(Please refer notes given below before submitting this application form.)

1.	Seafarer's name in full (As per CDC Book)	(4) (8)	Late Mr./Mrs./Ms.:
2.	Indian CDC No.		
3.	The name of the vessel last sign-off by the deceased seafa	: arer	Date of sign-off :
4.	Name of Indian shipping Co. OR Registered RPSL Compa		<del></del>
5.	Applicant's name in full & relationship with deceased seafarer	: :	
6.	Correspondence address	e p	
		:	
7.	Telephone No./Mobile No : Tel	. No	Mobile No.:
			(with STD code No.)
8.	E-mail ID if any		\$ · · ·
I, th	t	nolding	t my husband/wife/son/daughter late Mr./Mrs./Ms. Indian CDC No expired on
	due to coronavirus (	(COVID	-19) infection (Delete whichever is not applicable)



I now request you to grant me, the financial assistance under the 'SWFS-Novel Coronavirus' (COVID-19) Assistance Scheme' as per SWF Society's rules as applicable for the scheme. I am submitting herewith following documents, to receive the assistance under the scheme. I give below my Bank account details. (Bank details are mandatory, without which the application will not be processed.)

- (a) Self-attested copy of death certificate of the deceased seafarer issued by the local authority showing cause of death as 'COVID-19"
- (b) Self attested copy of certificate issued by COVID hospital showing cause of death, in case of in-patient.
- (c) Self-attested copy of latest CDC book
- (d) Self-attested copy of CDC cancellation Order, (in case the CDC is cancelled on medical grounds / voluntarily )
- (e) Self-attested copy of any one Identity proof of the applicant showing relationship with deceased seafarer (i.e. PAN card/Voter's ID card / Aadhar Card/Indian passport etc.)

# Details of the bank, where the financial assistance amount to be credited (mandatory)

Name of the bank	Branch name	Branch address	S.B. A/c no.	Branch IFSC code
		8 <sup>#</sup>		

(Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name. NRO/NRE/NRI accounts will not be considered.)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date, if it is proved, that my claim was found fraudulent or I am not the actual beneficiary, I undertake to refund the financial assistance in full to the SWF Society and also authorize the SWF Society to recover the same from me from my any source of Income or may take any appropriate legal actions against me.

Place:	
Date:	(Applicant's Signature/ Thumb
Impression)	(Applicant a signature) Thumb

Name of Applicant

- Note 1: This application form is to be submitted by the next of kin of deceased seafarer who hold the Indian CDC and expired due to coronavirus (COVID-19) infection.
- Note 2: The application for financial assistance should be received by the Society within three months from the date of death of the seafarer with all required documents.