

Performa for application for advance from General Provident Funds

1.	Name of the Subscriber	
2.	Account Number	
3.	Designation	
4.	Pay	Rs.
5.	Balance at Credit of the subscriber on the date of application as below:-	
	i	Closing balance as per statement for the year_____ Rs
	ii	Credit from _____to_____on account of monthly subscription. Rs
	iii	Refunds Rs
	iv	Withdrawals during the period from _____to_____ Rs
	v	Net balance at credit Rs
6.	Amount of advance/outstanding, if any, and the	
7.	Amount of Advance required	
8.	a.	Purpose for which the advance is required
	b.	Rules under which the request is covered
	c.	If advance is sought for House Building etc., following information may be given:-
	i.	Location & measurement of the plot
	ii.	Whether plot is freehold or on lease
	iii.	Plan for construction
	iv.	If the flat or plot being purchased is from a H.B. Society, the name of Society, the location & measurement, etc.
	v.	Cost of construction
	vi.	If the purchase of flat is from DDA or any Housing Board etc., the location, dimension, etc., may be given.
	d.	If advance is required for education of children, following details may be given:-

	i	Name of the son / daughter	
	ii	Class & Institution / College where studying	
	iii	Whether a day-scholar or a hostler	
	e	If advance is required for treatment of ailing family members, following details may be given:-	
	i	Name of the patient and relationship	
	ii	Name of the Hospital / Dispensary /Doctor where the patient is undergoing treatment.	
	iii	Whether outdoor / indoor patient	
	iv	Whether reimbursement available or not	
9	Amount of the consolidated advance (Items 6 and 7) and number of monthly installments in which the consolidated advance is proposed to be repaid.		Rs. _____ in _____ Installments.
10	Full Particulars of pecuniary circumstances of the subscriber, justifying the application for the advance		

I certify that particulars given below are correct and complete to the best of my knowledge and belief and that nothing has been concealed by me.

Date:-

Signature of the Applicant

Name _____

Designation _____

Section / Branch _____

Note:- In case of advance under 8 © to 8 (e), no certificate or documentary evidence would be required.

**Performa for application for withdrawal from Provident Funds
Application for Advance from G.P.F.**

1.	Name of the Subscriber	
2.	Account Number	
3.	Designation	
4.	Pay	Rs.
5.	Date of Joining service and date of Superannuation	
5.	Balance at Credit of the subscriber on the date of application as below:-	
	i	Closing balance as per statement for the year_____ Rs
	ii	Credit from _____to_____on account of monthly subscription. Rs
	iii	Refunds made to the Fund after the closing balance , vide (i) above Rs
	iv	Withdrawals during the period from _____to_____ Rs
	v	Net balance at credit on date of application Rs
6.	Amount of Advance required	
8.	a.	Purpose for which the withdrawal is required
	b.	Rules under which the request is covered
9	Whether any withdrawal was taken for the same purpose earlier. If so, indicate the amount and the year.	
10	Name of the PAO maintaining the Provident Fund Account	

Date:-

Signature of the Applicant

Name_____

Designation_____

Section / Branch_____

Annexure-D

Forms

1

**Form of Application for Final Payment/Transfer to Corporate Bodies/Other
Governments of Balances in the
General Provident Fund Account**

To

The Pay and Accounts Officer,

(Through the Head of Office)

Sir,

I am to retire/have retired have proceeded on leave preparatory to retirement for _____ months/have been discharged/dismissed/have been permanently transferred to _____ / have resigned finally from Government service/have resigned service under _____ Government to take up appointment with _____ and my resignation has been accepted with effect from _____ forenoon/afternoon. I joined service with _____ on _____ forenoon/afternoon.

2. My Provident Fund Account No. is _____

3. I desire to receive payment through my office through the _____ Treasury/Sub Treasury. Particulars of my personal marks of identification left hand thumb and finger impressions (in the case of illiterate subscribers and specimen signature (in case of literate subscribers) in duplicate, duly attested by a Gazetted Officer of the Government, are enclosed.

PART-I

**[To be filled in when the application for final payment
is submitted up to one year prior to retirement]**

4. I request that the amount of Rs. _____ standing to the credit in my Provident Fund Account as indicated in the Accounts Statement issued to me for the year _____ (enclosed) / as appearing in my ledger account being maintained by you _____ Treasury/Sub Treasury/Head of Office, my please be arranged to be paid to me as first installment of final payment.

5. * * * * *

6. After payment of the first installment of my Provident Fund balance, I will apply for the payment of subsequent installments in Part-II of the form immediately on retirement.

Yours faithfully

Signature-----
Station----- Name_____

Date:-_____ Address_____

This applies only when payment is not desired through the Head of Office.

(FOR USE BY HEADS OF OFFICES)

Forwarded to the Pay & Accounts Officer_____ for necessary action.

2. The Provident Fund Account No._____ of Shri/Shrimati/Kumari (as certified from the Statements furnished to him/ her from year to year) is _____.

3. He/She is due to retire from Government Service on_____.

4. Certified that he/she had taken the following advances in respect of which_____instalment of Rs._____are yet to be recovered and credited to the Fund Account. The details of the final withdrawals granted to him/her are also indicated below:-

Temporary Advances	Final Withdrawals
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

5. * * * * *

Signature
of the Head of Office

PART-II

[To be submitted by the Subscriber immediately after his/her retirement.
This Part is also applicable in the case of subscribers who apply for final payment for the first time after the date of superannuation, discharge, resignation etc.]

In continuation of my earlier application, dated _____,
for the final payment of Provident Fund balances, I request that the entire balance at my credit with interest due under the rules may be paid to me.

Or

I request that the entire amount at my credit with interest due under the rules may be paid to me /transferred to _____.

Signature-----

Name_____

Address_____

(FOR USE BY HEADS OF OFFICES)

Forwarded to the Pay & Accounts Officer_____ for necessary action/in continuation of Endorsement No. _____ dated_____.

2. He/She has finally retired/ will proceed on leave preparatory to retirement for _____months/have been discharged/dissmissed/have been permanently transferred to _____ / have resigned finally from Government service/have resigned service under _____ Government to take up appointment with _____ and my resignation has been accepted with effect from _____forenoon/afternoon. He/She joined service with_____ on _____forenoon/afternoon.

3. The last fund deduction was made from his/her pay in this office bill No._____, dated_____, for Rs._____ (Rupees_____), cash voucher No._____ of _____Treasury, the amount of deduction being Rs._____ and recovery on account of refund of advance Rs._____.

4. Certified that he/she was neither sanctioned any tempory advance nor any final withdrawal from his/her Provident Fund Account during the 12 months immediately preceding the date of his /her quitting service under _____Government/proceeding on leave preparatory to retirement or thereafter

or

Certified that the following temporary advances/final withdrawals were sanctioned to him/her and drawn from his/her Provident Fund Account during the 12 months immediately preceding the date of his/her quitting service under _____ Government/proceeding on leave preparatory to retirement or thereafter

Amount of Advance/withdrawal	Date	Voucher number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. * * * * *		

6. It is certified that no demands/following demands of Government are due for recovery¹.

7. Certified that he/she has not resigned from Government service with prior permission of the Central Government to take up an appointment in an other Department of the Central Government or under a State Government or under a body corporate owned or controlled by the State².

Signature
Of the Head of Office/Department

1. Certificate No.6 to be furnished in the case of Contributory Provident Fund Only.
2. Please score out if not necessary.

