

APPLICATION FOR GRANT OF REFUNDABLE/ NON REFUNDABLE ADVANCDE
FROM THE GENERAL PROVIDENT FUND.

I request for sanction to grant of advance (Refundable/ Non- Refundable from the General Provident Fund. My particulars are as under:-

- 1. Name of the applicant : _____.
- 2. Father's Name : _____.
- 3. Designation : _____.
- 4. Date of joining the service: _____.
- 5. Date of retirement : _____.
- 6. Scale of Pay : _____.
- 7. DDO with whom working: _____.

- | 8. | Gross Pay
(1) | Deductions
(2) | Net Pay
(1-2) |
|----|------------------|-------------------|------------------|
|----|------------------|-------------------|------------------|

Basic Pay: _____	GPFL: _____
Pay Band: _____	GPF : _____
Spl Pay : _____	HRA : _____
P.Pay : _____	ML : _____
DA : _____	LIC : _____
MA : _____	
Others : _____	Others _____
Total : _____	Total : _____

- 9. GPF No. _____ (CPF A/C No. Old) _____.

Particulars under column 1 to 9 are verified.

Signature of DDO

- 10. Amount of advance required : _____.

- 11. Recoverable in _____ equal instilment @ Rs. _____.

- 12. Purpose for which advance is required for

A) In case advance is required for purchase of Plot Please attach permission accorded by competent authority, details of No. of plots in your name and source of purchase of Plot with agreement may also be supplied.

- B) In case construction of house/ repair of house please state:-

- | | | |
|------|---|--------|
| i) | Whether HBL taken from the Board. | Yes/No |
| ii) | If yes, amount of HBL, date of sanction of HBL and copy of sanction letter be attached, Whether recovered in full or being recovered and rate of recovery be intimated. | |
| iii) | In case loan is for const. of house please add ownership of plot/house. approved map and estimate from SDO In charges. | |

- C) In case loan is required for scooter/moped etc.
- | | | |
|-----|---|--------|
| i) | Whether such loan was taken previously also from Board Fund. | Yes/No |
| a) | If yes, date of sanction and amount thereof. | |
| b) | Whether recovered in full or still being recovered-balance along with interest. | |
| c) | Whether earlier vehicle has been disposed off-amount of sale proceeds thereof. | |
| ii) | Whether loan was taken previously also from GPF | Yes/No |
| a) | If yes, date of sanction and amount thereof. | |
| b) | Whether recovered in full or still being recovered-balance alongwith interest. | |
| c) | Whether earlier vehicle has been disposed off-amount of sale proceeds thereof. | |
- D) Whether advance is required for marriage of Son/Daughter, if so proof of date of birth and invitation card may be added.
- E) Whether advance is required for celebration of functions etc, date of ceremony with detail of ceremony be given.
13. Rule under which advance is required (13,14-R.A) or 13.29-NRA
14. Whether 12 months have elapsed since the recovery of last installment of earlier loan.
15. Whether 12 months have not elapsed since the recovery of last installment of earlier advance please give consent/ compelling circumstances warranting sanction of 2nd advance.
16. Applicant's S.B. A/C No. with name of Bank.
17. Whether the pecuniary circumstances of the application are such that advance is absolutely necessary. Yes/No
- 18- certified that the functions/purchase of plot/const./repair of house can not be done without this advance.
- 19- I undertake to submit utilization certificate/APR within one month from the date of receipt of loan out of GPF.

20-

(Withdrawal for Marriage/Bhat Ceremony)

S No.	Subject	Particular
i.	Marriage of Self/Son/Daughter/dependent Sister	_____
ii.	Name of the dependent for whose marriage advance is applied	_____
iii.	Date of Birth of the dependent	_____
iv.	Has any withdrawal been taken earlier for marriage? If yes, the amount of withdrawal taken with detail.	_____
v.	Amount of withdrawal being applied for	_____
vi.	Date of marriage ceremony	_____

(Signature of applicant)
Designation _____
Office _____

21-

(Withdrawal for Higher Education of Children)

i.	Withdrawal is being applied for higher education of	Son/Daughter
ii.	Name of the Child	_____
iii.	Details of the Course of Study	_____
iv.	Name of the Institute of Study	_____
v.	Evidence of Admission	_____
vi.	Evidence of fees to be supported to justify the advance	_____
vii.	Details of withdrawal taken earlier for the purpose	(i) _____ (ii) _____ (iii) _____

(Signature of applicant)
Designation _____

Office _____

Yours Faithfully,

**(Name of Applicant)
with Designation.**

Endst No.

Dated:

The application alongwith enclosures is forwarded to the Controller, Finance & Accounts, H.S.A.M.Board, Panchkula for further necessary action. All the above particulars given by the applicant are true based on records and nothing has been concealed therein.

**Signature of DDO/Officer
Incharge with seal.**

200 / KE/

ANNEXURE A
FORM NO. PF-1
(see rule 6)

APPLICATION FOR ALLOTMENT OF GENERAL PROVIDENT FUND ACCOUNT NUMBER
(To be submitted in triplicate)

Name of applicant & Father/Husband name	Date of birth/Date of joining regular service	Designation and Official address	Nature of post held (i) On probation (ii) Temporary (iii) Permanent	Existing Scale and Basic pay per mensem	Rate of subscription per mensem	Whether the applicant has a family or not?	Account number to be allotted by HSAM Board Panchkula
1	2	3	4	5	6	7	8

Place _____

Date _____ 20

Signature of Applicant

(Signature)

Head of Office

OFFICE OF THE H.S.A.M.Board, Panchkula, HARYANA

No. _____ Dated: _____

Returned to _____ with General Provident Fund Account number allotted as mentioned in Column 8. This number should be quoted for all future correspondence connected therewith. The nomination form duly accepted is also returned for office record.

For H.S.A.M.Board, Panchkula.

ANNEXURE B
FORM NO. PF-2
(see rule 7)
FORM OF NOMINATION

Account No -----

I, _____ hereby nominate the person(s) mentioned below who is/are member(s)/non-member(s) of my family as defined in rule 7 of the Haryana General Provident Fund Rules to receive the amount that may stand to my credit in the Fund as indicated below, in the event of my death before that amount has become payable or having become payable has not been paid:

Name and address of the nominee(s)	Relationship with the subscriber	Age of the nominee(s)	Share payable to each nominee	Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person(s), if any, to whom the right of nominee shall pass in the event of his predeceasing the subscriber	If the nominee is not a member of the family as provided in rule 3, indicate the reasons
1	2	3	4	5	6	7

Place-----

Dated this _____ day of _____, 20____
Signature of the subscriber

Name in Block Letters_____

Designation_____

Signature of two witnesses: Name and Address

Signature

1.

2.

NOTE:

(1) The form of nomination shall be filled in triplicate. Two copies will be sent to H.S.A.M. Board, Panchkula, who will return one copy duly accepted and signed to the Head of Office for office record.

(2) In column 4, if only one person is nominated, the words "in full" should be written against the nominee. If more than one person is nominated, the share payable to each nominee to cover the whole amount of the Fund shall be specified.

For use by the Head of Office Concerned DDO

Nomination received from Sh./Ms _____

Designation _____ on dated _____ for

onward submission to the H.S.A.M. Board, Panchkula. Dated _____

Head of Office

For use by H.S.A.M. Board, Panchkula.

Nomination made by Sh./Ms. _____

Designation _____, O/o _____

is hereby accepted and returned to _____ for office

record.

For H.S.A.M. Board, Panchkula.