
F O R M NO. PF-1

(see rule 6)

APPLICATION FOR ALLOTMENT OF 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 CAO(GPF), HVPNL
1	2	3	4	5	6	7	8

Place _____ Date _____ 20

Signature of Applicant

(Signature)

Head of Office

OFFICE OF THE CAO (GPF), HVPNL, Panchkula.

No. _____ Dated: _____

Returned to _____ with 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.

CAO/GPF, HVPNL, Panchkula

F O R M NO. PF-2(see rule 7)

FORM OF NOMINATION

PF 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 HVPNL Employees Provident Fund Trust 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 CAO(GPF), HVPNL, 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

Nomination received from Sh./Ms. _____

Designation _____ on dated _____ for onward submission to the
CAO(GPF), HVPNL.

Dated _____

(Signature)

Head of Office

For use by CAO(GPF), HVPNL, Panchkula

Nomination made by Sh./Ms. _____

Designation _____, O/o _____ is hereby
accepted and returned to _____ (Head of Office) for office record.

(Signature)

CAO(GPF), HVPNL, Panchkula

F O R M NO. PF –3

(see rules 15 to 17)

APPLICATION FOR ADVANCE FROM PROVIDENT FUND

Department/Office_____

1. Name of the Subscriber:
2. Designation:
3. Account number (complete):
4. Existing Scale of pay:
5. Basic pay including Dearness Pay, Personal Pay, Special Pay, if any, in the existing scale :
Rs. _____
6. Date of joining service :
7. Date of Superannuation :
8. Balance at credit of the subscriber on
the date of the application as below: -
 - (i) Closing balance as per latest Provident Fund statement Rs
for the year _____(copy enclosed)
 - (ii) Add regular monthly subscription plus lumpsum Rs.
subscription, if any, after the date of Provident Fund statement mentioned at (i)
above:
 - (iii) Add refunds of advance(s) after the date of Rs.
statement mentioned at (i) above:
 - (iv) Total (i) + (ii) + and (iii): Rs.
 - (v) Less amount of advance(s) and Withdrawal(s) taken after the date of Provident
Fund statement mentioned at (i) above: Rs.
 - (vi) Net balance at credit: Rs.
9. Amount of advance required Rs_____
10. Purpose for which the advance is required:
11. Date of ceremony:
12. Rule under which the advance is admissible :
13. Full details of advance taken previously :

Serial Number	Purpose of advance	Date of Drawal	Amount	Name of the office from where payment received
1.				
2.				
3.				

14. Whether full recovery has been made of the previous advance:

15. If the reply to item 14 above is negative then give the following information: -

Serial Number	Purpose of advance	Amount of advance	Month of Drawl	No. of Installments for recovery	Advance recovered	Balance of advance
1.						
2.						

1. Certified that I have utilized the advance(s) taken from my Provident Fund earlier for the purpose for which the advance(s) was/were sanctioned and I have already submitted the utilization certificate to the Head of Office as required under rule 16.

2. Certified that the person for whose ceremony/education etc. the advance has been applied for, is fully and solely dependent upon me.

3. Certified that the information given in this application is true and correct and nothing has been concealed or mis-stated therein. I am aware that in case of any concealment or mis-statement of facts, I will be debarred from taking any advance(s) from my Provident Fund Account for a period of two years.

Signature of the Applicant

Name_____

Designation_____

Dated_____

Office_____

(see rules 18 to 23)

APPLICATION FOR WITHDRAWAL FROM PROVIDENT FUND

PART – I

Office _____

Head of Office _____

1. Name of the Subscriber:

2. Designation:

3. Account number (complete) :

4. Existing Scale of pay:

5. Basic pay including Dearness Pay, Personal Pay, Special Pay, if any, in the existing scale :
Rs.

6. Date of joining service:

7. Date of supperannuation:

8. Balance at credit of the subscriber on

the date of the application as below: -

(i) Closing balance as per latest Provident Fund statement for the
year _____ (copy enclosed)

(ii) Add regular monthly subscription plus lump sum Rs. _____ subscription, if any,
after the date of Provident Fund statement mentioned at (i) above:

(iii) Add refunds of advance(s) after the date of statement mentioned at (i) above: Rs

(iv) Total (i) + (ii) + and (iii): Rs.

(v) Less amount of advance(s) and withdrawal(s) taken after the date of Provident Fund statement mentioned at (i) above: Rs

(vi) Net balance at credit : Rs. _____

9. Amount of withdrawal required: Rs _____

10. Purpose for which withdrawal is required:

11. Rule under which withdrawal is admissible:

12. Whether any withdrawal was taken for the same purpose earlier, if so, indicate the Amount and the date: -

Serial Number	Date of drawal	Sanction Number and Date	Amount	Name of office from where payment was received
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1.				
2.				
3.				

NOTE: All withdrawals taken for purchase of plot, purchase of house, construction, addition and alteration, repair of house and repayment of loans taken for these purposes should be treated as same purpose. All withdrawals taken for purchase of motor cycle, scooter, and moped should be treated as same purpose and withdrawal for motor car can be obtained separately subject to conditions mentioned in rule 22.

13. Additional information be given in the relevant (Part- ___attached) part i.e. acquisition of Plot/flat in part-II/detail of marriage ceremony in Part-III/details of higher education in Part-IV/details of motor vehicle(s) in Part-V :

1. Certified that I have utilized the withdrawal(s) taken from my Provident Fund earlier for the purpose for which the withdrawal(s) was/were sanctioned. I have already submitted the utilization certificate to the Head of Office as required under rules 19/20/21/22.

2. Certified that the person for whose ceremony/education etc. the advance has been applied for, is fully and solely dependent upon me.

3. Certified that the information given in this application is true and correct and nothing has been concealed or mis-stated therein. I am aware that in case of any concealment or mis-statement of facts, I will be debarred from taking any withdrawal(s) from my Provident Fund Account for a period of five years.

(Signature of applicant)

Designation : _____

Dated: _____ Office: _____.

(Examination/Verification by the Office)

1. This is to certify that the office has checked and verified the details submitted by the subscriber in this application. All the details furnished by the subscriber are verified to be correct.

2. The subscriber is entitled to the withdrawal being applied for under the rule 18; or the subscriber is not entitled to the withdrawal applied for and has requested for relaxation in rules on the following counts:

(i)

(ii)

(iii)

(Signature of the Head of office with Seal)

F O R M N O. P F-4

P A R T - II

If the application is for seeking withdrawal for acquisition of a plot and construction of house thereon/acquisition of flat or house/construction of house, the following additional information be provided:

Serial Number	Subject	Particulars
1.	Purpose:	(i) Acquisition of a plot for house (ii) Acquisition of a built up flat (iii) Acquisition of a built up house (iv) Construction of House (v) Re-payment of loan taken from a financial institution expressly for acquiring a dwelling unit (vi) Repair/Renovation of a house
2.	Source of acquisition (please give details of the agency e.g. Haryana Urban Development Authority/Co-op. Housing Society/ Open market or any other source	
3.	Person in whose name the plot/ house/flat (Clear title). Enclose proof of ownership/copy of allotment letter	
4.	Amount of House Building Advance taken from the Government under its Scheme, if any.	
5.	Whether withdrawal from Provident Fund taken earlier for this purpose?	Yes / No
6.	If the answer to above is 'yes' , please give the details: (i) withdrawal taken for the same unit (ii) withdrawal taken for some other unit(s) (iii) whether the previous unit has been disposed off and the advance taken for the same deposited back in the account	(i) (ii) (iii)
7.	If the withdrawal is being applied for a plot in the name of spouse, please indicate who is the first nominee to receive the Provident Fund accumulations.	

(Signature of applicant)

Designation_____

Office _____

F O R M NO. PF-4

P A R T – III

(withdrawal for marriage ceremony)

Serial Number	Subject	Particulars
1.	Marriage of Self/Son/Daughter/dependent Sister	
2.	Name of the dependent for whose marriage advance is applied	
3.	Date of birth of the dependent	
4.	Has any withdrawal been taken earlier for marriage? If yes, the amount of withdrawal taken with detail:	
5.	Amount of withdrawal being applied for	
6.	Date of marriage ceremony	

(Signature of applicant)

Designation _____

F O R M N O. P F - 4

P A R T – I V

(withdrawal for higher education of children)

Serial Number	Subject	Particulars
1.	Withdrawal is being applied for higher education of: -	Son/Daughter
2.	Name of the Child	
3.	Details of the Course of Study	
4.	Name of the Institute of Study	
5.	Evidence of Admission	
6.	Evidence of fees to be supported to justify the advance	
7.	Details of withdrawals taken earlier for the purpose:	(i) (ii) (iii)

(Signature of applicant)

Designation _____

Office _____

F O R M NO. PF-4

P A R T - V

(withdrawal for purchase of motor vehicle(s))

Serial Number	Subject	Particulars
1.	Withdrawal is being applied for motor vehicle i.e. motor car, motor cycle, scooter or moped	
2.	Particulars of withdrawal or loan taken previously, if any.	Amount Date of drawal withdrawal or Loan
3.	Cost of vehicle (proforma invoice to be attached)	
4.	Amount required for purchase of vehicle	

(Signature of applicant)

Designation _____

Office _____

(see rule 24)

APPLICATION FOR FINAL PAYMENT

To

The Chief Accounts Officer (GPF), HVPNL, Panchkula

(Through the Head of office)

Sir,

I am to retire/have retired/have been discharged/dismissed/have resigned finally from Nigam service/have resigned service _____ and my resignation has been accepted with effect from _____ forenoon/afternoon.

2. My Provident Fund Account No. is _____

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

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

Yours faithfully,

Date:-

(Signature)

(To be specified)

Name & Address:

(FOR USE BY HEAD OF OFFICE)

Forwarded to the Chief Accounts Officer (GPF), HVPNL, Panchkula for necessary action.

2. Sh./Ms _____ has finally retired/has been discharged/dismissed has resigned finally from Nigam//has resigned service with _____ and his/her resignation has been accepted with effect from _____ forenoon/afternoon.

3. The last fund deduction was made from his/her pay in the month _____ dated _____ for Rs _____ (Rupees _____), the amount of deduction being Rs.....and recovery on account of refund of advance Rs.....

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 advance(s)/withdrawal(s) granted to him/her during the twelve months immediately preceding the date of his/her quitting service/proceeding on leave preparatory to retirement or thereafter are also indicated below -

Serial Number	Amount of Advances/Withdrawals	Place of encashment	Voucher Number and Date
1.			
2.			
3.			
4.			

5. Certified that no advance/withdrawal will be sanctioned to the subscriber henceforth without the concurrence of CAO/GPF, HVPNL, Panchkula

6. **Certified that the subscriber/claimant submitted the application on _____ Date _____ Month _____ Year.**

(Signature of Head of Office)

(see rule 24)

APPLICATION FOR FINAL PAYMENT TO THE NOMINEES OR ANY OTHER CLAIMANTS WHERE NO NOMINATION SUBSISTS

To

CAO(GPF), HVPNL,Pachkula.

(Through the Head of office)

Sir,

It is requested that arrangements may kindly be made for the payment of the accumulations in the Provident Fund Account of Sh./Ms_____ . The necessary particulars required in this connection are given below: -

1. Name of the employee :
2. Date of birth :
3. Post held by the employee :
4. Date of death :
5. Proof of death in the form of a death certificate : (issued by the municipal authorities, etc.)
- 6 Provident Fund Account Number of subscriber (Complete) :
7. Amount at the credit of the subscriber at the time of his death, if known :
8. Details of the nominees alive on the date of death of the subscriber, if a nomination subsists:

Name of the Nominee	Relationship with the Subscriber	Share of the Nominee	Remarks
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____

9. In case the nomination is in favour of person other than a member of the family, the detail of the family, if the subscriber subsequently acquired a family:

Name of the Nominee	Relationship with the Subscriber	Age on the date of Death	Remarks
_____	_____	_____	_____

1 _____
 2 _____
 3 _____

10. In case no nomination subsists, the details of the surviving members of the family on the date of death of the subscriber. In the case of a daughter or of a daughter of a deceased son of the subscriber married before the death of the subscriber, it should be stated against her name whether her husband was alive on the date of death of the subscriber:

Name of the Nominee	Relationship with the Subscriber	Age on the date of Death	Remarks
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____

11. Name of the Natural/legal guardian (in case the amount is due to a minor child)

12. If the subscriber has left no family and no nomination subsists, the names of persons to whom the Provident Fund money is payable (to be supported by letter of Probate or succession certificate etc.) :

Name of the Nominee	Relationship with the Subscriber	Address	Remarks
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____

13. The payment is desired through the office of _____(Name of DDO) In this connection the following documents duly attested by a Gazetted Officer/ Magistrate are attached: -

- (i) Personal marks of identification
- (ii) Left/Right Hand thumb or finger impressions (in the case of illiterate claimants)
- (iii) Specimen signatures in duplicate (in the Case of literate claimants) :
- (iv)

Yours faithfully,

Place _____

(Signature of claimant)

Dated _____

(Full Name and Address)

(FOR USE OF HEAD OF OFFICE)

Forwarded to the Chief Accounts Officer (GPF), HVPNL ,Pachkula for necessary action. The particulars furnished above have been duly verified.

2. The Provident Fund Account number of Sh./Ms. _____ is _____
3. He/she died on _____ A death certificate issued by the Municipal authorities has been produced (copy enclosed).
4. The last Provident Fund deduction was made from his/her pay for the month of _____ the amount of deduction being Rs _____ and recovery amount being Rs. _____.
5. 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 withdrawals granted to him/her during the twelve months immediately preceding the date of his/her death are also indicated below -

Serial Number	Amount of Advances/Withdrawals	Place of encashment	Voucher Number and Date
1.			
2.			
3.			
4.			

6. Certified that the claimant submitted the application on _____ date _____ month _____ year.

(Signature of the Head of office)

F O R M N O. P F- 7

SANCTION ORDER FOR ADVANCE

(see rule 15)

Sanction is hereby accorded under rule _____ of HVPNL Employees Provident Fund Rules for the grant of an advance of Rs _____ (Rupees _____ only) to Shri/Ms _____ from his/her Provident Fund Account Number _____ to enable him/her to defray charges on account of _____.

2. The advance will be recovered in _____ monthly instalments of Rs _____ each, commencing from the salary of next month succeeding the drawal month _____.

3. The balance at the credit of Shri/Ms _____ as on the date of sanction is detailed below: -

(i) Balance as per Provident Fund Statement for the year _____ Rs.

(ii) Subsequent deposits Rs.

(iii) Total of column (i) and (ii) Rs

(iv) Subsequent advance/withdrawals, if any Rs.

(v) Balance as on date of sanction column {(iii) minus (iv)} Rs.

(Name)

Dated

Head of Office

Endst. No.

Dated

Copy forwarded to:

1. The Chief Accounts Officer (GPF), HVPNL, Pachkula

2. Shri _____ His attention is drawn to the provisions of the rule _____ of Fund rules according to which a subscriber who has been permitted to withdraw money from the fund should satisfy the sanctioning authority that the money has been utilized for the purpose for which it was withdrawn. A certificate to the effect that the amount withdrawn has been utilized for the purpose for which it was sanctioned be furnished within one month from the date of drawal.

(Signature)

F O R M NO. PF- 8

SANCTION ORDER FOR WITHDRAWAL

(see rule 18)

Sanction is hereby accorded under rule _____ of the HVPNL Employees Provident Fund Rules to Sh/Ms _____ S/o/D/o Sh/Smt. _____ (here enter the name and designation) for withdrawal of an amount of Rs _____ (Rupees _____ only) from his / her Provident Fund Account No _____ to enable him/her to meet expenditure in connection with _____.

2. The amount of withdrawal is within the limits as prescribed in the conditions meant for this withdrawal.

3. The balance at the credit of Shri/Ms. _____ as on the date of sanction is detailed below: -

(i) Balance as per Provident Fund statement for the year _____ Rs.

(ii) Subsequent deposits _____ Rs.

(iii) Total of columns (i) and (ii) _____ Rs.

(iv) Subsequent advances/withdrawals, if any _____ Rs.

(v) Balance as on date of sanction columns {(iii) minus (iv)} Rs.

(vi) Date of Joining _____ Date of Retd. _____

Dated

Head of Department

Endst. No.

Dated

Copy forwarded to:

1. The Chief Accounts Officer (GPF), HVPNL, Pachkula.

2. Shri _____ His attention is drawn to the provisions of the rule _____ of Provident Fund rules according to which a subscriber who has been permitted to withdraw money from the Fund should satisfy the sanctioning authority that the money has been utilized for the purpose for which it was withdrawn. A certificate to the effect that the amount withdrawn has been utilized for the purpose for which it was sanctioned be furnished within _____ months from the date of drawal.

3. Office where working _____.

(Signature of Head of Department)