

FORM-1
(SEE RULE 31(3))

FORM OF APPLICATION FOR FINAL PAYMENT/TRANSFER TO CORPORATE BODIES/OTHER GOVERNMENTS OF BALANCE IN THE.....
PROVIDENT FUND ACCOUNT.

To,

The Accountant General , Assam,
Maidamgaon, Beltola, Guwahati-29
(Through the Head of office)

Sir,

I am to retire/have retired proceeded on leave preparatory to retirement formonths/have been discharged/dismissed/have been permanently transferred to have resigned finally from Government Service/have resigned service under the Government of..... To take up appointment with..... and my resignation has been accepted with effect from forenoon/afternoon. I Joined service with the Government of..... onforenoon/afternoon.

2. My Provident Fund Account No. is ASA/.....

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 the case of literate subscribers) in duplicate, duly attested by as Gazetted Officer of the Government are enclosed.....

PART-I

Reference Rule No. 31 (4)(a)

(To be filled in when the application for final payment up to one year prior to retirement is submitted)

4. I request that the amount of Rs.(in words) 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) may please be arranged to be paid to me as first installment of final payment.

5. The under mentioned Life Insurance Policies were being financed by me from my Provident Fund Account:

| Policy number | Name of the Company | Sum assured |
|---------------|---------------------|-------------|
| (1)..... | | ----- |
| (2)..... | ----- | ----- |
| (3)----- | ----- | ----- |

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

Yours faithfully,

Station----- Signature-----
Date----- Name -----

Address after retirement.

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

Contd.2.

(FOR USE BY THE HEAD OF OFFICE)

1. Forwarded to the Accountant General..... for necessary action

2. The Provident Fund Account Number of Shri/Shrimati/Kumari (as certified from the Statements, furnished to him/her from year to year) is ASA/.....

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.....installment of Rs. (Rupees.....) are yet to be recovered any credited to the Fund Account. The details of the final withdrawals, granted to him/her are also indicated below-

| Temporary advances | Final withdrawals |
|--------------------------|-------------------------|
| (1) Rs.....(Rupees.....) | (1)Rs.....(Rupees.....) |
| (2) Rs.....(Rupees.....) | (2)Rs.....(Rupees.....) |
| (3) Rs.....(Rupees.....) | (3)Rs.....(Rupees.....) |
| (4) Rs.....(Rupees.....) | (4)Rs.....(Rupees.....) |

5. Certified that the following amounts were withdrawn from his/her account to finance the Life Insurance Policy

| | |
|--------------------------|-------------------------|
| (1) Rs.....(Rupees.....) | (5)Rs.....(Rupees.....) |
| (2) Rs.....(Rupees.....) | (6)Rs.....(Rupees.....) |
| (3) Rs.....(Rupees.....) | (7)Rs.....(Rupees.....) |
| (4) Rs.....(Rupees.....) | (8)Rs.....(Rupees.....) |

Signature of the Head of Office

PART-II

(To be submitted by the subscriber immediately after the last fund deduction has been made as per Rule 31(4)(f). 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.)

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 after retirement

(FOR USE BY THE HEAD OF OFFICES)

Forwarded to the Accountant General..... for necessary action/ in continuation of endorserment No.....

Dated.....

2(a) He/She has finally retired/will proceed on leave preparatory to retirement for.....month/has been discharged/dismised/has been permanently transferred to...../has resigned finally from Government service/has resigned service under the Government of... to take up appointment with.....and his/her resignation has been accepted with effect from..... forenoon/afternoon. He joined service on..... in the forenoon/afternoon.

2(b) His/her Provident Fund Account No. ASA/.....

3. The last fund deduction was made from his/her pay in this office Bill No. dated.....for Rs..... (Rupees).cash voucher No.-----ofTreasury, the amount of deduction being Rs. (Rupees)and recovery on account of refund of advance Rs.....(Rupees.....).

4. Certified that he/she was neither sanctioned any temporary advance or any final withdrawal from his/her Provident Fund Account during the 12 months immediately preceding the date of his/her quitting service under the Government of..... 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 the Government of/proceeding on leave preparatory to retirement or thereafter.

| Amount of advance/ withdrawal | Date | Voucher number |
|----------------------------------|-------|-------------------|
| (1)Rs.....(Rupees.....) | | |
| (2)Rs.(Rupees.....) | | |
| (3)Rs.(Rupees.....) | | |

5. Certified that no amount was withdrawn/the following amounts were withdrawn from his/her Provident Fund Account during the twelve months immediately preceding the date of his/her quitting service under the Government of...../proceeding on leave preparatory to retirement or thereafter for payment of Insurance Premia or for the purchase of a new policy.

| Amount | Date | Voucher Number |
|--------------------------|-------|-------------------|
| (1)Rs.....(Rupees.....) | | |
| (2)Rs.(Rupees.....) | | |
| (3)Rs.(Rupees.....) | | |

* 6. It is certified that on demands/following demands of Government are due for recovery.

** 7.Certified that he/she has no resigned from Government service with prior permission of the State Government to take and appointment in another Department of the State Government or under the Central Government or other State Government or under a body corporate owned or controlled by any State Government/Central Government.

.....
(Signature of Head of Office/Department)

* Certificate No. 6 to be furnished in the case of Contributory Provident Fund only.
** Please score out, if not necessary.