APPLICATION FORM FOR SETTLEMENT OF PROVIDENT FUND

The Trustees, TCIL Employees' Provident Fund Trust, TCIL Bhawan, Greater Kailash-I, NEW DELHI-110048

Sub: Settlement of Provident Fund Account No. DS/NHP/5371/_____

Dear Sir/Madam,

I furnish below the particulars required for the settlement of my PF Account with you:

1)	Name (in full & in BLOCK letters)						
2)	PF A/c No.	DS/NHP/5371/					
3)	PAN No.						
4)	Father's Name (in full & in BLOCKletters)						
5)	Designation						
6)	Department/Place of Posting						
7)	Date of Appointment		Date of Membership of PF				
8)	Date of leaving		Reason for leaving (Tick)	Resigned/Retired			
9)	Full postal Address						
10)	Payment Option	Crossed che	que sent through post				
	 11) Declaration: (1) I declare that I have not been employed in any Factory/Establishment to which the Act applies for a continuous period of not less than 2 months immediately preceding the date of my application for final withdrawal of my Provident FundMoney. (2) The Said amount was not claimed previously if in near future if any one claims the said amount with requisite documents, I will be liable to pay that amount to TCIL EPF Trust with interest if any. 						

Signature or Left/Right Hand thumb impression of member

	<u>ADVANCE RECEIPT</u>			
Received a sum of Rs.	vide Cheque/Draft No	dtd		
drawn on			from	TCIL
Employees Provident Fund Trust towa	rds full & final settlement of my Pro	wident Fund		
account with Trust.				
Documents Required:			Affiz	x
 Joining & Relieving Letter from TCIL. Self-Attested Aadhaar copy. 		Reven	ue	
		Stam	in	
3. Self-Attested PAN copy				Ϋ́
4. Cancelled Cheque/ Self attested copy of	of Bank Passbook.			

Signature or Left/Right Hand thumb impression of member

Date: