FORM - 1 [SEE RULE 31(3)]

| | of Application for final payment / transfer to Corporation Bodies/ Other ernments of Balance in |
|------|---|
| То | Provident Fund Account: |
| | The Accountant General, Assam Maidamgaon, Beltola, Guwahati-28 (Through the Head of Office) |
| Sir, | I am to retire / have retired / have proceeded on leave preparatory to |
| 1. | |
| | retirement for Months / 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 on forenoon/ |
| | afternoon. |
| 2. | My Provident Fund Account No. is |
| 3. | I desire to receive payment through the my office/ through |
| | Treasury/ Sub-Treasury. Particulars of my personal mark of |
| | identification, left hand thumb and finger impression (in case of illiterate |
| | subscribers) and specimen signature (in case of literate subscribers) in |
| | duplicate duly attested by a Government Gazetted Officer is enclosed |

Part I

[Reference Rule No.31(4)(a)]

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

| 4. | I request that th | ne amount of | Rs(Ru | pees |
|--------|---------------------|--------------------|--------------------------|----------------------|
| | | | |) standing to the |
| | credit in my Provid | dent Fund Accou | unt as indicated. The | account statement |
| | issued to me fo | or the year | | Is enclosed as |
| | appearing in my | ledger account | being maintained | by you may please |
| | be arranged to be | e paid to me as | first instalment of fina | l payment. |
| 5. | The under mention | ned Life Insuran | ce Policies were bei | ng financed by me |
| | from my Providen | t Fund Account | | |
| | | | | |
| Poli | icy No | Name of the co | ompany | Sum assured |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 6. | After payment of | the first instalme | ent of my Provident | Fund balance, I will |
| | apply for the pa | yment of subse | quent instalment in | Part II of the Form |
| | immediately on re | etirement | | |
| | | | | Yours faithfully |
| Statio | n | | Signature | |
| Date. | | | Name | |

Address after retirement

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

(FOR USE BY THE HEAD OF OFFICE)

| Forw | arded to the Accountant General, Assam, Maidamgaon, Beltola, |
|-------|--|
| Guw | ahati-28 for necessary action. |
| The P | rovident Fund Account Number of Sri/ Smti/ Ms |
| | |
| the y | ear to year) is |
| | |
| | FOR USE OF THE HEAD OF OFFICE/ DEPARTMENT |
| 1. | Forwarded to the Accountant General, Assam, Maidamgaon, Beltola, |
| | Guwahati-28 for necessary action. The particulars furnished above have |
| | been duly verified |
| 2. | The Provident Fund Account No. of Shri /Smti/ Ms. |
| | (as verified from the Annual Statements |
| | furnished to him/ her) is |
| 3. | He/ She died on A Death Certificate issued by the |
| | Municipal Authorities has been produced/ is not required in this case as |
| | there is no doubt about his/ her death. |
| 4. | The last Fund deduction was made from his/ her pay for the month of |
| | drawn in the office of this office Bill No |
| | Dated for Rs |
| | (Rupees) Cash Voucher |
| | NodatedofTreasury. |
| | The amount of deduction being Rs |
| | (Rupees) only |
| | and recovery on account of refund of advance of Rs |
| | /Dura a ca |

| Certified that he/ she was neither sanctioned any temporary advansanctioned any final withdrawal from his/ her Provident Fund Actional during the 12 months immediately preceding the date of his/ her de or | | | | | | |
|--|---|---|--|--|--|--|
| | 6. | Certified that the following temporary advance / 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 death | | | | |
| | | ount of Advances Date/Place of encashment Voucher No. and Date Withdrawals | | | | |
| 1 | ••• | | | | | |
| 2 | • • • | | | | | |
| 3 | • • • | | | | | |
| 7. Certified that no amount was withdrawn/ the following amounts w withdrawn from his / her Provident Fund Account during the 12 mor immediately preceding the date of his/ her retirement. (To be submitted by the subscriber immediately after the last deduction been made as per Rule 31(4) (I). This part is also applicable in the case subscribers who apply for final payment for the first time after the date superannuation, discharge, resignation etc.) In continuation of my earlier application datedfor the final payment of Provident Fund balances, I request that the entire balance of | | | | | | |
| | credit with interest due under the Rules may be paid to me. or | | | | | |
| | l re | equest that the entire amount at my credit with interest due under the Rules | | | | |
| | | | | | | |
| | m | ay be paid to me/ transferred to | | | | |
| | | Signature | | | | |
| | | Name | | | | |
| | | Address after retirement | | | | |

FOR USE OF THE HEAD OF OFFICE/ DEPARTMENT

| ١. | Forwarded to the Accountant General, Assam, Maldamgaon, Beltola, |
|----|--|
| | Guwahati-28 for necessary action/ in continuation of endorsement |
| | NoDated |
| 2. | (a) He/ She has finally retired / will proceed on leave preparatory to |
| | retirement for Months / have been discharged/ dismissed / has been |
| | permanently transferred to / has resigned finally |
| | for 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 / She joined service on In the |
| | forenoon/ afternoon. |
| | (b) His/ Her Provident Fund Account No. is |
| 3. | The last Fund deduction was made from his/ her pay for the month of |
| | drawn vide Bill No Dated/ Treasury |
| | Voucher No Dated for |
| | Rs(Rupees) |
| | only of Treasury. |
| | The amount of deduction being Rs |
| | (Rupees) only |
| | and recovery on account of refund of advance of Rs |
| | (Rupees) only. |
| | (c) Certified that he/ she was neither sanctioned any temporary advance nor sanctioned 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 |

(d) Certified that the following temporary advance / final withdrawals

were sanctioned to him/ her and drawn from his/ her Provident Fund

| | | the 12 months immed | diately precedin | g the date of his/ |
|---|----------------------------------|--------------------------|--------------------|--------------------|
| | her death | | | |
| | Amount of Advances / Withdrawals | Date/ Place of enco | shment Vouc | cher No. and Date |
| 1 | | | | |
| 2 | | | ••• | |
| 3 | | | | |
| | (e) Certified that no | amount was withdro | awn/ the following | ng amounts were |
| | withdrawn from | his / her Provident Fui | nd Account duri | ng the 12 months |
| | immediately pre | ceding the date of hi | s/ her retirement | i. |
| | (To be submitted by t | ne subscriber immedi | ately after the lo | ast deduction has |
| | been made as per Ru | ule 31(4) (I). This part | is also applicab | ole in the case of |
| | subscribers who apply | of for final payment for | or the first time | after the date of |
| | superannuation, disch | arge, resignation etc.) | | |
| | In continuation of my | earlier application | dated | for the final |
| | payment of Provident | Fund balances, I requ | est that the enti | re balance of my |
| | credit with interest due | e under the Rules may | be paid to me. | |
| | | or | | |
| | I request that the entire | e amount at my credi | t with interest du | e under the Rules |
| | may be paid to me/ tr | ansferred to | | |
| | | Signature | ••••• | |
| | | Name | | |

Address after retirement

FOR USE OF THE HEAD OF OFFICE/ DEPARTMENT

| | Forwarded to the Accountant General, Assam, Maidamgaon, Beltola, |
|----|---|
| | Guwahati-28 for necessary action/ in continuation of endorsement |
| | No |
| 2. | (a) He/ She has finally retired. |
| b) | His/ her Provident Fund Account No. is |
| 3. | The last Fund Deduction was made from his / her pay for the month of |
| | |
| | Dated |
| | Dated For Rs |
| | (Rupeesonly)of |
| | Treasury. The amount of deduction being |
| | Rs(Rupees |
| | only) and recovery on account of Refund of advance of Rs |
| | (Rupeesonly). |
| 1. | Certified that he/ she was neither sanctioned any temporary advance or any final withdrawal from his / her Provident Fund Account during the 12 |

Or

or thereafter

months immediately preceding the date of his/ her quitting service under the Government of Assam proceeding for Leave preparatory to retirement

Certified that the following temporary advances/ final withdrawal/ final withdrawal as 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 / proceeding on leave preparatory to retirement or thereafter.

| | | Amount of Advances/ | Date | Vouc | cher Number |
|----|-----------------------|--|--|---|---|
| | | Rs (in words) | | | |
| | | Rs (in words) | | | |
| | | Rs (in words) | | | |
| 5. | wi im Go the | ertified that the amount was thdrawn from his/ her Provide mediately preceding the decovernment of Assam/ proceed ereafter for payment of Insurcolicy. Amount of Advances/ Date | ent Fund Acc ate of his/ eding on lear | count during ner quitting ve preparat | the twelve months service under the ory to retirement of purchase of a new |
| | | Rs (in words) | | | |
| | | Rs (in words) | | | |
| | | Rs (in words) | | | |
| 6. | | ertified that no demands / foll covery. | owing demo | nds of Gove | ernment are due foi |
| 7. | pe de otl | ertified that he/ she has not re ermission of the State Govern epartment of the State Gover her State Government or und any State Government/ Cen | nment to tal nment or un der a body | ke an appo der the Cen corporate o | ointment in another atral Government or |
| | | | Signature | of the Heac | of the Department |

HEIGHT AND IDENTIFICATION MARK OF THE APPLICANT

(Name of Pensioner and retiring rank)

| 1 | Height | |
|----|--------|--|
| Ι. | HEIGHL | |

2. Identification mark :

Attested By

HEIGHT AND IDENTIFICATION MARK OF THE APPLICANT

(Name of Pensioner and retiring rank)

1. Height :

2. Identification mark :

Attested By

DESCRIPTIVE ROLL OF THE APPLICANT

(To be submitted in triplicate)

| 1 | Name | |
|---|---|--|
| 2 | DATE OF BIRTH (BY CHRISTIAN ERA) | |
| 3 | HEIGHT | |
| 4 | MARK OF IDENTIFICATION | |
| 5 | PERMANENT RESIDENTIAL ADDRESS SHOWING VILLAGE STREET, LANE, PINCODE, POLICE STATION, DISTRICT AND STATE | |

Date Attested By Signature of pensioner

FAMILY DESCRIPTIVE ROLL OF THE APPLICANT

(To be submitted in triplicate)

| Sl No | NAME OF THE MEMBER OF THE FAMILY | RELATIONSHIP WITH THE EMPLOYEE | Date of Birth | HEIGHT | MARK OF IDENTIFICATION | PERMANENT ADDRESS |
|----------|-------------------------------------|--------------------------------------|------------------|--------|---------------------------|----------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |

Date Attested By Signature of pensioner

