

NORTH CENTRAL RAILWAY

Application for Advance from S.R.P.F. Final/Temp. Withdrawal in Term of

Railway Board's letter No. (E)III 84/PF/1/7 Dated May 11, 1984

1. Name of Subscriber :
2. (i) PF Account No. :
- (ii) Bill Unit No. :
- (iii) Ledger Folio No. :
3. Designation :
4. (i) Date of Appointment :
- (ii) Date of Retirement :
- (iii) Basic Pay :
5. Balance at credit of subscriber on the date of application as below
 - (i) Closing Balance as per statement for the year.....
 - (ii) Credit from to Subscription Rs.....
 - (iii) Refund Advance/Advances.....
 - (iv) Withdrawal during the period fromto
 - (v) Net Balance at credit Rs.....
6. Amount of Advance taken on date of Sanction. Balance outstanding Rs.
 - (i) :
 - (ii) :
7. Amount of Advance required :
8. (a) Purpose for which advance is required :
- (b) Rules under which the request is covered :
- (c) If the advance is sought for house building etc. for which information may be given:
 - (i) Location and measurement of the plot :
 - (ii) Whether the plot is a free hold or on lease :
 - (iii) Plan of construction :
 - (iv) If the Flat of Plot being purchased is :
 - from a H. B. Society, The name of the :
 - Society, the location, measurement etc. :
 - (v) Cost of construction :
 - (vi) If the purchase of Flat is from ADA or any Housing Board, the location, dimension etc.:

(d) If the advance required is for education of children, following details may be given:

- (i) Name of Son/Daughter :
- (ii) Class and Institution/College where studying :
- (iii) Whether a day scholar or a hostler :

(e) If the advance is required for treatment of ailing family members following details may be given :

- (i) Name of the Patient and relationship :
- (ii) Name of the Hospital/Dispensary/Doctor :
- (iii) Whether reimbursement available or not where the patient is undergoing treatment :
- (iv) Whether Outdoor /Indoor patient :

Note: In case of advance under column 8 (c) to 8 (e) no certificate or document would be required.

9. Amount of consolidated advance (item 6 & 7) and number of the monthly installments in which Rs. consolidated advance is proposed to be repaid in..... installments.

10. Full particulars of pecuniary circumstances
of the subscriber justifying application for the
Temporary withdrawal

I certify that the particulars given above are correct and complete to the best of my knowledge and belief and nothing has been concealed by me.

Signature of the Applicant.....

Name of Applicant.....

Designation.....

Office / Department.....

Recommendation of Branch Officer Date.....

(Office Use Only)

Sanctioned by at PP in file No. TA/ALD/Admn./PF
withdrawal on date Pay Order No. dated.

Rs.