FORM 'B' ALL FUND (NON-GAZETTED/GAZETTED OFFICERS). FORM OF APPLICATION FOR FINAL PAYMENT OF BALANCE IN THE FUND ACCOUNT

То	1)	The PCDA HQRS (FR Section) 'G' BLOCK NEW DELHI – 110 011.	2)	The PCDA (Pay – II/VI), 'G' Block, NEW DELHI-110 011			
Sir,							
I am due to retire/voluntary retirement/having retired/have proceeded on leave preparatory to retirement for months/have been discharged/dismissed/have resigned etc. finally from Govt. Service and my resignation has been accepted with effect from (FN/AN).							
2. I have not opted for the continuation, retention of my GP Fund money in the fund. I therefore, requested that arrangement may kindly be made to pay the entire amount at my credit with interest due under the rules.							
				OR			
3. I have opted for the continued retention my fund money in the fund and my option has been forwarded vide letter No dated is attached. I request that arrangement may kindly be made to pay me a sum of Rs							
4. My GPF Account No. is I desire to receive payment through the Head of my office in which I last served viz., CAO/A-3, Ministry of Defence or through the Treasury/Sub treasury Officer/Accountant General (nearest to the place of my residence viz., (particulars of my personal personal)							
photo	grap	<u> </u>		in Service Records) specimen signature and copies of at desired through Scheduled Bank) duly attested by the			
5. releas		e undermentioned life insur	ance polic	cies financed by me from my fund account may be			
	<u>S.N</u>	No Policy No.	<u>Name</u>	e of the Company Sum Assured			
	1.						
	2.						
	3.						
Static		: New Delhi		Yours faithfully			

FORM 'B' ALL FUND (NON-GAZETTED/GAZETTED OFFICERS). FORM OF APPLICATION FOR FINAL PAYMENT OF BALANCE IN THE FUND ACCOUNT

(FOR USE BY THE HEAD OFFICE)

Forwarded to the CDA HQs, Pay Section, New Delhi for necessary action and onward transmission to the CDA(Funds), New Delhi.

ti dii biii	instron to the C	Drift anas), riew Ben							
	2. The GP Fund Account No. of Shri/Smt/Km (as verified from our records), is								
3. He/She has finally retired/will retire w.e.f (AN/FN) proceeded on leave preparatory to retirement for months/has been discharged/dismissed/has resigned finally form Govt. Service and his resignation has been accepted from (AN/FN)									
4. The last fund deduction was made from his/her pay in this office Bill No dated the amount of deduction being Rs for subscription and Rs for recovery on account of refund of advance.									
5. Amount actually recovered as GPF Subscription and on account of refund of advance (if any) during the last 6 months are as follows:-									
	<u>S.NO</u>	Bill No. & Date	Month	Subs	Refund	Dv No.			
	1.								
	2.								
	3.								
	4.								
6. Certified that he/she was neither sanctioned any temporary advance nor final withdrawal from his GPF A/C during 12 months immediately preceding the date of his/her quiting service/proceeding on leave preparatory to retirement or thereafter; OR									
Certified that the following temporary advance/final withdrawals were sanctioned to him/her and drawn from his/her GPF Account during the 12 months preceding the date of his quitting service/proceeding on leave preparatory to retirement : -									
	S.NO 1.	Nature of withdraw	<u>val</u>	<u>Amount</u>	<u>Date</u>	Bill No.			
	2.								
	3.								
	4.								

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	Certified that no and the during 12 months,	immediately prece	eding the date of	f his quiti	ng service/pro	oceeding on leave			
prepar	atory to retirement or S.No Police	v No & Name of C	_	_	Date	Bill No.			
8.	He/She has not opted for the continued retention of his GPF money in the Fund.								
been f	He/She has opted for convarded vide this or ed.								
9.	Date of commencement of his/her continuous service								
10.	Date of joining the Fund								
11.	Date of Birth								
	Whether retired from d his control, specifying	-		nd less th	an 15 years,	service for causes			
	(In all such cases reference to the No. and date of competent authority's decision to be cited No. and date of Unit's letter under which sanction for the same was applied for to be stated) OR Note (1) If discharged/resigned on account of ill-health, certificate from the Competent Medical Authority to be furnished.								
	OR Whether the discharge/resignation/compulsory retirement was for causes within his control.								
13.	Whether removed/dismissed for inefficiency or misconduct. If so, the No. and date of Unit's er under which sanctions for the same was applied for to be stated.								
14.	It is certified that no	demands/following	demands of Gov	t. are due	for recovery.				
	Particulars of Govt. Dues	Amount of Recovery		necessary	tter under whi recovery of r	<u>ch</u>			
STAT	<u>ION</u> :			Б. Т.	G (T) 1				
DATE	ED:			For Jt.	Secy (T) and	CAU			
<u>No.</u>									