

FORMS

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Pro forma for application for withdrawal from Provident Funds

Ministry of

Department of/ Office

Application for withdrawal from

(Here enter the name of the Fund)

1. Name of the subscriber :
2. Account Number (with departmental suffix) :
3. Designation :
4. Pay :
5. Date of joining service and the date of super-annuation :
6. Balance at credit of the subscriber on the date of applicaton as below—
 - (i) Closing balance as per statement for the year :
 - (ii) Credit from..... to on account of monthly subscription :
 - (iii) Refunds made to the Fund after the closing balance, *vide* (i) above :
 - (iv) Withdrawal during the period from To :
 - (v) Net balance at credit on date of application :
7. Amount of withdrawal required :
8. (a) Purpose for which the withdrawal is required :
- (b) Rule under which the request is covered :
9. Whether any withdrawal was taken for the same purpose earlier. If so, indicate the amount and the year :
10. Name of the Accounts Officer maintaining the Provident Fund Account :

Date :

Signature of Applicant

Name

Designation

Section/Branch