

Department of Telecommunications
Office of the Controller of Communication Accounts, H.P. Circle, Shimla.

(Form of Application for Final Withdrawal from Provident Fund)

1. Name of the Subscriber :
2. Accounts No. :
3. Designation :
4. Pay :
5. a) Date of joining Service :
b) Date of Superannuation :
6. Balance at credit of the subscriber on
the date of application as below :
 - a) Closing Balance as per statement :
for the year
 - b) Credit from to :
on account of monthly subscriptions
 - c) Refund made to the fund after the :
closing balance vide (a) above
 - d) Withdrawal during the period :
from to
 - e) Net balance at credition the 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 amounts and year
10. Name of Accounts Officer maintaining the :
provident fund accounts

Signature of Applicant:

Name :

Designation :

Section :

SANCTION

No. :

Dated at SML. the

Section of the CCA, H.P. Circle, Shimla is hereby accorded to the final withdrawal of Rs..... (.....)
under Rule from his GPF Accounts No.

Signature of Sanction Authority

Copy Forwarded to :-

1. The A.O., CCA, H.P. Circle, Shimla. He will please issue necessary payment authority for the withdrawal.
2. Pay Bill Clerk, O/o the CCA, H.P. Circle, Shimla for information. He should ensure that the application complies with the conditions laid down in Rule 16(2) within the period specified in 3 below from the date of payment and admit his report accordingly.
3. Application for information. He should comply with the conditions laid down in Rule 16(2) within the period of one month failing which action will be taken as provided in the Rules.