

In Duplicate

APPLICATION FORM FOR FINAL PAYMENT OF BALANCES
IN THE IGNCA CONTRIBUTORY PROVIDENT FUND

[Date of appointment in IGNCA _____]

To,

The Member Secretary
I G N C A
Janpath
New Delhi

(Through Director, Sutradhara)

Sir/Madam,

I am due to retire/have retired/ have been discharged/dismissed/have resigned from the service of IGNCA with effect from _____.

My Provident Fund Account No. is _____.

I request that the balances standing to my credit may kindly be paid to me.

Signature of the Subscriber

Name (in full)

Name of the Division

CERTIFICATION BY DIRECTOR (SUTRADHARA)

Forwarded to Accounts Branch for payment.

1. Certified that Shri _____ has ceased to be in the employment of IGNCA with effect from _____ on account of retirement/ discharge/ dismissed/ resignation.
2. It is certified that no recoveries (or following recoveries) for liabilities incurred by the subscriber to IGNCA are to be made.

Signature of Director
(Sutradhara)

C.A.O.