FORM PF. 5

(See Statute 16)

Application for Closure of Provident Fund Account

1. Name of subscriber and Account Number :

2. Designation :

3. Office in which he/she is working/worked last :

4. Date of quitting service :
   Whether retirement/superannuation/ discharge/dismissal/resignation/death

5. (a) Month and date on which the last Provident Fund deduction was made :

   (b) The amount of last fund deduction
   - i) Subscription Rs. :
   - ii) Refund of Advance Rs. :
   - iii) Details of the Bill in which last fund deduction made :

6. Details of temporary advance/Non-refundable advance drawn during the 12 months proceeding the application
   Amount of advance : (1) (2) (3)

   No. and date of sanction :
   Date of drawal :

7. Whether personal marks of identification, left hand thumb and finger impressions and specimen signature in duplicate, duly attested by an officer of the University/ a Gazetted Officer of the State Government have been furnished :

8. A. In the event of death of a subscriber before making final disbursement of the PF amount, furnish also :

(a) Date of birth of the subscriber :

(b) Date of his/her first appointment in the University service :

(c) Date of death :

(d) Whether proof of death in the form of a death certificate issued by the Municipal authorities or other competent authorities is available. (This proof of death need be insisted upon only in cases of doubt) :

(e) Whether a valid nomination executed by the subscriber in accordance with the Statutes exists. (If so, furnish the age(s) and name(s) of the nominee(s) and his/her/their relationship to the subscriber :

(f) In the case of a subscriber who sent in his/her nomination while unmarried, whether he/she has acquired a family after the submission of the first nomination and whether he/she has submitted a fresh one thereafter :

B. If there is no valid nomination, furnish a list of member(s) of the subscriber's family as defined in Statute 2 of the SSUS Provident Fund Statutes surviving on the date of death of the subscriber to whom the PF money is payable together with his/her/ their name(s), age(s) and respective :

relationship to the subscriber. (In the case of daughter(s), indicate whether she/they is/are married or unmarried. If married, furnish whether her/their husband(s) is/are alive)

C. In cases where there is no valid nomination and where no member of the family of the subscriber as defined in Statute 2 of the SSUS Provident Fund Statutes survives, furnish the name(s) of the person(s) to whom the name(s) of the person(s) to whom the PF money is payable (to be supported by letters or probate or succession certificate etc.) :

DECLARATION

I, ... do hereby declare that the particulars mentioned above are true. I further declare that I do no accept the balance standing to my credit in the Sree Sankaracharya University of Sanskrit Provident Fund Account No..... communicated to me by the Accounts Officer in his annual account statement for the financial year ended on the 31st March 19 (here enter the financial year immediately proceeding the date of his quitting service), for reasons attached.

Dated signature of the subscriber/
Nominee(s) other claimant(s)
full home address

Station :
Date :

(To be filled in by Head of Office/Controlling Officer)

CERTIFICATES

(1) Certified after due verification with reference to the records available in my office that Sri/Smt..... subscriber to PF Account No..... will be retiring/has already retired/has been discharged/dismissed/removed/has resigned finally from University Service with effect from ..... F.N./A.N. and his resignation has been accepted. He/She has drawn on ..... his/her salary for the month immediately preceding the month of retirement.

(2) Certified further after the verification with reference to the records available in any office that no temporary advance/non refundable withdrawal has sanctioned to the subscriber from his/her Provident Fund Account during the 12 months immediately preceding the date of his/her application for closure of the account/quitting service. Certified also after due verification with reference to the records available in my office that the following temporary advance(s)/non-refundable withdrawal(s) was/were sanctioned to the subscriber from his/her Provident Fund Account during the twelve months immediately preceding the date of his/her application for the closure of PF Account/quitting service.

Sl. No.	Amount of temporary Advance Rs.	Amount of non-refundable withdrawal Rs.	No. & Date of sanction	Date of withdrawal	Voucher No.
1					
2					
3					
4					

(3) Certified that the last fund deduction was made from his/her pay for the month of ..... drawn in this Office Bill No..... and dated ..... for Rs..... (Rupees ....) the amount of deduction being Rs..... and recovery on account of refund of advance being Rs.....

(4) Certified also that the entries against columns 1,2,3 and 6 furnished by the subscriber/nominee(s)/claimant(s) have been verified by me with reference to my office records and found correct.

(5) Certified that the entry against column 8B furnished by the claimant(s) has been verified by me and found to the best of my knowledge.

Signature of Head of Office

Station :
Date :

(Dated countersignature of the Controlling Officer)

FOR OFFICE USE

Authorisation for final withdrawal

An amount of Rs..... (Rupees .....) representing the residual balance of the deposits (vide details below) in the SSUS PF Account No..... with interest calculated thereon upto ..... is sanctioned to be paid to Sri..... as final withdrawal/Sri..... the nominee/nominees of the subscriber at the rate of ..... as per the nominations made out by the subscriber as final payment from the account.

Accounts Officer

1. Balance as per credit card/records:-
   (a) Opening balance as on 1st April :
   (b) Deposits during the year :
   Total :
   (c) Withdrawals during the year :
   (d) Balance upto ..... :
   (e) Interest upto ..... :

2. Total Net Balance :

The form shall be carefully filled in by the subscriber as soon as his salary for the month immediately preceding 3 months in which he retires or proceeds on leave preparatory to retirement on superannuation is received by him and submitted to the Head of Office/Controlling Officer.

In the case of a subscriber who is no more, the Head of the Office or Controlling Officer shall obtain from the nominee(s) or in his/her/their absence from the other claimant(s) immediately after the death of the subscriber, an application for closure of the account and to forward it with necessary documents to the Accounts Officer within a fortnight of the receipt of the application. The Departmental Officers will give such assistance to the nominees or claimants as is necessary to fill in the form of application properly.

If the application is submitted by a nominee or other claimants, the second sentence in the declaration may be scored off.

If the subscriber has not received the annual account statement for the financial year immediately preceding the date of his quitting service, he may indicate here the year of the latest annual account statement received by him. In case where the subscriber does not accept the balance communicated to him, he should furnish briefly in a separate letter the reasons for not accepting the balance.

This certificate is not necessary in cases other than resignation.

Left Hand Thumb and other fingers impression and specimen signatures in respect of …….

……

1. Thumb 2. Forefinger 3. Middle Finger 4. Ring Finger 5. Little finger

Specimen Signatures

1

2

3

Certified that the above person has put the thumb and other fingers impression and signature as above before me on …….

Attested by……...