

**FORM OF APPLICATION FOR FINAL PAYMENT OF PROVIDENT FUND TO
NOMINEE / OTHER CLAIMANT AFTER DEATH OF SUBSCRIBER**

THE ACCOUNTS OFFICER
Jamia Millia Islamia
New Delhi- 110 025.

Sir,

It is requested that arrangements may kindly be made for the payment of the accumulations in the _____ Provident Fund Account of Ms / Mr _____. The necessary particulars required in this connection are given below:

1. Name of the Government Servant(with Emp ID) : _____
2. Date of Birth : _____
3. Designation : _____
4. Date of Death : _____
5. Proof of death certificate : _____
6. Provident Fund Account CPF/GPF : _____
7. Amount of Provident Fund Money (if known) : _____
8. Details of the nominees alive on the date of Death of the subscriber.

Name of Nominee/Claimant	Relation with Subscriber	Share (%)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Particulars of my Personal Marks Of Identification, left hand thumb and finger impressions (in the case of illiterate subscriber) and specimen signature (in the case of literate subscribers) in duplicate, duly attested by a Gazetted Officer of the Government, are enclosed.

I am also enclosing Form of Demands / No Demands Certificate signed by the departments concerned.

Yours faithfully,

DATE _____

PLACE _____

SIGNATURE _____

FULL NAME _____

ADDRESS _____

PHONE/MOBILE NO. _____

EMAIL: _____

FORWARDED BY HOD

SIGNATURE & DATE WITH SEAL

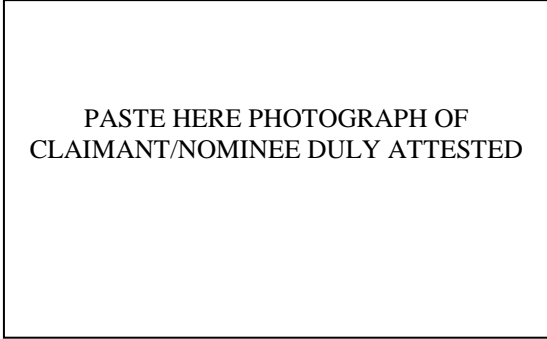
ATTESTED SPECIMEN SIGNATURE OF MRS/MR _____ :

SIGNATURE OF NOMINEE : _____
FULL NAME OF NOMINEE : _____
RELATIONSHIP WITH EMPLOYEE : _____
DEPARTMENT & DESIGNATION : _____

SIGNATURE OF ATTESTING OFFICER: _____
(NAME & DESIGNATION WITH SEAL: _____
OF ATTESTING OFFICER) _____

=====

ATTESTED PHOTOGRAPH OF MRS/MR _____ :



SIGNATURE OF ATTESTING OFFICER: _____
(NAME & DESIGNATION WITH SEAL: _____
OF ATTESTING OFFICER) _____