## APPLICATION FOR WITHDRAWAL FROM PROVIDENT FUND

1.	Name of the Subscriber	
2.	Account Number	
3.	Designation (With departmental Suffix)	
4.	Pay	
	Date of Joint Service and the date  of Super-annuation  Balance at credit of the subscriber on the date of application as below:	
	(i) Closing balance as per statement	
		on account of monthly subscriptions
	(iii) Refunds made to the fund after the closing balance, vide ((i) above	
	(iv) Withdrawal during the period from	om to
	(v) Net balance at credit on date of a	application
7.	Amount of withdrawal required	
8. (a) Purpose for which the withdrawa		required
	(b) Rule under which the request is cover	ered
9.	. Whether any withdrawal was taken for the same purpose earlier.  If so, indicate the amount and the year	
10.	Name of the Account Officer maintaining the Provident Fund Account	ng 
		Signature of the Applicant
		Name
		Designation
Date :		Section/Branch