

Application for withdrawal from Provident Funds

Department of/Office

Application for withdrawal from.....
(Here enter the name of the Fund)

1. Name of the subscriber
2. Account Number
3. Designation
4. Pay
5. Date of joining service and the date of
Superannuation
6. Balance at credit of the subscriber on the date of
application as below-
 - (i) Closing balance as per statement for the
year..... ..
 - (ii) Credit from.....to.....on
account of monthly subscriptions
 - (iii) Refunds made to the Fund after the closing
balance, vide (i) above
 - (iv) Withdrawal during the period from
.....to..... ..
 - (v) Net balance at credit on 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 amount and the
year

Signature of the Applicant

Name.....

Designation.....

Dated: