

Form PF No. 10*(See rule 55)*

(to be submitted in duplicate)

**Application for Final Payment to the nominee(s) or any other claimants
where no nomination subsists**

To

The Principal Accountant General (A&E),
Haryana, Chandigarh.
(Through the Head of Office)

Sir,

It is requested that arrangements may kindly be made for the payment of the accumulations in the GPF account of Sh./Ms _____.

The necessary particulars required in this connection are given below:-

1	Name of the subscriber	
2	Date of birth	
3	Post held by the subscriber	
4	Date of death or disappearance	
5	Proof of death in the form of a death certificate: (issued by the municipal authorities, etc.)	
6	In case of disappearance, date of lodging of report in Police Station	
7	If untraceable, the date of report of Police (copy enclose)	
8	General Provident Fund account number of subscriber (Complete)	
9	Amount at the credit of the subscriber at the time of his death, if known	
10	Details of the nominees alive on the date of death of the subscriber, if a nomination subsists:	

Sr. No.	Name of the nominee	Relationship with the subscriber	Share of the nominee	Remarks	
1					
2					
3					
11	In case the nomination is in favour of person other than a member of the family, the details of the family, if the subscriber subsequently acquired a family:				
Sr. No.	Name of the nominee	Relationship with the subscriber	Age on the date of death	Remarks	
1					
2					
3					
12	In case no nomination subsists, the details of the surviving members of the family on the date of death of the subscriber. In the case of a daughter or a daughter of a deceased son of the subscriber, married before the death of the subscriber, it should be stated against her name whether her husband was alive on the date of death of the subscriber:				
13	Sr. No.	Name of the Nominee	Relationship with the subscriber	Age on the date of death	Remarks
1					
2					
3					
14	Name of the Natural/legal guardian: (in case the amount is due to a minor child)				

15	If the subscriber has left no family and no nomination subsists, the name of person(s) to whom the Provident Fund money is payable (to be supported by Letter of Probate or Succession Certificate etc.)																					
16	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Sr. No.</th> <th style="width: 35%;">Name of the Nominee</th> <th style="width: 20%;">Relationship with the subscriber</th> <th style="width: 20%;">Address</th> <th style="width: 20%;">Remarks</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Sr. No.	Name of the Nominee	Relationship with the subscriber	Address	Remarks	1					2					3					
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1																						
2																						
3																						
17	<p>The payment is desired through the office of _____/through the _____ Treasury/Sub-Treasury. In this connection the following documents duly attested by a Gazetted Officer/Magistrate are attached:-</p> <p>Personal marks of identification</p> <p style="margin-left: 20px;">(i) Left/Right Hand thumb or finger impressions (in the case of illiterate claimants)</p> <p style="margin-left: 20px;">(ii) Specimen signatures in duplicate (in the case of literate claimants)</p>																					
18	Any other information																					

Yours faithfully,

Dated _____

(Signature of claimant)

Name: _____

Address: _____

(For Use of Head of Office)

1. Forwarded to the Principal Accountant General (A&E), Haryana for necessary action. The particulars furnished above have been duly verified.
2. The General Provident Fund Account number of Sh./Ms. is_____.
3. He/She died on_____. A death certificate issued by the Municipal authorities has been produced (copy enclosed).
4. The last deduction for GPF account of the deceased subscriber was made from his pay for the month of_____ drawn vide Treasury Voucher No._____ dated_____ in this Office Bill No._____, dated_____ for Rs._____ (Rupees_____.) Treasury Challan No._____ dated_____ Treasury, the amount of deduction being Rs._____ as subscription and recovery on account of refund of advance Rs._____.
5. Certified that he/she had taken the following advances in respect of which _____ installment of Rs. _____ are yet to be recovered and credited to the GPF account. The details of the withdrawals granted to him/her during the twelve months immediately preceding the date of his/her death are also indicated below:-

Sr. No.	Amount of Advances/ Withdrawals	Place of encashment	Voucher Number and Date
1.			
2.			
3.			
4.			

6. Certified that the claimant submitted the application on _____ date _____ month _____ year.

Dated: _____

(Signature of the Head of Office)
