

Application for Non-refundable withdrawal from the Kerala Headload workers welfare Board Employees Contributory Provident Fund

1. Name and designation of the subscriber :
2. Pay and Dearness allowance :
3. Provident Fund Account No. :
4. Date of retirement on super annuation :
5. Total service (in years) under the Board on the date of application :
6. Object of the non-refundable withdrawal (if the withdrawal is required for meeting the expenditure in connection with the) :
 - i. Higher education of any child dependent on the subscriber, specify the nature and duration of the course :
 - ii. Marriage of a son or daughter or any other female relative dependent on the subscriber :

Indicate also the month in which the marriage take place (in case of a dependent, specify also whether the subscriber has any daughter)
 - iii. Illness of the subscriber or any other person actually dependent on him (mention the nature of illness also) :
 - iv. Acquisition of a house and/or site :

Furnish in whose name, (subscriber and/or his wife's it will be acquired and whether it is for the actual residence of the subscribe and/or his family)
 - v. Construction reconstruction, repair, etc., of a house state whether the site on which the house is proposed to be constructed, or the site on which the house proposed to be reconstructed, altered etc., is situated, is owned by the subscriber and/or his wife and whether the house is for the actual residence of the subscriber and/or his family) :

If the withdrawal is required for repayment of a loan taken for the

- i. Marriage of a son or daughter of any female :
relative dependent on him, specify the
amount of loan taken on account of been
celebrated
 - ii. Construction of a house or allied purposes :
(State the amount of loan expressly taken for
the purpose, the balance outstanding against
it and in whose name (subscribers and/or his
wife's) the ownership of the house and/or
site is vested
7. Amount of the loan, if any, taken by the :
subscriber and/or his wife from the Board under
any scheme sponsored by them for the grant of
house construction loans, and the number and
the date of the orders/proceedings in which
sanction was issued therefore. (This column
need be filled in only if the subscriber proposes
to make a withdrawal for houses to make a
withdrawal for house to make a withdrawal for
house construction or allied purpose).
8. Amount of the non-refundable withdrawal :
proposal (both in figures and words)
9. a. Whether any non-refundable withdrawal was :
made by him from the fund previously for
the same or a different object and, if so, fur-
nish the details thereof.
- b. If any withdrawal was made as mentioned in :
(A) above
- c. (State whether he had submitted the utilisa- :
tion certificate in respect of that withdrawal
to the appropriate authority within the pre-
scribed time limit. If the certificate was not
submitted within the said period, furnish the
reasons thereof.)
10. Special circumstances which necessitate the :
withdrawal (this column need be filled if the
amount proposed to be withdrawn exceeds half
the amount at the credit of the subscriber in the
fund or six months pay, whichever is less, or if
the withdrawal requires sanction in relaxation of
any of the provisions in the rules).

CERTIFICATE

1. It is certified that I have verified the particulars furnished by the subscriber against columns 2,3,4,5,7 and 9 with reference to the relevant records in my office and that they are found to be correct.
2. It is also certified that I have caused enquiries to be made about the statement contained in the application regarding the object of the proposed withdrawal and that I am satisfied that it is bona fide.
3. It is further certified that there are no liabilities outstanding against the subscriber to Board which have to be recovered from him.

Station : _____

Date : _____

Dated signature of the Head of the office
Dated countersignature of the Head
of Department

VERIFICATION REPORT **

1. Total amount representing the accumulation at the credit of the subscriber in the Fund as on _____
2. Amount admissible under the rules.
3. Rule(s) under which the sanction permitting the withdrawal by the subscriber is to be accorded.
4. Any other facts which require special consideration

Finance Officer/head of office

Endt. No _____

Dated. _____

To _____

The _____

** In respect of the subscriber who is not an Officer who draws own pay bill, the verification report shall be furnished by the head of office with reference to the latest annual account slip issued by the Finance Officer and the Office copies of the pay bills, etc., relating to the subsequent period.

But the application of a subscriber who is an officer who draws his own pay bill shall be forwarded to the finance Officer for verification.

DECLARATION

I _____ do hereby declare that the above statements furnished by me are true and that I agree to abide by the Kerala Headload Workers Welfare Board Employees Contributory Provident Fund Rules, as amended from time to time.

Place :

subscriber

Dated signature of the subscriber

With full office address.

(To be filled in by the head of Office)

I recommend for sanction a non-refundable withdrawal of Rs. _____ (Rupees

_____ Only) by the subscriber.