Death Case

The Comptroller, LUVAS, Hisar.

(Through Proper Channel)

Sir,

It is requested that arrangements may kindly be made for payment of the accumulation in the General Provident Fund/Contributory Fund Account No. of Dr./Sh./Smt._____.

Necessary particulars required in this connection are given below:-

- 1- Name of the University employee:
- 2- Date of Joining:
- 3- Date of Birth:
- 4- Date of Death:
- 5- Post held by the University employee at the time of death:
- 6- Proof of death in the form of death certificate issued by the Municipal authority etc.:
- 7- a)-GPF Account No.:_____

(b)-CPF Account No.:

- 8- The amount of GPF/CPF money standing to the credit of the subscriber at the time of his/her death is Rs._____ as per annual statement issued by Comptroller's office.
- 9- Details of nominee alive on the date of death of the subscriber (if nomination subsists) are as under:-

Name of nominee	Relation with	Date of birth of	Share of the
	Subscriber	nominee	nominee

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- 10- In case no nomination subsists the details of surviving member(s) of the family on the date of the subscriber are as under:
 - i) Name
 - ii) Relationship with the subscriber
 - iii) Date of birth

Not for para 9 and 10 above.

In case of minor nominee the claim should be supported by indemnity bond or guardianship certificates as the case may be.

- 11- If the subscriber has left no family and no nomination subsists (the names of persons to whom the GPF/CPF money is payable should be supported by letter of probate or succession certificate etc.):
 - i) Name
 - ii) Relationship with subscriber
 - iii) Date of birth
 - iv) Address
 - v) Religion of the claimants.
- 12- The following documents duly attested by the Gazetted Officer/Magistrate are also attached.
 - i) Personal marks of identification
 - ii) Left/Right hand thumb and finger impression (In case of illiterate claimants).
 - iii) Specimen signatures in duplicate (In case of illiterate claimants).
 - iv) Photograph in duplicate.

Yours faithfully,

Signature of claimant

Name:_____

Date:

Place:

Address:_____

Office of_____

Endst. No._____

Dated:_____

Forwarded to the Comptroller for necessary payment.

- 2- Certified that the claimant is the rightful nominee/legal heir to receive the outstanding amount of GPF/CPF Account No.______ in the name of Dr./Sh./Smt._____ for Rs._____.
- 3- Signatures and photographs of the claimant are duly verified.
- 4- The entry of death has been made in the service book on Page No._____ and duly verified by the Head of Department.
- 5- Has the above entry has been got verified from RSA under full signatures ?
- 6- The date of bill from which last GPF/CPF deduction was made is
- 7- Details of recoveries if any duly verified from Audit are as under:-
- 8- No dues Certificate from others concerned (i.e. Librarian, DEO, Secretary, Faculty Club/Community Centre) are at pages______ of personal file.
- 9- It is certified that nothing is due against the subscriber except Rs._____ as mentioned above.

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- 10- The following documents are sent herewith:
 - i) Service Book
 - ii) Personal file (page 1 to
 - iii) Death Certificate
 - iv) Nomination
 - v) Documents as mentioned under para-12 of the applicant.

Signature of HOD/Office

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