LALA LAJPAT RAI UNIVERSITY OF VETERINARY & ANIMAL SCIENCES, (LUVAS), HISAR

APPLICATION FORM FOR THE REFUNDABLE ADVANCE OUT OF GPF/CPF

1-	Name of the Subscriber (In capital letters)	:	
2-	Designation & Office/Deptt. in which Working	:	
3-	a) GPF Account No.	:	
	b) CPF Account No.	:	
4-	Pay (Basic Pay+ Grade Pay +NPA if any)	:	
5-	Date of appointment	:	
6-	Amount of advance required (In words also)	:	
7-	Purpose of advance (give documentary Proof, if required as per rules/standing Instructions)	:	
8-	Name of Children (If the advance is needed for celebration of obligatory Ceremonies of any child/children)	:	
9-	Date of Ceremony	:	
11 12 i)	 a) Has agreement deed of quotation been attached? b) What is the entitlement for type of Conveyance? c) Clause of GPF/CPF under which applied for c) Certified that: The amount will be spent on the purpose not so spent will be refunded for the ceremony is obligatory as per my face. 	alongw	ith loss of interest.
	ated:		(Signature of the Applicant) Mobile No
(F	or use in the Department		
1-	Has a period of twelve complete month passed since the repayment of the previous advance(s) alongwith loss of interest. If not, please indicate if any recovery of any advance is outstanding	У	
2-	If the reply to second alternative of item	1	

No. 1 above is in the affirmative, give the following information.

(i)	Months in which the last Advance(s) was/were drawn and the purpose(s) for which the advance(s) was/were taken	:				
(ii)	Amount of last advance(s)	:				
(iii)	No. of instalments in which the	:				
	Advance(s) was/were repayable.					
(iv)	Balance including loss of interest	:				
3-	yet to be repaid. (a) Is it special sanction?	•				
	(b) If so, what is the justification?	•				
	Clause of GPF/CPF under which	:				
	advance sanctioned. Has the latest list of family members with due date of birth been passed in					
		:	- <u></u> -			
	the service book?					
	Certified that:		vatify the advance			
(i) (ii)	The applicant's pecuniary circumst The details given by the applicant h	-	-			
` '	Cheque Cheque/R.T.G.S./N.E.F.T. de		en vermed.			
	Name of Beneficiary	:				
` '	Account No.	:				
(c) I	FS Code	:				
` '		ase attach copy of Bank Passbook/cancelled cheque)				
	(For use in Comptro	oller's (Office)			
(i	No is Rs		·			
(i	ii) Amount of advance admissib	ole Rs.	(In words			
	Rs	Rs) and the Advance is admissible 50%/75% of balance in his/her credit or 3/6 month basic				
(3	pay or actual price or Rswhichever is less). ii) Prescribed conditions have been fulfilled and request is covered under					
(1	clause no					
(i						
`	Rs(In words	Rs				
	to Dr./Sh./Smt	wł	nich together with interest of			
	Rs will be re-	covered	in equal monthly instalments			
,	of Rs each per m					
7)	v) Cheque/R.T.G.S in favour of					
	Dealing Hand					
	Assistant Registrar					
	Comptroller					