Application for Allotment of New General Provident Fund Number (in reference to OPS Notification No.3-24/76-HPU(Genl)Vol-VIII dated:16-05-2023, HPU) (in reference to OPS Notification No.Fin(Pen)A(3)-1/2023 dated:04-05-2023, Govt.of H.P) (To be submitted in duplicate)

		***************************************						
1.	Name of Applicant							
2.	Designation							
3.	. Father's/Husband Name	(Covernment also)						
4	. Office to which attached	)if on deputation, state the parent Department, Government also)						
	***********************							
5	. Service to which the app	Saming to which the applicant belongs						
6	Whether the applicant is	permanent, temporary or re-employed						
	Date of Regular Appoint	tment						
•	3. Whether applicant's serv	vice is pensionable or not						
	PRAN(if any allotted to	applicant)						
	10 Employee Code							
	11 Date of Birth of the app	licant						
	12 Date of Superannuation							
	13 Basic Pay of applicant.	(Level =)						
	13. Dasio Lay of aff							
	14 Monthly rate of Subscri	iption						
	14. Monthly rate of Subscri	iption nas a family or not						
	15. Whether the applicant l	iption  that a family or not  tted by the Finance Officer						
	15. Whether the applicant l	has a family or not						
	15. Whether the applicant l	has a family or not  tted by the Finance Officer  Signature of applicant						
ate:	15. Whether the applicant I	signature of applicant  Mobile No						
ate: ace: ertifie	15. Whether the applicant I  16. Account No. to be allot  d that the applicant Sh./Smt	Signature of applicant  Mobile No						
ate: ace: ertifie gular oted C	15. Whether the applicant I  16. Account No. to be allot  d that the applicant Sh./Smt	signature of applicant  Mobile No						
ate: ace: ertifie gular oted C	15. Whether the applicant I  16. Account No. to be allot  d that the applicant Sh./Smt	Signature of applicant  Mobile No						
ate: ace: ertifie	15. Whether the applicant I  16. Account No. to be allot  d that the applicant Sh./Smt	Signature of applicant  Mobile No						
ate: ace: ertifie gular oted C	15. Whether the applicant I  16. Account No. to be allot  d that the applicant Sh./Smt	Signature of applicant  Mobile No						
ate: ace: ertifie gular oted C ate: lace:	15. Whether the applicant It  16. Account No. to be allot  d that the applicant Sh./Smt service and he/she has not y  OPS by exercising an option	Signature of applicant  Mobile No						
te: ace: ertifie gular oted C ate: ace:	15. Whether the applicant It  16. Account No. to be allot  and that the applicant Sh./Smt service and he/she has not yo  OPS by exercising an option  of DDO	Signature of applicant  Mobile No						
ate: ertifie gular oted C ate: lace:	15. Whether the applicant It  16. Account No. to be allot  d that the applicant Sh./Smt service and he/she has not y  OPS by exercising an option	Signature of applicant  Mobile No						

* FROM OF NOMINATION / REVISED NOMINATION * Acc (to be filed in duplicate)						HPU/GPF		
4	2	3	4	5	6	7	8	
Name and full address of the Nominee(s)	Relationship with the subscriber Age of the nominee(s)		*Share payable to each nominee(s)	Contingencies on the, happening of which the nomination will become invalid.	Name, address and relationship of the person(s) if any to whom the right of nominee shall	If the, nominee(s) is not a member of the family an provided in rule-2	Whether the nomination is fresh or revise	
				Decome invalid.	pass in the event of his/ her predeceasing the subscriber.	indicate the reasons		
							у.	
		A Comment of the Comm						

Dated this	uay 0ıa		
Two witness to signatures			
1. Name & addresse:-			(For use by the Estt. Branch only)
2.		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	(Deputy Registrar) Establishment.
	(	Reverse of the form)	
	Space for use by the Head	d of Office/pay or Acc	counts office.
Nomination by Shri/Smt./ Kumari_			
Date of receipt of nomination:			
	And the second		

Signature of the Subscriber_	 555		-	•
Name (in block letters)				

Designation

Signature of Head of Office/Pay & Accounts Officer NOMINATION ACCEPTED

Finance Officer, HPU.

## FORM FOR NOMINATION:

## **Instructions for the Subscribers:**

- a) The form should be filled in duplicate carefully & complete in all respect. No column should be kept unattended.
- (b) Definition of term "Family" as given in the General Provident Fund Rules is reproduced below:

## Family Means:

i) In the case of a male subscriber, the wife or wives, parents, children, minor brothers, unmarried sisters, deceased son's widow and children and where no parent of the subscriber is alive, a paternal grand-parent:-

Provided that if a subscriber proves that his wife has been judicially seperated from him or has ceased under the customary law of the community to which she belongs to be entitled to maintenance she shall henceforth be deemed to be no longer a member of the subscriber's family in matters to which these rules relate unless the subscriber subsequently intimate in writing to the Accounts Officer that she shall continue to be so regarded.

ii) In case of a female subscriber, the husband, parents, children, minor brothers, unmarried sisters deceased son's widow and children and where no parent of the subscriber is alive a paternal grand-parent.

Provided that if a subscriber by notice inwriting to the Accounts Officer expresses her desire to exclude her husband from her family in matters to which these rules relates unless the subscriber subsequently cancels such notice in writing.

Note: Child means: legitimate child and includes an adopted child where adoption is recognised by the personal law governing the subscriber.

- (c) Column-4: If only one person is nominated the word "In Full" should be written against the nominee, of more than one person is nominated, the share payable to each nominee over the whole amount of the provident fund shall be specified.
- (d) Column-5 Death of the nominee(s) should not be mentioned as contingency in this Column.
- (e) Column-6 Do not mention your name.
- 15 Drawn line across the blank space below last entry in order to prevent insertion of any name after you have signed.