FORM J

[See Rule 28(5), 39(1), (2) & (3)]

Application for Closure of General Provident Fund (Kerala) Account

	account number and reference number (as indicated in the last Annual Accounts Statement received from the Accountant General, with Section & Branch)								
2.	(a)		signation ecify whether Gazetted or Non Gazetted)	:					
	(b)	Dat	e of Birth	:					
	(c)	c) Date of joining service							
	(d)	Hor	me Address with contact number	:					
	(e)		ne subscriber is an employee of Educational Department						
		(i)	Whether the applicant is a surrendered school teacher	:					
		(ii)	Whether the applicant had opted to subscribe to the Fund after his/her 55th year	:					
3.	(a)	Offi	ice which he/she is working/worked last	:					
	(b)	Dis	trict in which the applicant works/worked last	:					
4.	(a)		e of proceeding on leave paratory to retirement	:					
	(b)		e of quitting service by rement/superannuation	:					
	(If I	ne/sh ecify	tement of option as required in ne has already quitted service otherwise whether he/she quitted service by ge, dismissal, resignation or death etc.)	:					
5.	his pro	her ceed	of 4(b) whether he/she has drawn salary for the month immediately ding the month of retirement, rnish the date of drawal of the salary	:					
6.	(a)	with incl in w	ether the Statement of deposits and ndrawals after the period, which has been luded in the latest Credit Card till the month which the Provident Fund subscription liscontinued, is furnished	:					
	(b)	and	iods, if any, during which no subscriptions I refund of advance have been recovered due to we without allowance etc.	:					

1. Name (in full) and office address of the subscriber,

	, ,	in which the last Provident was made (Also indicate the where the bill / voucher was	e name of Treasury	
	(b)	The amount of last Fund de	duction	
		(i) subscription	Rs.	:
		(ii) refund of advance	Rs.	:
	(c)	Gross amount of the bill / tr	easury vouchers	:
	(d)	Net amount of the bill / treas	sury vouchers	:
	(e)	Date of encashment of the b	oill / treasury voucher	:
8.	(a)	Whether any temporary adv him/her from his/her GPF (ke the twelve months immedia of application for closure of his/her quitting service. (if so the amount of the advance, date of sanction and the data drawal of the amount)	Kerala) Account during tely preceding the date the account on so, indicate the number and the	: :
	(b)	Whether any non-refundable sanctioned to him/her from Account during the twelve repreceding the date of applic of account on his/her quitting indicate the amount of advance of sanction and the date of the date of drawal of the amif any, amount was sanction Insurance Premium or for pethat fact should also be not	his/her PF months immediately cation for closure ng service (if so, ance, number and date drawal of sanction and aount). In both cases, ned for payment of urchase of any policy,	
9.	thu in d Sta Gaz atte	ether personal marks of iden mb and finger impressions a luplicate, duly attested by a G te Government have been fu cetted Officer, specimen sign ested by another Gazetted Off furnished.)	and specimen signature Gazetted Officer of the rnished. (In respect of a nature in duplicate, duly	:
10.		ne of the treasury/office thro ment is to be made	ugh which	:
11.	A.	In the event of death of a su final disbursement of the PI		
		(a) Date of birth of the subs	scriber	:
		(b) Date of his / her first ap in the Government serv	•	:
		(c) Date of death		: Form J

7. (a) Number and date of the bill / treasury voucher :

- (d) Whether proof of death in the form of a death certificate issued by the Municipal authorities or other competent authorities is available.
 (The proof of death need be insisted upon only in cases of doubt)
- (e) Whether a valid nomination executed by the subscriber in accordance with the rules exists. [If so, attach the nomination in original]
- (f) In the case of subscriber who filed his/her nomination while unmarried, whether he/she has acquired a family after the submission of the first nomination and whether he/she has submitted a fresh one thereafter.
- B. If there is no valid nomination, furnish a list of member(s) of the subscribers family as defined in Rule 2(c) of the GPF(Kerala) Rules surviving on the date of death of the subscriber to whom the PF money is payable together with his/her/their name(s), age(s) and respective relationship to the subscriber, with Departmental Enquiry Certificate (DEC). [In the case of daughter(s), indicate whether she/they is/are married or unmarried. If married, furnish whether her/their husband(s) is/are alive.]
- C. In case where there is no valid nomination and where no member of the family of the subscriber as defined in rule 2 (c) of the GPF (Kerala) Rules survives, furnish the name(s) of the person(s) to whom the PF money is payable (to be supported by letters of probate or succession certificate, etc.)
- 12. Whether a fresh nomination has been enclosed with the closure application(The subscriber is required to file a fresh nomination and enclose the same with the closure application)

DECLARATION

1	do hereby declare that the particulars mentioned above are
,	ot/do accept the balance standing to my credit in the G.P.F. (Kerala)
Account No	communicated to me by the Account Officer in his annual account ended on the March on the 31st March 2020 (here enter the financial yea
Station:	
Date:	Dated Signature of the subscriber/
	Nominee(s) / other claimant(s) with full home address

(To be filled in by Head of Office / Department)

CERTIFICATES

(1) Certified after due verification with reference to the records available in my office that

his/her salary fo	his/her salary for the month immediately preceding the month of retirement.								
@ Certified also that he/she has not resigned from Government Service with the prior permission of the Government to take up appointment in another department of the State Government or under the Central Government or under any other State Government or under a body corporate owned or controlled by Government or an autonomous organisation, registered under the Societies Registration Act, 1860.									
(2) Certified further after due verification with reference to the records available in my office that no temporary advance/ non-refundable withdrawal was sanctioned to the subscriber from his Provident Fund account during the 12 months immediately preceding the date of his application for closure of the account/quitting service. Certified also after due verification with reference to the records available in my office that the following temporary advance(s)/ non-refundable withdrawal(s) was/were sanctioned to the subscriber from his/her Provident Fund account during the twelve months immediately preceding the date of his/her application for the closure of PF account/ quitting service.									
Amount of temporary advance	Amount of nonrefundable withdrawal	No. and date of sanction	Date of withdrawal	Voucher No.					
1									
2									
3									
4									
5									
(3) Certified that the last Fund deduction was made from his /her pay for the month of									
-	eference to my office i			unt(s) has boon					
(5) Certified also that the entry against column 11 B furnished by the claimant(s) has been verified by me and found correct to the best of my knowledge.									
(6) Certified that the application for pension is being processed in this office/details of Pension payment order noted below are correct.									
Station:			Signature of Head	of Office/ Department					
Date:		(Dated, Counter-	-signature of the Gaze	etted Superior Officer)					
				Form J - Page: 4					

* The form shall be carefully filled in by the subscriber as soon as his/her salary for the month immediately preceding the month in which he/ she retires or proceeds on leave preparatory to retirement on superannuation is received by him/her and submitted to the Head of the Office or Department according as the subscriber is Non-Gazetted or Gazetted.

In the case of a subscriber who is no more, the Head of the Office or Department shall according as the subscriber is non-Gazetted or Gazetted obtain from the nominee(s) or in his/her/their absence from the other claimant(s) immediately after the death of the subscriber, an application for closure of the account and to forward it with necessary documents to the Accountant General within the fortnight of the receipt of the application. The Departmental Officers will give such assistance to the n ominees or claimants as is necessary to fill in the form of application properly.

- ** It applies only when payment is desired at a treasury other than the one at the District Headquarters where the subscriber served last
- *** In respect of non-Gazetted Officers, the payment will not be made through the trea sury, but only through the Head of the Office in which he/she served last
- # If the application is submitted by a nominee or other claimants, the second sentence in the declaration may be scored off.
- \$ If the subscriber has not received the annual account statement for the financial year immediately preceding the date of his/her quitting service, he/ she may indicate here the year of the latest annual account statement received by him/ her. In case where the subscriber does not accept the balance communicated to him/ her, he/ she s hould furnish briefly in a separate letter the reasons for not accepting the balance.
 - @ This certificate is not necessary in cases other than resignation.
- ** If the Head of Office forwarding the application is non-Gazetted, the application should be routed through his/her immediate Gazetted superior who shall countersign the application.
- Note: 1. In case the subscriber is a Gazetted Officer, the certificates relating to the date of retirement, details of advances sanctioned and alone certificate regarding the correctness of the entries in items 1, 2 and 3 (i.e. certificates Nos. 1, 2 and 4) also need be furnished by the Head of Department or any other authority competent to sanction temporary advances and non-refundable advances from the PF of the subscriber.
- Note: 2. Item 7 need be filled up in the case of Gazetted Officers.
- Note: 3. Certificate 3 need be filled up in the case of non-Gazetted Officers/ Nominees/ Claimants.
- Note: 4. A subscriber who wishes to avail of the facility of discontinuance of subscription under Rule 7(d) and for the withdrawal of the available balance before retirement under Rule 28(6) shall furnish the option statement against item 4(c).

Kerala Government General Provident Fund

Declaration Under Rule 117 - A

I,							
I also agree to the recovery from nave been or may be found outstanding ag	ny Pension (anticipatory / final) of any liabilities that gainst me.						
Station:	Signature:						
Date:	Name:						
	Designation:						

OPTION

[Statement as required in Rule 30(C)]

I wish to avail of facility of dis	continuance of subscription under the third
provision to Rule 10 for the withdrawal of	of the available balance in my GPF (Kerala) account
No before my retire	ment, under Rule (c).
	Signature:
	Names
	Name:
	Designation:
Date:	
Signature of the Controlling	ng Authority

STATEMENT

(Referred to in G.O. (P) 187/64/Fin. (PF) dated 20-04-1964)

[Vide rule 43 of General Provident Fund Rules]

l,								
	(here enter name, designation and office in which							
subscriber was working at the time of his o	quitting service), all hereby/do not accept the balance							
standing to my credit in the G.P.F. Account No communicated to me by								
the Accountant General, Kerala in his annu	ial account. Statement for the financial year ended on							
the 31st March 2020 (here enter the financi	al year immediately proceeded the date of his quitting							
service)								
Date:								
Station:	Signature of the Subscriber							
	orginature of the cuborinser							

In cases where a Subscriber does not accept the balance communicated to him he should furnish briefly the reason for not accepting the balance also along with the Statement.

Annexure Form III

FORM OF DECLARATION

Final payment of accumulation in the GPF/KASEPF Account No having
been agreed to be authorised in my favour I,
declare that I closely understood that thepayment is strictly provisional and is subject toprovisions
when any discrepancy in my KASEPF/GPF account is delected at a later stage and I further declare
that if up on such revision the provisional payment name to me has been in excess of the
amount eventually forced admissible. I agree to pay excess payment in lump failing which I agree
that the amount may be recovered from me under the provision of the Revenue Recovery Act for the
time being in force.
Signature of the Subscriber: Name and Address:
Witness:-
1.
2.

Counter Signature of the Controlling Officer

Descriptive Roll and Identification Particulars of

		(To be attested)		
i) Date of Birth (i	n Christian era) :			
ii) Height	:			
iii) Identification	marks			
1.				
2.				
v) Left hand thu	mb and finger impre	essions		
Thumb	Fore-finger	Middle-finger	Ring-finger	Little-finger
specimen Signati	ure of the Applicant			
		Attested by		
1.		Signature	:	
2.		Name	:	
3.		Designation	n:	
		3 •		
Witness				
1.				
2.				

FORM E

[See rules 14, 20 & 37 (1)]

STATEMENT OF DEPOSITS AND WITHDRAWALS FOR THE PERIOD AFTER THE LAST CREDIT CARD TILL THE DATE OF APPLICATION

FOR: GPF Closure FROM: GPF ACCOUNT

Name of Subscriber: G P F Account No:

A. Deposits

Month & Year	Monthly Subscri- ption	Refund of Advance	Date of Encashment	Gross Amount	Net Amount	Name of Treasury
Mar-22						
Apr-22						
May-22						
Jun-22						
Jul-22						
Aug-22						
Sep-22						
Oct-22						
Nov-22						
Dec-22						
Jan-23						
Feb-23						
Mar-23						
Apr-23						
May-23						
Jun-23						
Jul-23						
Aug-23						
Sep-23						
Oct-23						
Nov-23						
Dec-23						
TOTAL						

B. Details of DA Credited to GPF since Last Credit Card

	No. and date of GO	Period to	Amount	Date of	Gross	Net	
SI.	as per which the	which	credited	encash-	amount	amount	
No.	D.A. arrears was	arrears	to GPF	ment of	of the	of the	Name of Treasury
	credited to PF	related		the bill	bill	bill	
1							
2							
3							
4							
	TOTAL						

C. Details of withdrawals made after the Last Credit Card

SI.	No. and date	Date of			Nature of	
No.	of sanction	drawal	Amount	Name of Treasury	advance	Purpose
İ					TA/NRA	
1					TA	
2					TA	
3					TA	
4					TA	
	TOTAL					

If there is no withdrawal since the Last Credit Card that fact should be specifically stated in the proforma

D. Abstract

- 1. Total amount at credit as per last credit card for the year 2021-22
- 2. Total amount credited to PF account after last credit card (Total of A & B above)
- 3. Grand Total (items 1+2 above)
- 4. Total amount of advance drawn after the issunace of the last credit card (vide details furnished under C above)
- 5. Total amount of D.A arrears and Pay revision arrears if any not due for withdrawal as per existing Government Orders
- 6. Grand Total of items 4+5 above
- 7. Net balance at credit of the subscriber (3-6) on the date of application

Certified that the particulars furnished above have been verified with reference to pay abstract, acquittance roll, PF Pass Book and other connected records and found correct.

Signature of Drawing and Disbursing Officer / Signature of subscriber in the case of Gazetted Officer

Place :	Name :
Date:	Designation :

First Schedule

FORM-G.P.F. 3

[See Rule 8(3)]

Form of Nomination

(Please read carefully the instructions printed on the reverse before filling in the form)

ly)

Provident Fund A/c N	lo :			(For use	of subscriber having family)	
Provident Fund A/C N				INATION		
member/are members of m	y family as defineds, to receive the a	hereby non d in rule 2 o mount that i	ninate the f the * may stand	person/persons me to my credit in the	Fund, as indicated below, in	
Name and address of Nominee/Nominees	Relationship with Subscriber	Age of the Nominee	Share payable to each nominee	Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person/ persons, if any to whom, the right of the nominee shall pass in the event of his/her predeceasing the subscriber	
(1)	(2)	(3)	(4)	(5)	(6)	
Dated this day of 20 at Two witness to signature - Name Address Signature						
1.						
2.				Signature	e of the Subscriber	
Spac	e for use by Hea	ad of Offic	e/Accour	ntant General's (Office	
Nomination by Shri/S	Smt./Ku					
Designation						
Date of receipt of nor	mination					
·		Signa	ture of He	ead of Office / A/c O	office	
		J				