Check List of Documents required for GPF in Death case

S.No	FORM NO.	DESCRIPTION	Damasla
1.	Form- 2 Part-I & II	Form of application for final payment of balance in the Provident Fund Account or Death of subscriber.	<u>Remarks</u>
2.	Specimen Signature	beaut of subscriber.	
3.	Excess Payment		

Form 2 Form of application for final payment of balance in the Provident Fund Account on death of a Subscriber Part-I

The Registrar,				

Cin/NA - I				
Sir/Madam.				
With reference	to your letter	no	datad	it is requeste
		HOUGE HILL	H NOVIMANT At the	It is requeste
General Provider	nt Fund/	Contributory	Provident	Fund Account
Shri/Smt/Kmthis connection are give		••••••••	The necessary	particulars require
and commodition are give	en below-			
1 Name of the auto-				
1. Name of the subscril 2. Post held by the sub	oer			
3. Date of death of the	Subscriber			
4. Provident Fund Acco	unt number a	llotted to the a		
5. Information in 5 A or	5 B below, as	applicable.	ubscriber	
5 A. Details of men subscriber:	nbers of fan	nily and the	nominees alive o	in the deta of
subscriber:		,a tile	nonlinees anve 0	une date of dea
Name and address of	Date of	Marital	Dolotionship	lang at
the nominee/member	Date of birth of	Marital status of	Relationship of	Whether he/she
	CHI MURITINA AMERICA	Marital status of nominee	the	Whether he/she is a nominee
the nominee/member	birth of	status of	the nominee/member	
the nominee/member	birth of the nominee/ member	status of nominee the date death	the nominee/member	
the nominee/member	birth of the nominee/	status of nominee the date	the nominee/member with the	
the nominee/member of family	birth of the nominee/ member of family	status of nominee the date death subscriber	the nominee/member with the deceased subscriber	
the nominee/member	birth of the nominee/ member	status of nominee the date death	the nominee/member with the deceased	
the nominee/member of family	birth of the nominee/ member of family	status of nominee the date death subscriber	the nominee/member with the deceased subscriber	is a nominee
the nominee/member of family	birth of the nominee/ member of family	status of nominee the date death subscriber	the nominee/member with the deceased subscriber (4)	is a nominee
the nominee/member of family (1)	birth of the nominee/ member of family	status of nominee the date death subscriber	the nominee/member with the deceased subscriber (4)	is a nominee (5)
the nominee/member of family (1) 5 B. If the subscribe	birth of the nominee/ member of family (2)	status of nominee the date death subscriber (3)	the nominee/member with the deceased subscriber (4)	is a nominee (5)
the nominee/member of family (1) 5 B. If the subscribe persons to whom the pro-	birth of the nominee/ member of family (2)	status of nominee the date death subscriber (3)	the nominee/member with the deceased subscriber (4)	is a nominee (5)
the nominee/member of family (1) 5 B. If the subscribe persons to whom the pro-	birth of the nominee/ member of family (2)	status of nominee the date death subscriber (3)	the nominee/member with the deceased subscriber (4)	is a nominee (5)
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the nominee/member of family (1) 5 B. If the subscribe persons to whom the prosuccession certificate, et Name and address	birth of the nominee/ member of family (2) er has left ovident fund noc).	status of nominee the date death subscriber (3) To no family a noney is payar	the nominee/member with the deceased subscriber (4) or nd no nomination ble (to be supported	is a nominee (5) subsists, the name by letter of prob

6. In case the recipient(s) is/are minor, details of the guardian-

Name	Date of birth	Relationship with the minor	Relationship with the deceased Government servant	Postal Address

Note: In case of a minor child whose mother (widow of subscriber) is not a Hindu, the claimant shall submit an Indemnity Bond, or Guardianship certificate, as the case may be.

- 7. The claimants, shall enclose the following documents, duly attested:
- (a) Photograph
- (b) Specimen signatures in duplicate (in case of literate claimants)/Thumb or finger impression (in case of illiterate claimants)
- 8. Other documents to be enclosed:
 - (a) Death certificate
 - (b) A copy of letter of probate/succession certificate/legal heir certificate, etc. (where applicable).
 - (c) Any other document regarding eligibility of the claimant, as per rules

Station Date Yours faithfully

(Signature of claimant, including gurdian) (Full name and address)

PART II (FOR THE USE OF REGISTRAR)

particular	s furnis	ller of Finar hed	above	have	bee	for n	necessary duly	action. The
2. The Shri/Smt.,	/Kumari			ontributory is				
drawn inrefund 4. Ce	e last fund ded this office I of ertified that he I from his/her date	Bill No the amour actions as	it of deduction	for Rs tion being R be	for the mor	nth of and research Rs ary adve	recovery on	Rupees
C him/ her preceding	ertified that th and drawn fro	e following m his/her	tempora Provident	ry advance Fund Acco his/her	s/final withount during	2		
(i)	Amount and da			wals	Da	ate		
5. Amo	ount of Providen	t Fund Mone	ey standing	g to the cred	it of the subs	scriber a	t the time of	

(Signature of the Registrar)

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Thumb/finger imp	ression of Shri/Smt./Km	*************************
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Thumb/finger Image	postan of Christma item	
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	SHEET FOR SPECIMEN SIGNATURE OF THE CLAIMANT/GUARDIAN.	* * *
pecimen signature	of Shri/ Smt./Km	
esignation		**** (**)**)>***!*****
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Guru Gobind Singh Indraprastha University Sector-16 C, Dwarka, New Delhi-110078

DECLARATION REGARDING REFUND OF EXCESS PAYMENT

I	do hereby declare that the amount
Pension/Gratuity and	GPF as authorized by the Pay and Accounts officer if afterwards found to be in
excess of the amount	by which entitled under the rules, I refund such excess on demand within two
months.	and and the rules, i relund such excess on demand within two
	Signature :
	Name in full :
	Address: