

HIMACHAL PRADESH STATE AGRICULTURAL MARKETING BOARD

Application form for admission to Contributory Provident Fund.

(To be submitted in duplicate)

1. Name of the Applicant with designation ...
2. Permanent Home Address ...
3. Office to which attached ...
4. Post held ...
5. Whether Temporary/Permanent/DPL ...
6. Date of joining the service ...
7. Monthly contribution ...
8. Whether the subscriber has a family or not ...
9. C.P.F Account Number being allotted by ... HMB-
10. Date of Birth ...

Signature of the Applicant

No

dated

Returned to the applicant alongwith a copy of nomination after allotting the C.P.F. Account Number. This number may be indicated in all correspondence in this regard.

Managing Director
H.P. State Agr. Marketing Board

SCHEDELE

{See regulation 7 (3)}

Account No. _____

I, _____ hereby nominate the person(s) mentioned below who is/are member (s)/non-member(s) of my family as defined in regulation 2 of the Himachal Pradesh Agricultural Horticulture Produce Marketing(Employees Contributory Provident Fund) Regulation 2006, to receive the amount that may stand to my credit in the Provident Fund as indicated below, in the event of my death before that amount has become payable or having become payable has not been paid.

Name and full address or nominees (s)	Relationship with the subscriber	Age of the nominee (s)	Share payable to each nominee	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 pass in the event of his/her predeceasing the subscriber	If the nominee is not a member of the family as provided in regulation 2, indicate the reasons
1.	2	3	4	5	6	7.

Dated this.....day of 200.....at.....

Signature of the subscriber.....

Name in Block letters.....

Designation.....

Signature.....

Two witnesses to signature

Name and address

1. -----

2. -----

(Reverse of the form)

Space for use by the Head of Office/pay & Accounts Office

Nomination by Sh./Smt./ Kumari-----Designation-----

Date of receipt of nomination-----

Signature of Head of Office/Pay & Accounts Officer

Designation-----

Date-----

Instruction for the subscriber-

- (a) Your name may be filled in.
- (b) Name of the fund may be completed suitably.
- (c) Definition of term “family” as given in the Himachal Pradesh State Agricultural Marketing Board (Employees Contributory Provident Fund) Regulation 2006, is reproduced below.

“Family” means-

- (i) in the case of male subscriber, the wife or wives, parents, children, minor brothers, unmarried sister, deceased son’s widow and children and where no parent of the subscriber is alive, a paternal grandparent:

Provided that if a subscriber proves that his wife has been judicially separated 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 Regulations relate unless the subscriber subsequently intimates in writing to the Managing Director that she shall continue to be so regarded.

- (ii) in the case of 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 grandparent:

Provided that if a subscriber by notice in writing to the Managing Director expresses her desire to exclude her husband from her family, the husband shall henceforth be deemed to be no longer a member of the subscriber’s family in matters to which these Regulations relate unless the subscriber subsequently cancels such notice in writing.

NOTE. - “Child” means legitimate child and includes an adopted child where adoption is recognized by the personal law governing the subscriber or a ward under the Guardians and Wards Act, 1980 (8 of 1890), who lives with the servant of the Authority and is treated as a member of the family and to whom the servant has, through a special will, given the same status as that of a natural born child.

- (d) Col. 4. If only one person is nominated the words “in full” should be written against the nominee. If more than one person is nominated, the share payable to each nominee over the whole amount of the Provident Fund shall be specified.
- (e) Col. 5 Death of nominee (s) should not be mentioned as contingency in this column.
- (f) Col. 6. do not mention your name.
- (g) Draw line across the blank space below last entry to prevent insertion of any name after you have signed.