

Name:
Design:
Name of Office:
Date:

To,
The Member Secretary / Adm. Officer/
Regional Officer/ Senior Scientific Officer,
Maharashtra Pollution Control Board.

(To be submitted through proper channel)

Sub.:- Application for admission to MPC Board Employee's CPF
Scheme 1979 and accept nomination.

Sir,

I Shri./Smt.-----
working w.e.f.-----on the establishment of the-----
-----as a -----apply
for admission to the Board's Contributory Provident Fund Scheme, 1979.

I wish to subscribe from the month of -----as Rs. -----
(Rupees -----) or 8.33% of my emolument
whichever is higher.

I requested you to kindly admit me to the Board's Contributory Provident Fund
Scheme, 1979 and communicate the CPF account No. allotted to me. The nomination duly
completed in triplicate is enclosed herewith.

Thanking you.

Your's faithfully,

Date: ()

As verified from service book, Shri./Smt. -----
has been appointed in the service of the Board w.e.f. -----.
Since he/she has completed one year service as on-----,
he/she may please be admitted to the MPC Board Employee's CPF Scheme,
1979 and also accept his nomination for same scheme.

Date: Accounts Officer (Establishment)/ Regional Officer/
Senior Scientific Officer
Maharashtra Pollution Control Board.

(See rule 5(3))
Forms of Nomination.

1. When the subscriber has a family and wishes to nominate one member thereof:

I hereby nominate the person mentioned below, who is a member of my family as defined in rule 2 of the Maharashtra Prevention of Water Pollution Board Contributory Provident Fund Rules, to receive the amount that may stand to my credit in the Fund, in the event of my death before the amount has become payable, or having become payable, has not been paid:-

Name and address of Nominee	Relationship with subscriber	Age	Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person, if any to whom the right of the nominee shall pass in the event of his predeceasing the subscriber

This nomination supersedes the nomination made by me earlier as on _____, which stands cancelled.

Date :

Place .:

Signature of two witness with name & CPF A/c.NO.:

Signature of subscriber with name.

1.

2.

Controlling officer sign.

CHIEF ACCOUNT OFFICER
/ MEMBER SECRETARY

FIRST SCHEDULE

(See rule 5(3))

Forms of Nomination.

2. When the subscriber has a family and wishes to nominate more than one member thereof:

I hereby nominate the person mentioned below, who are members of my family as defined in rule 2 of the Maharashtra Prevention of Water Pollution Board Contributory Provident Fund Rules, to receive the amount that may stand to my credit in the Fund, in the event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their names:-

Name and address of Nominees	Relationship with subscriber	Age	*Amount or share of accumulation to be paid to each	Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person, if any to whom the right of the nominee shall pass in the event of his predeceasing the subscriber

*Note – this column should be filled in so as to cover the whole amount that may stands to the credit of the subscriber in the Fund at any time.

This nomination supersedes the nomination made by me earlier ason _____ which stands cancelled.

Date :

Place .:

Signature of two witness with name & CPF A/c.NO.:

Signature of subscriber with name.

1.

2.

Controlling officer sign.

CHIEF ACCOUNT OFFICER /
MEMBER SECRETARY

FIRST SCHEDULE

(See rule 5(3))

Forms of Nomination.

3. When the subscriber has no family and wishes to nominate one person.

I having no family as defined in rule 2 of the Maharashtra Prevention of Water Pollution Board Contributory Provident Fund Rules, hereby nominate the person mentioned below to receive the amount that may stand to my credit in the Fund, in the event of my death before that amount has become payable, or having become payable has not been paid:-

Name and address of Nominee	Relationship with subscriber	Age	*Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person, if any to whom the right of the nominee shall pass in the event of his predeceasing the subscriber

*Note :- When a subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

Date :

Place .:

Signature of two witness with name & CPF A/c.NO.:

Signature of subscriber with name.

1.

2.

Controlling officer sign.

CHIEF ACCOUNT OFFICER
/ MEMBER SECRETARY

FIRST SCHEDULE

(See rule 5(3))

Forms of Nomination.

4. When the subscriber has no family and wishes to nominate more than one person.

I having no family as defined in rule 2 of the Maharashtra Prevention of Water Pollution Board Contributory Provident Fund Rules, hereby nominate the person mentioned below to receive the amount that may stand to my credit in the Fund, in the event of my death before that amount has become payable, or having become payable has not been paid and direct that the said amount shall be distributed among the said persons in the manner shown below against their names:-

Name and address of Nominees	Relationship with subscriber	Age	*Amount or share of accumulation to be paid to each	@ Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person, if any to whom the right of the nominee shall pass in the event of his predeceasing the subscriber

*Note – This column should be filled in so as to cover the whole amount that may stands to the credit of the subscriber in the Fund at any time.

@Note :- When a subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

Date :

Place :

Signature of two witness with name & CPF A/c.NO.:

Signature of subscriber with name.

1.

2.

Controlling Officer sign.

CHIEF ACCOUNT OFFICER
/ MEMBER SECRETARY