

ANNEXURE
FORM OF APPLICATION FOR SANCTION OF LOAN FROM THE ANDHRA
PRADESH EMPLOYEES WELFARE FUND

To
 The Member Secretary-cum-Treasurer
 District Treasury Officer,A.P.
 Employees Welfare Funds District Level
 Committee,
 _____ District.

1. Name of the Applicant :
2. If dependent of a deceased
Govt. servant, relationship :
3. Father/Husband's name :
4. Post held
a) Substantive :
b) Officiating :
c) Department/office :
d) Date of entry into service :
e) Bill No/ Cheque No./ dated
and month of latest recovery
of subscription/ Challan No.
and date :
5. Scale of Pay and allowances
drawn per month :
6. Date of retirement :
7. Amount of loan and purpose for
Which the loan sought for :
(Documentary proof to be
Enclosed)
8. Whether eligible for similar
Loan from the Government :
9. If so, whether he was sanctioned
The loan or not :
10. Period within which he wishes
To repay if it loan :

11. Is any balance of loan
Sanctioned earlier outstanding
If so, how much :

12. I here by authorize _____
 (drawing officer) to recover the instalment of loan with interest from my
 Salary through acquittance and remit to the Member Secretary-cum-treasurer
 Till the entire loan is repaid at my cost.

Signature of the applicant

13. Remarks of forwarding and Drawing Officer
(Drawing Officer)
a) Recommended / Not recommended
b) The contents of the applicant are correct.

14. I undertake to recover the installments of the loan as advised by the committee
 Through acquittance and send the amount to the Member Secretary-cum-
 treasurer till the entire loan with interest is repaid. In case of transfer or
 retirement of the applicant, the balance outstanding will be note in the last pay
 certificate.

15. Designation of the Drawing Officer and his address to whom recovery statement
Should be sent.