

THE EMPLOYEES' PROVIDENT FUND ACT No. 15 of 1958

Form G

PART I (To be filled in by an Employee)

I, of
(name) (address)

do hereby solemnly and sincerely declare that –

(1) * I have not been employed before in a covered employment and I have not been contributor to the Employees' Provident Fund or any approved provident fund ;

(2) * I have been employed before by in a covered employment, namely
(Name and address of * estate / establishment)

(a) * and have been a contributor to the Employees' Provident Fund, under membership number I ceased employment under the said Employer on
.....20.....
(No. and Member's No.)

My certificate of Membership on Form 'B'/* last annual statement form the Central Bank is annexed.

(b) * and have been a contributor to an approved Provident Fund, namely
.....

.....
Signature of Employee

Thumb marks of Employee

Left | Right

Witness to
Signature and
Thumb Marks
of Employee

Signature :
Name :
Designation :
Address :
.....

PART II (To be filled in by the Employer)

Commissioner of Labour,

Forwarded. * I/We confirm that the above-named declarant has been taken into *my/our employ with effect from , 20..... and that *he/she has been assigned membership number

Name of Employer :
Name and address of * establishment/estate :
Employer's E.P.F. Registration No.

Date :

.....
Signature of Employer

Designation :