Application Form for Special Cash Package in lieu of LTC (LTC fare + 10 Days' EL Encashment) during block year 2018-2021.

Emplo	yee ID No.:			Se	ervice Book No	•	
1.	Name & Designati	on of the Gover	nment Serva	nt:			
2.	Date of entering into the Govt. Service:						
3.	Basic Pay: Rs Pay Level:						
4.	Nature of appointment:						
5.	Home Town as recorded in Service Book:						
6.	Whether Husband / Wife is employed, if yes, (a) Name & Address of the Office:						
	(b) please attach certificate from his/her employer						
7.	Whether the concession is to be surrendered for						
	Visiting Home Town, and if so, mention Block Year:						
8.	If the concession is	If the concession is to be surrendered "Anywhere in India"					
	Block Year proposed to be surrendered:						
9.	Single Deemed LTC fare Rs.:						
10.	E.L. Encashment required (attach last month Pay Slip):						
11.	Whether advance is required: Yes / NO:						
12.	Persons in respect of whom LTC is proposed to be availed:						
S.	Nam	ne	Age	Date of Birth	Relationship		
No.						Medical Section	
2.							
3.							
5.							
6.							
(i) to prod						my knowledge, I undertake	
to produce the receipts towards purchase of goods or availing services which carry a GST rate of not less than 12% from GST registered Vendors / Service providers through digital mode clearly indicating the GST number and the							
amount	t of GST paid.						
(ii)				_		eceipts within the stipulated	
time fra	ıme, I undertake to r	efund the entire	advance in	one lumpsum a	long with pena	l interest as applicable.	
Name o	of the Bank:	•••••	SB A/C No	o	••••••••••	•	
Ranch	MICP Code		IESC Code				
Dranch	MICR Code	••••••	. IFSC Code	••••••	••••••		
	•••••						
	Signature of Applicant						
	Name of Employee:						
	Designation:						
	Department:						
Head o	f the Deptt. /Instt.						
Date:							
For Office Use							
E	ntitlement	Number of	Persons	E.L. End	cashment	Total Advance	