

FORM 15

THE EMPLOYEES PROVIDENT FUND SCHEME 1952

Form of Assignment of Policies under paragraph 64 (1) to be endorsed on Policy

I _____, S/o./D/o.

_____ hereby assign unto _____
_____ the Board of Trustees, Employee Provident
Fund _____

the within Policy of assurance as security for payment of all sums which under paragraphs 67 (1) and 68 of
the Employee's Provident Fund Scheme, I may hereafter become liable to pay the Fund.

I hereby certify that no prior assignment of the within policy exists.

Dated at _____ this _____ day of _____ 200

Account No. _____

Station _____

**Signature of left/right hand thumb
Impression of the member**

Witness :

Certified that this Form has been signed before me by _____ employed in
_____ Regd. No. of Factory / Establishment

Code No. of the Factory / Establishment

Dated _____

**Signature of the Employer or
any Authorised Officer
Designation _____**

Stamp of the Establishment

- Note : 1) The policy is required to be assigned within six months after the first withdrawal in respect of it
by endorsement thereon in terms of the above form.
2) While assigning the Policy the notice hereunder should be given to the Life Insurance
Corporation.

NOTICE

To
The Manager
The Life Insurance Corporation of India
Unit _____

Subject : Assignment of Policy No. _____

Notice is hereby given that Policy No. _____ for Rs. _____

on the life of Sri./Smt. _____ as on the
_____ day of _____ been assigned in favour of Central Board of Trustees
Employee's Fund by Sri/Smt _____

2. The said policy is enclosed. Please have the assignment registered in your books and return the
policy to the Regional Provident Fund Commissioner (give complete Address)
_____ State.

Yours faithfully

(Signature of the Assignee)

Full Address _____
