

FORM - I
 [See: Sub - Rule (1) of Rule 7]
APPLICATION FOR GRATUITY BY AN EMPLOYEE

To,

Shri / Gentlemen,

I beg to apply for payment of Gratuity to which I am entitled under Sub-Section (1) of 4 of Payment of Gratuity Act, 1972 on account of my Superannuation / retirement / resignation after completion of not less than five years of continuous service/total disablement accident/total disablement due to diseases with effect from _____. The necessary particulars to my appointment in the establishment are given in the statement below:-

Statement

1. Name in full :
2. Address in full :
3. Department/Branch/Section where last employed :
4. Post held with Ticket No., or Serial No, if any :
5. Date of appointment :
6. Date and Cause of Termination of Service :
7. Total period of service :
8. Amount of wages last drawn :
9. Amount of gratuity claimed :
- 2). I was rendered totally disable as a result of _____

The evidence/witnesses of my total/disablement are as follows:-

- 3). Payment may please be made in cash/open or crossed bank cheque.
- 4). As the amount of gratuity payable is less than Rupees one thousand, I shall request you to arrange for payment of the sum due to me by postal money order at the address mentioned above after deducting postal money order commission there from.

Yours faithfully,

Place :

Date :

 Signature/thumb impression of the applicant employee.

- Note :-**
- (1) Strike out the words not applicable.
 - (2) Strike out paragraph or paragraphs not applicable.