



EMPLOYEES' PROVIDENT FUND SCHEME, 1952

(PARA 57)

(This form has been printed on the basis of Online Transfer Claim Form filled up by the member under Unified Portal for submission to the employer.)

To,
The Regional P.F. Commissioner,
MADURAI,
1, Lady Doak College Road, Bhavishya Nidhi Bhavan, Chokkikulam Madurai

Sir,

I request that my Provident Fund balance along with my Pension Service Details may please be transferred to my present account under intimation to me. My details are as under :

PART A : PERSONAL

- | | |
|------------------------|--------------------------------------|
| 1. Name | : ARUN PRAKASH SARAVANAKUMAR |
| 2. Mobile Number | : 9786447125 |
| 3. E-mail id | : ARUNPRAKASH.SARAVANA1697@GMAIL.COM |
| 4. Bank Account Number | : 600301514164 |
| 5. Bank IFSC | : ICIC0006003 |

PART B : DETAILS OF PREVIOUS PF ACCOUNTS (WHICH IS TO BE TRANSFERRED)

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| 1. PF Account No. (with EPFO | : MDMDU00584260000010332 |
| 2. Name of the Establishment | : FAR SHORE SOFTWARE DEVELOPMENT (P) LTD |
| 3. Address of the Establishment | : 15 GOKHALE ROAD SECOND FLOOR, THALLAKULAM,MADURAI
MADURAI MADURAI |
| 4. PF A/C No. held by | : MADURAI |
| 5. Name of the Trust | : NOT APPLICABLE |
| 6. PF A/C No. in Trust | : NOT APPLICABLE |
| 7. Bank A/C No. of Trust | : NOT APPLICABLE |
| 8. IFS Code of the Bank Branch of
Trust where account is | : NOT APPLICABLE |
| 9. Member's Name | : ARUN PRAKASH SARAVANAKUMAR |
| 10. Date of Birth | : 01/06/1997 |
| 11. Father's/Spouse Name | : SARAVANA KUMAR K |
| 12. Relationship | : FATHER |
| 13. Date of joining | : 23/12/2019 |
| 14. Date of leaving | : 14/06/2022 |

PART C : DETAILS OF PRESENT PF

1. PF Account No. (with EPFO) : MDMDU00425660000017376
2. Name of the Establishment : THANGAMAYIL JEWELLERY (P) LTD
3. Address of the Establishment : 124,NETHAJI ROAD MADURAI MADURAI 707
4. PF A/C No. held by : RO MADURAI
5. Name of the Trust : NOT APPLICABLE
6. PF A/C No. in Trust : NOT APPLICABLE
7. Bank A/C No. of Trust : NOT APPLICABLE
8. IFS Code of the Bank Branch of
Trust where account is : NOT APPLICABLE
9. Member's Name : ARUN PRAKASH SARAVANAKUMAR
10. Date of Birth : 01/06/1997
11. Father's/Spouse Name : SARAVANA KUMAR K
12. Relationship : FATHER
13. Date of joining : 11/08/2022

I, Certify that all the information given above are true to the best of my knowledge and I have ensured the correctness of my present and previous account numbers.

Signature of the member

Note : Member should take a printout of this form and a signed copy of the same should be submitted to the Present Establishment i.e. THANGAMAYIL JEWELLERY (P) LTD