

APPLICATION FOR GRATUITY BY AN EMPLOYEE

To: Shell India Markets Pvt. Ltd

Sir/s,

I wish to apply for payment of gratuity to which I am entitled to on account of my superannuation / retirement / resignation after completion of not less than five years of continuous service / total disablement due to accident / total disablement due to disease with effect from the ----/----/----- (DD/MM/YYYY). The necessary particulars relating to my appointment in the establishment are given in the statement below:

I

1. Name in full : -----

2. Address in Full : -----Tel. No.-----

Email id _____

3. Department/Branch/Section where last employed : -----

4. Post held and Employee Code : -----

5. Date of appointment : -----

6. Date and cause of termination of service: ----/----/----- (DD/MM/YYYY) -----

7. Total period of Service:

8. Amount of wages last drawn:

9. Amount of gratuity claimed:

II. I was rendered totally disabled as a result of -----
(here give the details of the nature of disease or accident)

The evidences/witnesses in support of my total disablement are as follows: (here give details)

III. Payment may please be made by crossed Bank Cheque.

Also attached is the Declaration format regarding my previous gratuity settlements.

Yours faithfully,

(Signature of the applicant employee)

To be filled & signed by HR/Finance

Category (tick): ☐ Executive / Manager
☐ HO-Branches & Mumbai Plant
☐ Other Plants

DOJ:
DOL:
Reason for leaving:
Last drawn Salary (for Gratuity):

Approved by:

(HR/Finance)

Name of the Signatory:

Date:

EMPLOYEE DECLARATION

(From the below, please Strike out the point which is not applicable. Please fill only details relevant to non Shell employers)

1. I, hereby confirm that I have not claimed tax benefit accruing out of Gratuity claim from any of the previous organizations where I had served prior to joining Shell India Markets Pvt. Ltd. or it's erstwhile constituents.

OR

2. I, hereby confirm that I have claimed Gratuity from my previous organizations (as per the details below) where I served prior to joining Shell India Markets Pvt. Ltd. or it's erstwhile constituents.

Sl. No	Company Name	Year	Gratuity Amount (Rs.)	Exemption Amount (Rs.)
1				
2				
3				

(Insert rows as required)

I confirm that I shall abide by the above declaration and the consequence thereof arising out of this declaration.

Employee Name:

Employee Number:

PAN (*Mandatory*):

Date:

Location:

(Employee Signature)