



ONLINE TRANSFER CLAIM FORM [FORM 13 (REVISED)]

(Tracking ID: 10058193267405001)

Claim Date : 16/09/2021

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,
K R PURAM (WHITEFIELD),
No. 36, NH-4, Lakshmi Complex Opp. Syndicate Bank, Old Madras Road K.R. Puram,

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 : TUSHAR SHIROL
2. Mobile Number : 9620693232
3. E-mail id : shiroltushar@gmail.com
4. Bank Account Number : 5434541703
5. Bank IFSC : CITI0000005

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

1. PF Account No. (with EPFO) : PYKRP00184530000035442
2. Name of the Establishment : CAPGEMINI TECHNOLOGY SERVICES INDIA LIMITED
3. Address of the Establishment : EPI PARK WHITEFIELD BANGALORE BENGALURU (BANGALORE) URBAN
4. PF A/C No. held by : K R PURAM (WHITEFIELD)
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 : TUSHAR SHIROL
10. Date of Birth : 20/05/1993
11. Father's/Spouse Name : RACHAPPA SHIROL
12. Relationship : FATHER
13. Date of joining : 29/10/2015
14. Date of leaving : 05/07/2021

PART C : DETAILS OF PRESENT PF

1. PF Account No. (with EPFO) : PYBOM00348260000037860
2. Name of the Establishment : BRILLIO TECHNOLOGIES PRIVATE LIMITED
3. Address of the Establishment : NO.58,1ST MAIN ROAD,MINI FOREST,JP NAGAR,3RD PHASE,RING ROAD, BANGALORE 656
4. PF A/C No. held by : SRO BOMMASANDRA
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 : TUSHAR SHIROL
10. Date of Birth : 20/05/1993
11. Father's/Spouse Name : RACHAPPA SHIROL
12. Relationship : FATHER
13. Date of joining : 08/07/2021

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. BRILLIO TECHNOLOGIES PRIVATE LIMITED