

Employee ID:

Contact No:

**FORM 'I'**

[See sub-rule (1) of rule 7]

**Application of gratuity by an employee**

To .....  
[Give here name or description of the establishment with full address]

Sir/Gentlemen,

I beg to apply for payment of gratuity to which I am entitled under sub-section (1) of section 4 of the 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 due to accident/ total disablement due to disease with effect from the ..... Necessary particulars relating 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 cause of termination of service.
7. Total period of service.
8. Amount of wages last claimed.
9. Amount of gratuity claimed.

I was rendered totally disabled as a result of

[Here give Detail]

Payment may please be made in cash/open or crossed bank Cheque.

As the amount of gratuity payable is less than Rupees one thousand, I shall request you to arrange for payment of the sum to me by Postal Money Order at the address mentioned above after deducting postal money order commission therefrom.

Place  
Date

Yours faithfully,  
Signature/Thumb impression of  
the applicant employee.

Note:

1. Strike out words not applicable.
2. Strike out paragraph or paragraph not applicable.

**Advance Receipt**

Received from M/s. Verizon Data Services India Pvt Ltd., sum of Rs.\_\_\_\_\_-/- (Rupees \_\_\_\_\_ only)  
by Ch No.\_\_\_\_\_-Dt.\_\_\_\_\_ drawn on Citi Bank Chennai towards settlement of Gratuity.

Emp No:

Emp Name:

Sign on Revenue Stamp:

(To be signed on one rupee revenue stamp)