

## ONLINE TRANSFER CLAIM FORM [FORM 13 (REVISED)]

(Tracking ID: 10121882542305005)

Claim Date: 28/01/2023

### 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,

PUNE,

2-3rd Flr, Pune Cant. Board Blding, Near Golibar Maidan, Camp, Pune

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 : MINAKSHI RAMESH VAVARE

2. Mobile Number : 9850273537

3. E-mail id : -

4. Bank Account Number : 33838072865

5. Bank IFSC : SBIN0001918

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

1. PF Account No. (with EPFO : PUPUN15588910000010163

2. Name of the Establishment : JAY AMBEY LABOUR SERVICES

3. Address of the Establishment : SAMBHAJI NAGAR BARAMATI DIST PUNE TAL-BARAMATI, BARAMATI

601

4. PF A/C No. held by : PUNE

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 : MINAKSHI RAMESH VAVARE

10. Date of Birth : 30/01/1982

11. Father's/Spouse Name : RAMESH

12. Relationship : HUSBAND

13. Date of joining : 01/11/2017

14. Date of leaving : 31/12/2017

## **PART C: DETAILS OF PRESENT PF**

1. PF Account No. (with EPFO : PUPUN15581300000012424

2. Name of the Establishment : KIRTI ENTERPRISES

3. Address of the Establishment : PLOT NO. A - 41 MIDC AREA BARAMATI 601

4. PF A/C No. held by : RO PUNE

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 : MINAKSHI RAMESH VAVARE

10. Date of Birth : 30/01/1982

11. Father's/Spouse Name : RAMESH

12. Relationship : HUSBAND

13. Date of joining : 01/03/2021

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 Previous Establishment i.e. JAY AMBEY LABOUR SERVICES