ARMY GROUP INSURANCE FUND

APPLICATION FORM :MATURITY

PART 1

1. Army No	OR14852093M	2. Old Army No	OR14852093M
3. Rank	Hav	4. Name	Avinay Kumar Rana
5. Regt/Corps	ASC(SOUTH)	6. Present Unit	Army Group Insurance Fund
7. Unit Pin Code	110057	8. Unit Address	Civil Postal Address
9. Fmn HQ	IHQ OF MOD	10. Permanent Home Address	Dharoh, Darpa, Mandi, HP, 175042
11. Civil Postal Address	delhi	12. Date of Enrollment	10-10-2008
13. Date of Birth	10-10-1990	14. Date of Retirement	31-10-2032
15. Total Service (In Years)	17	16. E-Mail	avinaykumarrana@gmail.com
17. Aadhaar No	7980-8806-3471	18. Pan No	AUHPR1666E
19. Mob No	9816048296	20. Salary Account No	30828011963
21. IFSC Code	SBIN0010727	22. Bank Branch	Sarkaghat
23. Purpose of Withdrawal	Education of Ward	24. Amount of Withdrawal Reqd.	800000
25. No of Withdrawals	Second		

PART 2

26. For Education of Child(Applicable for children studying in 12th Class and above

(a) Name of Child	test	(b) Date of Birth	04-11-2025
(c) Relationshhip	Son	(d) Gender	Male
(e) DO Part-II No	0/0000/0000/2024	(f) DO Part-II Date	05-11-2025
(g) Course	UG	(h)Name & Address of College	UTTARANCHAL UNIVERSITY
(i) Total Expenditure	1000000		

27. Certificate

(a) Certified that the particulars given are correct & the amount will be utilized for the purpose mentioned in application

(b) I understand that , if I withdraw money from maturity amount , it will reduce my ultimate saving amount receivable at the time of retirement/release/discharge as Member Maturity Fund.

(c) Following documents signed by me are attached with the application:-

(I) ✔ Cancelled cheque of salary acct.

(II) ✔ Latest Monthly Pay Slip.

(III) ✅ Expenditure details duly self attested.

(d) If the withdrawal is for second time, gaps after first withdrawal should be more than six months.

(e) I hearby declare that i have paid all my AGI subscriptions to AGIF on time upto the present date.

Verified by - Lt AB SIngh   IP Address – ::1 Date Time – 12-11-2025 15:25

Date: 12-11-2025

OR14852093M

Hav Avinay Kumar Rana