

ARMY GROUP INSURANCE FUND
APPLICATION FORM :Maturity

PART 1

1. Army No	JC12121331N	2. Old Army No	JC22221M
3. Rank	Sub Maj	4. Name	John Doe
5. Regt/Corps	1GR	6. Present Unit	Directorate General of Information Systems
7. Unit Pin Code	133333	8. Unit Address	c/o 99 APO
9. Fmn HQ	Next FMN HQ 1	10. Permanent Home Address	
11. Date of Enrollment	15-02-2003	12. Date of Birth	18-02-1982
13. Date of Retirement	15-02-2035	14. Total Service (In Years)	22
15. E-Mail	johndoe@example.com	16. Aadhaar No	1234 5678 9012
17. Pan No	ABCDE1234F	18. Mob No	9876543210
19. Salary Account No	12345678901234567	20. IFSC Code	HDFC0001234
21. Purpose of Withdrawal	Education of Ward	22. Amount of Withdrawal Reqd.	600000.00
23. No of Withdrawals	First		

PART 2

25. For Education of Child(Applicable for children studying in 12th Class and above			
(a) Name of Child	ADITYA CHAND	(b) Date of Birth	01-07-2025
(b) DO Part-II No	1112	(d) DO Part-II Date	22-07-2025
(e) Course	12th	(f)Name & Address of College	UA UNIVERSITY
(h) Total Expenditure	1000000		

26. 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 (Strike out whichever is not applicable):-
- (i) Attested copy of Birth Pt II Order of child(In case of edn/marriage of child).
 - (ii) Attested copy of Fee details of child (For Edn of Child) attested by OC unit
 - (iii) Cancelled cheque or first page of passbook duly authenticated by bank.
 - (iv) Latest Pay Slip.

(v) Marriage invitation Card(In case of marriage of child) duly attested by OC unit

(vi) Estimate of cost of expdr(For renovation of House in the last two years of service).

(vii) Personal application & sp docus(for seeking of spl waiver).

(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 - IP Address – ::1 Date Time – 07-07-2025 16:33

Date: 07-07-2025

JC12121331N

Sub Maj John Doe