



ARMY GROUP INSURANCE FUND**APPLICATION FORM :MATURITY****PART 1**

1. Army No	JC12333231Y	2. Old Army No	OR11000000N
3. Rank	Sub	4. Name	testingnov
5. Regt/Corps	1GR	6. Present Unit	Army Software Developer Center
7. Unit Pin Code	262308	8. Unit Address	c/o 56 APO
9. Fmn HQ	IHQ OF MOD	10. Permanent Home Address	Delhi, Delhi, Delhi, Delhi, 111054
11. Civil Postal Address		12. Date of Enrollment	01-10-2007
13. Date of Birth	01-04-1990	14. Date of Retirement	31-10-2035
15. Total Service (In Years)	18	16. E-Mail	Test1131232144@gmail.com
17. Aadhaar No	1111-1111-1111	18. Pan No	AAAAA0000D
19. Mob No	1215644444	20. Salary Account No	1111111111111111
21. IFSC Code	Hhjaas12211	22. Bank Branch	sdsdsdsd
23. Purpose of Withdrawal	Education of Ward	24. Amount of Withdrawal Reqd.	800000
25. No of Withdrawals	First		

PART 2**26. For Education of Child(Applicable for children studying in 12th Class and above**

(a) Name of Child	ADITYA	(b) Date of Birth	01-04-1990
(c) Relationship	Son	(d) Gender	Male
(e) DO Part-II No	0/0000/0000/1025	(f) DO Part-II Date	12-11-2025
(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)  Copy of birth Part II Order of child.
 - (II)  Cancelled cheque of salary acct.

(III) ✓ Latest Monthly Pay Slip.

(IV) ✓ 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 hereby declare that i have paid all my AGI subscriptions to AGIF on time upto the present date.

Verified by - Lt Ankit Singh IP Address – 127.0.0.1 Date Time – 19-11-2025 19:13

Date: 19-11-2025

JC12333231Y

Sub testingnov

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RECOMMENDATIONS AND COUNTERSIGNATURE

1. I certify that above MAWD application has been submitted by No **JC12333231Y** Rank **Sub** Name **testingnov** of my Unit **Army Software Developer Center**. I identify his signature on supporting documents as attested by him and certify them to be correct.

2. It's certified that I am the CO/OC Tps/Head of Adm Branch of No **JC12333231Y** Rank **Sub** Name **testingnov**. and I am authorised to countersign financial documents of this individual.

3. It is certified that Bank A/c No **1111111111111111** of Bank **Saddssdsd** with IFSC **Hhjaas12211** as given in the application and cancelled cheque is of Salary account of JC12333231Y Sub testingnov

4. I have satisfied myself of the correctness of personal details and reasons for withdrawal given in application. I have perused the supporting documents and checked their correctness. Supporting documents uploaded are readable and latest.



Application is recommended for sanction and accordingly I countersign the same.

(Digital Signature of CO/OC Tps/Head of Adm Br)

IC123654L

Lt Ankit Singh

Mobile No: 7788996655

Digital Sign On: 19-11-2025 19:13