

ARMY GROUP INSURANCE FUND
APPLICATION FORM :MATURITY

PART 1

1. Army No	IC14661000K	2. Old Army No	SC14661207K
3. Rank	Lt Gen	4. Name	sdsfdsa
5. Regt/Corps	11GR	6. Present Unit	Army Software Developer Center
7. Unit Pin Code	262308	8. Unit Address	c/o 99 APO
9. Fmn HQ	IHQ OF MOD	10. Permanent Home Address	Delhi, Delhi, Delhi, Delhi, 111054
11. Civil Postal Address		12. Date of Enrollment	05-08-2025
13. Date of Birth	01-04-2000	14. Date of Retirement	01-04-2060
15. Total Service (In Years)	0	16. E-Mail	sanjaychand1809@gmail.com
17. Aadhaar No	1111-1111-1111	18. Pan No	AAAAAA0000A
19. Mob No	8989989889	20. Salary Account No	111111111111111111
21. IFSC Code	BAK01212111	22. Bank Branch	sdsdsd
23. Purpose of Withdrawal	Education of Ward	24. Amount of Withdrawal Reqd.	500000
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	test	(b) Date of Birth	05-08-2025
(b) DO Part-II No	00/012/2022	(d) DO Part-II Date	06-08-2025
(e) Course	PG	(f) Name & Address of College	UTTARANCHAL UNIVERSITY
(h) 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 NIRAJ KALRA IP Address – ::1 Date Time – 21-08-2025 16:50

Date: 21-08-2025

IC14661000K

Lt Gen sdsfdsa

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