

The Payment Of Gratuity(Central) Rules, 1972

FORM 'F'

[See sub-rule (1) of rule 6]
Nomination

To Finnovation Tech solutions Pvt Ltd

[Give here name or description of the establishment with full address]

1. Shri/Shrimati/Kumari SIDDESHWAR MALI
below,

[Name in full here]

hereby nominate the person(s) mentioned below to receive the gratuity payable after my death as also the gratuity standing to my credit in the event of my death before that amount has become payable, or having become payable has not been paid and direct that the said amount of gratuity shall be paid in proportion indicated against the name(s) of the nominee(s).

2. I hereby certify that the person(s) mentioned is a/are member(s) of my family within the meaning of clause (h) of section (2) of the Payment of Gratuity Act, 1972.

3. I hereby declare that I have no family within the meaning of clause (h) of section (2) of the said Act.

4.

(a) My father/mother/parents is/are not dependent on me.

(b) my husband's father/mother/parents is/are not dependent on my husband.

5. I have excluded my husband from my family by a notice dated the to the Controlling Authority in terms of the proviso to clause (h) of section 2 of the said Act.

6. Nomination made herein invalidates my previous nomination.

Nominee(s)

Name in full with full address of nominee(s)	Relationship with the employee	Age of nominee	Proportion by which the gratuity will be shared
1. PARASHURAM MALI S/O TUKARAM MALI 274, Mali Galli, Kagwad,	Father		100
2. Belgaum, Karnataka 591223			
3			
so on.			



Composite Declaration Form -11

(To be retained by the employer for future reference)

EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 & 57) &

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1	Name of the member		Siddeshwar Mali					
2	Father's Name <input checked="" type="checkbox"/>	Spouse's Name <input type="checkbox"/>	Parashuram Mali					
3	Date of Birth: (DD / MM / YYYY)		23-Jul-1998					
4	Gender: (Male/Female/Transgender)		Male					
5	Marital Status: (Married/Unmarried/Widow/Widower/Divorcee)		Unmarried					
6	(a) Email ID:		siddeshwar224@gmail.com					
	(b) Mobile No.:		8073874189					
7	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)		01-Jan-2021					
8	KYC Details: (attach self attested copies of following KYCs)							
	a) Bank Account No. :		375202010325597					
	b) IFS Code of the branch:		IFSC-UBIN0537527					
	c) AADHAR Number		895397805104					
	d) Permanent Account Number (PAN), if available		DGIPM6821A					
9	Whether earlier a member of Employees' Provident Fund Scheme, 1952		Yes / No		Yes			
10	Whether earlier a member of Employees' Pension Scheme, 1995		Yes / No		Yes			
	Previous employment details: [if Yes to 9 AND/OR 10 above] – Un-exempted							
11	Establishment Name & Address	Universal Account Number	PF Account Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non Contributory Period (NCP) Days
	Bigleap technologie & solutions Pvt Ltd	101691775762	APHYD1384 433000002671 6	28-APR-2021	31-DEC-2021			
	Previous employment details: [if Yes to 9 AND/OR 10 above] – For Exempted Trusts							
12	Name & Address of the Trust	UAN	Member EPS A/c Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non Contributory Period (NCP) Days	
	Bigleap technologies & solutions Pvt Ltd	101691775762	5041886496	28-Apr-2021	31-Dec-2021			
13	a) International Worker:			Yes / No				
	b) If yes, state country of origin (India/Name of other country)			No				
	c) Passport No.							
	d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]							

[illegible]