

ONLINE TRANSFER CLAIM FORM [FORM 13 (REVISED)]

(Tracking ID: 10028364789005001)

Claim Date: 16/12/2017

EMPLOYEES' PROVIDENT FUND SCHEME, 1952

(PARA 57)

(This form has been printed on the basis of Online Transfer Claim Form filled up by the member under Unified Portal for submission to the employer.)

To,

The Regional P.F. Commissioner,

BANGALORE.

Bhavishyanidhi Bhavan, No. 13, Raja Ram Mohan Roy Road, Bangalore

Sir,

I request that my Provident Fund balance along with my Pension Service Details may please be transferred to my present account under intimation to me. My details are as under :

PART A: PERSONAL INFORMATION

1. Name : VENKATESWARLU PALLAMALA

2. Mobile Number : 9902033892

3. E-mail id : p.venkatesh551@gmail.com

4. Bank Account Number : 50100089428252

5. Bank IFSC : HDFC0000053

PART B: DETAILS OF PREVIOUS PF ACCOUNTS (WHICH IS TO BE TRANSFERRED)

1. PF Account No. (with EPFO office): BGBNG00433380000000137

2. Name of the Establishment : VIRIDENT SYSTEMS (P) LTD

3. Address of the Establishment : HULKUL BRIGADE CENTRE, NO.82 LAVELLE ROAD BANGALORE 656

4. PF A/C No. held by : BANGALORE

5. Name of the Trust : NOT APPLICABLE

6. PF A/C No. in Trust : NOT APPLICABLE

7. Bank A/C No. of Trust : NOT APPLICABLE

8. IFS Code of the Bank Branch of

Trust where account is maintained: NOT APPLICABLE

9. Member's Name : VENKATESWARLU PALLAMALA

10. Date of Birth : 19/06/1987

11. Father's/Spouse Name : GANGADHARAM PALLAMALA

12. Relationship : FATHER

13. Date of joining : 09/03/2015

14. Date of leaving : 30/09/2017

PART C: DETAILS OF PRESENT PF ACCOUNT

1. PF Account No. (with EPFO office): PYBOM00349050000011603

2. Name of the Establishment : SANDISK INDIA DEVICE DESIGN CENTRE PVT. LTD.

3. Address of the Establishment : SY NO. 143/1, AMANI BELLANDUR VILL PRESTIGE TECK PARK,

MARATHALLÍ-SARJ BANGALORE 656

4. PF A/C No. held by : BANGALORE

5. Name of the Trust : NOT APPLICABLE

6. PF A/C No. in Trust : NOT APPLICABLE

7. Bank A/C No. of Trust : NOT APPLICABLE

8. IFS Code of the Bank Branch of

Trust where account is maintained: NOT APPLICABLE

9. Member's Name : VENKATESWARLU PALLAMALA

10. Date of Birth : 19/06/1987

11. Father's/Spouse Name : GANGADHARAM PALLAMALA

12. Relationship : FATHER

13. Date of joining : 01/10/2017

I, Certify that all the information given above are true to the best of my knowledge and I have ensured the correctness of my present and previous account numbers.

Signature of the member

Note: Member should take a printout of this form and a signed copy of the same should be submitted to the Present Establishment i.e. SANDISK INDIA DEVICE DESIGN CENTRE PVT. LTD.