**BOSCH**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Checklist details for submission of Retiral Documents** | | | | | | | | | |
| Full Name of the Employee | | | : | | | | | | |
| Employee Number | | | : | | | | | | |
|  | | | | |  | | | | |
| RBEI/ CTG -Retirals Comments : | | | | | | | | | |
| Signature of the Person Verified (with date) : | | | | | | | | | |
|  | | | | | | | | | |
| S.NO | CHECKLIST DETAILS FOR SUBMISSION OF RETIRAL DOCUMENTS FOR PROVIDENT FUND | | | | | | (PLS  WHEREVER APPLICABLE) | | |
|  | **Employees’ Provident Fund :** | | | | | | Yes | | NA |
|  | Application Form towards Provident Fund Settlement | | | | | |  | |  |
|  | Form - 10C (If the total service is < 10 years) | | | | | |  | |  |
|  | PF Declaration Form | | | | | |  | |  |
|  | 2 Pan Card Copies /Acknowledgement Receipt Copy (If applied for PAN) | | | | | |  | |  |
|  | 2 Aadhar Card Copies / Acknowledgement of Enrolment | | | | | |  | |  |
|  | Copies of Form 16 from DOJ to DOL (If the total service is < 5 Years) (in case you are not able to provide Form 16, TDS at the highest rate will be deducted) | | | | | |  | |  |
|  | 2 Cancelled Cheque’ s (Beneficiary name & IFSC Code should be available, If not get a letter from bank with Beneficiary Name, IFSC Code and Branch Details in Bank letter Head ) (*Bank Account Proof*) | | | | | |  | |  |
| **Gratuity Fund :** (*If applicable, Attach a PAN Card Copy, Aadhar Copy & Bank Account Proof)*  7. Applicable if the employee is in service with RBEI for > 4 Years 240 Days | | | | | | |  | |  |
| **Superannuation :** (*If applicable, Attach a PAN Card Copy, Aadhar Copy & Bank Account Proof)*  8. Applicable if the employee is in service with RBEI for > 5 Years | | | | | | |  | |  |
| A | Application for Superannuation Fund Settlement | | | | | |  | |  |
| B | Age Proof (10th Mark sheet, Driving License, Passport,) | | | | | |  | |  |
| C | Address Proof (Ration Card, Voter’s ID, Driving License, Passport, Gas Bill, House Agreement, Etc.) | | | | | |  | |  |
| D | LIC Forms to be filled & Passport Photo should be attached along with that. (*Applicable for Associates age above 40 years old*) | | | | | |  | |  |
| I hereby confirm & acknowledge that the above checklist has been filled correctly and all information given above and as attachments is true to the best of my knowledge. | | | | | | |  | | |
| Signature (Associate) | | |
|  | | | | | | | | | |
| **For Office Use** : | | | | | | | | | |
| Date of Leaving | | Date of Receipt | | Submission to HR | | Receipt from HR | | Dispatch to ADP | |
|  | |  | |  | |  | |  | |