

## **APPLICATION FOR GRATUITY BY EMPLOYEE**

The Secretary,  
Board of Trustees,  
IRCON Employees Group Gratuity Trust,  
IRCON International Ltd.,  
Palika Bhavan, RK Puram,  
New Delhi.

Sir

I hereby apply for payment of gratuity to which I am entitled (Rules and Regulations of the IRCON International Ltd. Employees Group Gratuity Trust) on account of my superannuation / retirement / resignation after completion of not less than five years of continuous service / total disablement due to accident / total disablement due to disease with effect from \_\_\_\_\_

Necessary particulars relating to my appointment in the Company are given in the statement below –

- 1 Name in Full
- 2 Address in full
- 3 Deptt / Branch / Section where last employed.
- 4 Post held
- 5 Date of appointment
- 6 Date and cause of termination of service
- 7 Total period of service
- 8 Amount of wages last drawn

I was rendered totally disabled as a result of (here give details of the nature of disease or accident)

The evidence / witnesses in support of my total disablement are as follows (here give details)

Payment may please be made in cash/open or crossed bank cheque/demand draft.

As the amount of gratuity payable is less than Rs.1000/- (Rupees one thousand only), I shall request you to arrange for payment of the sum due to me by postal money order at the address mentioned above after deducting postal money order commission.

Yours faithfully

Place: \_\_\_\_\_

Date: \_\_\_\_\_