

THE CEYLON PLANTERS' PROVIDENT SOCIETY

Trustee: The Planters' Association of Ceylon (Inc)



P.O.Box 855
32, Vajira Road
Colombo 05
Sri Lanka

Telephone : Colombo - 2507604
Fax : Colombo - 2502265
Email : pack@eureka.lk

Please Quote Membership Number

APPLICATION FOR PARTIAL WITHDRAWAL OF PROVIDENT FUND

1. Full Name :
2. Membership Number : 3. Date of Birth :
4. Present Address :
5. Contact Telephone No : 6. Income Tax File No:
7. Name of Employer :
8. Designation :
9. **ATTACH** a letter from your employer confirming your employment/retirement
10. Amount applied for :
11. Bank Account Details - Name of Bank :
- Branch :
- Account No. (Current/Savings):

I confirm that I am aware that this withdrawal is subject to the following:

- *I will not be eligible to obtain any Housing/Educational Loans and Life Insurance hereafter.*
- *Should the balance in my account at any time be insufficient to effect the annual premium of my existing insurance policy/ies, I hereby give my consent to convert same to a paid up policy*

I hereby declare that to the best of my knowledge and belief all the statements contained in this declaration are true and correct.

Date:..... NIC No:..... Signature of Member.....

CERTIFICATION OF SIGNATURE OF APPLICANT

I hereby certify that the appended signature is of Mr/Mrs/Miss.....
.....NIC No.....

.....
Signature of Member

.....
Signature of Employer
Official Rubber Stamp of the Employer