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

1. Full Name

Please Quote Membership Number

APPLICATION FOR PARTIAL WITHDRAWAL OF PROVIDENT FUND

2. Membership Number	:
4. Present Address	<u></u>
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	<u>.</u>
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 true and correct.	of my knowledge and belief all the statements contained in this declaration are
Date: N	C No: Signature of Member
CERTIFICATION OF SIGNATURE OF APPLICANT	
• • • • • • • • • • • • • • • • • • • •	ded signature is of Mr/Mrs/Miss
Signature of Member	Signature of Employer Official Rubber Stamp of the Employer (a)
Note: -	Official Rubber Stamp of the Employer (a)
(a) Should be certified	by a Director, CEO, General Manager of the company, Board/ Corporation or

Attorney-at-Law N.P., / Commissioner of Oaths/ Notary, under the official seal.