(For serving Members)

То The Regional P.F. Commissioner, Employees' Provident Fund Organisation Ministry of Labour & Employment Govt. of India, Regional Office Bhavishya Nidhi Bhavan 24, Patto Plaza Complex

PANJIM - GOA

	ed upon the hon'ble	Supreme Court's Order in SLP No						
1.	With reference to the above, I hereby opt for higher pension (Pension on full salary i.e. the salary on which EPF is deducted) under Para 11(3) OF THE EPS, 1995 & Para 11(4)since my joining in GSL w.e.f							
2.	I being the member of EPF 1995, authorize EPFO to divert 8.33%ofthe salary exceeding Rs.5000/- or 6500/-or 15000/- to the Pension Fund from the effective date (i.e. w.e.f) with up to date interest as declared under EPF scheme,1952,from time to time.							
3.	I also do hereby agree to contribute @ 1.16% on my salary (Pay +DA) exceeding Rs.15000/-p.m. from my/employer share of contribution, w,e,f 01/09/2014 onwards subject to final directives of Hon'ble Supreme Court of India in this regards.							
4.	I also understood all the terms and conditions governing the Higher Pension option of EPF – 1995 and I am willing to abide by all the terms & conditions. I understand that the Joint option form shall be subject to acceptance by EPFO as per Rules. I further understand that the Option exercised is irrevocable at any later date, and no claim for change of option shall be entertained or considered under any circumstances.							
5.	I understand that the option exercised herein is subject to EPFO instructions and court directions issues from time to time in this regard. Yours faithfully,							
	Signature / Right Or Left Hand/ Thumb Impression of the Employee							
[Name		Designation					
	EPF No	GA/GOA/0009706/000	UAN No					
	Aadhaar No	<u> </u>	E.No.					
	Place of posting		L.NO.					
	r lace or posting							
		Declaration by	the Employer					
	Accepted and rec	commended for affording nece	essary higher cor	ntribution from the employer's				
	share of Provident Fund holding, diverting to Employees Pension Scheme. GSL shall comply with all statutory provision in this regard.							
			S	IGNATURE(with office Seal)				

PERMISSION UNDER PARA26(6) OF EPF & MP ACT,52

<u> </u>	S/o	P.I	F. AccountNo
GA/GOA/0009706/000	_, Employee of Goa	Shipyard Ltd. is o	drawing more than Rs.5000
w.e.f. 16.11.1995 / Rs.65	500/- w.e.f.01.06.2001 /	'Rs.15000/- w.e.f.0	01.09.2014. I therefore reques
your good office that	I may be permitted	to contribute to	the fund on my actual pa
w.e.f.16.11.1995 or	(DOJ).		
		SIGN	IATURE OF THE APPLICAN
<u>UN</u>	NDERTAKING ON BEH	IALF OF THE EMP	PLOYER
<u>I</u>	an	authorized signa	atory of Goa Shipyard Ltd
undertake that in the even	ent of allowing aforesa	id applicant to con	ntribute on actual pay which i
more than Rs.5000/v	v.e.f.16.11.1995 and	Rs.6500/- w.e.f.0	1.06.2001 and Rs. 15000/
w.e.f.01.09.2014, GSL s	shall comply with all s	tatutory levies of t	the said act and the scheme
framed thereunder and th	ne directives of Hon'ble	Supreme court of I	India in this regards.
		S	SIGNATURE (with office seal
	FOR USE OF COM	MISSIONER OFFI	<u>CE</u>
Dated:			
<u>I</u>	Re	gional Provident	Fund Commissioner, Goa i
exercise of powers confe	erred under Para 26(6)) of the EPF, & MF	P. Act,1952 hereby permit the
member to contribute to	the fund on wages exc	eeding Rs.5000/- w	v.e.f.16.11.1995 and Rs.6500/
w.e.f.01.06.2001 and Rs.	.15000/- w.e.f.01.09.20	14.	
	CCIONED		
REGIONAL P.F. COMMI M/s.	SSIONER		
Copy:- 1) Employees Perso	onal File		

(For EPFO pensioner)

Application by Pensioners for revision of pension under the Employees' Pension Scheme 1995 on actual (higher) wages exceeding the wage limit of Rs. 5000/- or Rs.6500/- or Rs.15000/- per month.

1	Name of pensioner				
2	PPO No. with EPFO Branch address				
3	EPF A/c No.	GA/GOA/0009706/000			
4	Name of pension disbursing Bank & Branch with IFSC Code				
5	Bank A/c No.				
6	Mobile No.				
7	Aadhaar No.				
8	UAN No.				
	<u>Declaration</u>	n by Pensioner			
am a pensioner under the Employees' Pension Scheme, 1995 drawing monthly pension with effect from					
Place		Signature			
Date:	•				
Dutc.					
		Address:			
	Hadar	Address:			
	Under	taking by the Employer			
I autho	rized signatory of Goa Shipyal who	(Name& Designation) being the td Ltd. do hereby certify that Mr./Mrs. is the holder of PPO No.			
was a his/he contril Emplo documexit is Comm	rized signatory of Goa Shipyan who nemployee of this establishment with I r service, we as the employer's have oution on his actual salary, without broyees' Provident Funds Scheme. Certificents in respect of the said individual w	(Name& Designation) being the d Ltd. do hereby certify that Mr./Mrs. is the holder of PPO No. PF A/c No. contributed the employer's share of provident fund eak, as per the terms of paragraph 26(6) of the ied details of monthly contribution alongwith other e.e.f.16.11.1995 or the date of joining /to the date of sessary action by the Regional Provident Fund			
was a his/he contril Emplo documexit is Comm	rized signatory of Goa Shipyan who nemployee of this establishment with I r service, we as the employer's have coution on his actual salary, without broyees' Provident Funds Scheme. Certification in respect of the said individual was forwarded herewith for further necessioner. Ty that the particulars furnished are correspondents.	(Name& Designation) being the d Ltd. do hereby certify that Mr./Mrs. is the holder of PPO No. PF A/c No. contributed the employer's share of provident fund eak, as per the terms of paragraph 26(6) of the ied details of monthly contribution alongwith other e.e.f.16.11.1995 or the date of joining /to the date of sessary action by the Regional Provident Fund			