

CENTRAL AGRICULTURAL RESEARCH INSTITUTE
PORT BLAIR – 744 101

APPLICATION FORM FOR GRANT OF LTC/AFP ADVANCE FOR CARI EMPLOYEES

1. Name of the Govt. Servant
2. Designation
3. Date of entering the Council's Service
4. Present Pay
5. Whether permanent or temporary
6. Home town as recorded in the Service Book
7. Whether wife/husband is employed and if so whether entitled to AFP/LTC
8. Whether the concession is to be availed for visiting for which LTC is to be availed.
9. (a) If the concession is to visit 'anywhere in India', the name of place to be visited:-
 (b) Block for which to be availed:-
 (c) AFP year of availing should be shorted (calendar year only)
10. Single Rail fare/Bus fare/Ship fare from the headquarters to home town/place of visit by shortest route:-
11. Persons in respect of whom LTC/AFP is LTC/AFP is proposed to be availed

Sl. No.	NAME	AGE	Relationship to the employee

12. Amount Advance required :

Contd.2/-

DECLARATION

I declare that the particulars furnished above are true and correct to the best of my knowledge. I undertake to produce the tickets for the outward journey within ten days of receipt of the advance.

In the event of cancellation of the journey or if I fail to produce the tickets within ten days of receipt on advance, I undertake to refund the entire advance in one lumpsum.

Station : **Signature &**
Date : **Designation**

(FOR USE OFFICE ONLY)

Sanction of the Competent Authority for availing of concession has been accorded vide Office Order.....No.
The above particulars have been checked. The amount of advance is not more than that admissible as per rules, an advance of Rs. (Rupees.....
.....only) is admissible for the purpose.

Signature of Dealing Assistant)

ORDER OF SANCTION AUTHORITY :

Sanction an amount of Rs.

Director/Administrative Officer