

**APPLICATION FORM FOR CLAIMING SPECIAL CASH PACKAGE EQUIVALENT IN LIEU OF LTC FOR THE BLOCK 2018 – 2021**

Sl. No.	Particulars			Remarks	
1.	Name of the Employee				
2.	Designation				
3.	Employee Code				
4.	Department / Section				
5.	Date of entering in to the Service				
6.	Contact Number / E-mail				
7.	Basic Pay with Pay Level (for 7 <sup>th</sup> CPC)				
8.	Whether wife / husband employed				
9.	Block period for which LTC to be availed				
10.	Persons in respect of whom Special Cash Package Equivalent in Lieu of LTC for the Block 2018-21 is proposed to be availed				
S. No.	Name	Relationship	Date of Birth	Age	Dependency Status
1.					
2.					
3.					
4.					
5.					
11.	Entitlement of Deemed LTC Fare(Write the category of Entitlement of Deemed LTC Fare)			(a) Business class of Airfare (Rs.36,000/-) – Level 14 & above (b) Economy class of Airfare (Rs.20,000/-) – Level 9 to 13-A (c) Rail Fare of any class (Rs.6,000/-) – upto Level 8	
12.	No. of days of Earned Leave for Leave encashment, If required			Yes/No	
13.	Advance required			Yes/No	
14.	Eligibility: (a) Amount equal to Leave encashment (100%) = (Basic Pay * 1.17)*10/30 (b) Amount 3 times of cash equivalent of deemed fare = (Deemed LTC fare per person * No. of Dependents)  <b>Total (a+b)</b>			(a) Rs. _____  (b) Rs. _____  <b>Rs. _____</b>	

15.	<p><b>Condition to claim admissible amount:</b></p> <p>(a) Amount equal to Leave encashment (100%) = (Basic Pay * 1.17) * 10/30</p> <p>(b) Amount 3 times of cash equivalent of deemed fare = 3 * (Deemed LTC fare per person * No. of Dependents)</p> <p style="text-align: right;"><b>Total (a+b)</b></p> <p>If spent less than a+b, proportionate claim be given</p>	<p>(a) Rs. _____</p> <p>(b) Rs. _____</p> <p style="text-align: right;"><b>Rs.</b> _____</p>
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**Undertaking by the Applicant:**

1. I undertake to settle the advance as earlier as possible not beyond 31<sup>st</sup> March, 2021.
2. I undertake to submit the digital payment proof for each transaction claimed.
3. If I fail to comply the points (a) or (b), the amount of advance can be deducted from my salary of the next month(s).
4. I certify that persons availing LTC cash package are wholly dependent on me.
5. I accept that any wrongful information leads to disciplinary action.

**Certified that:**

1. The information as given above is true to the best of my knowledge and belief.
2. That my husband / wife is not employed in Government Service / that my husband / wife is employed in Government Service and the concession has not been availed by him / her separately for himself / herself or for any of the family members for the concerned block of years 2018 to 2021.
3. That my husband / wife for whom LTC claimed by me is employed in \_\_\_\_\_ (Name of the Public Sector Undertaking / Corporation / Autonomous Body, etc.,) which provides Leave Travel Concession facilities but he / she has not preferred yet and will not prefer, any claim in this behalf to his / her employer.
4. That my wife / husband for whom LTC / HTC is claimed by me is not employed in any Public Sector Undertaking / Corporation / Autonomous Body financed wholly or partly by the Central Government or a Local Body which provides LTC / HTC facilities to its employees and their families.
5. I also declare that my father / mother / husband / wife Shri. / Smt. \_\_\_\_\_ is not a Pensioner / Family Pensioner of Central / State / any undertaking body of Government and his / her monthly income is less than Rs.9,000/- per month.

**Note:**

- The Scheme is available for this Financial Year 2020-2021 (i.e) upto 31<sup>st</sup> March, 2021.
- The amount both on account of leave encashment and fare shall be admissible if the employee spends (i) an amount equal to the value of leave encashment and (ii) an amount 3 times of the cash equivalent of deemed fare on purchase of such items / availing of such services which carry a GST rate of not less than 12% from GST registered vendors / service providers through digital mode and obtains a voucher indicating the GST number and the amount of GST paid. The invoice and receipt should be in the name of the employee concerned only and payment should be made through Digital Mode only. “ The proof for each payment to be attached while claiming the benefit”.
- Staff who have completed one year of services is eligible for grant of this scheme may use any one of the LTC available in a Block Year.
- If the reimbursable amount is less than the advance drawn, this would be treated as under-utilization. However, after calculation of the claim, balance amount, if any may be recovered from the employee with penal interest.
- The reimbursement is based on production of invoice with details of GST. As far as possible, claim should have been made and settled well before 31<sup>st</sup> March, 2021 to avoid any last minute rush and resultant lapse. The invoice which is being submitted for reimbursement under the scheme should be in the name of the employee who is availing the scheme.

**Date:**

**Signature of the Employee**



**DETAILS OF GOODS / SERVICES PURCHASE / AVAILED TO CLAIM SPL CASH  
PACKAGE IN LIEU OF LTC (Refer Sl. No. 16 (b) )**

<b>Sl. No.</b>	<b>Description of Goods / Service</b>	<b>Invoice No.</b>	<b>Value of Invoice without GST</b>	<b>GST % and Value</b>	<b>Total Invoice Value</b>

Signature of the Employee

**Bank Details:**

Name:

Bank Name:

Branch Address:

Account Number:

IFSC Code:

**(FOR OFFICE USE ONLY)**

**Estt Section :**

1.	He / She has not availed LTC for respective block year		
2.	Particulars in Col. 1 to 10 have been verified		
The claim for the grant of Special Cash Package equivalent in lieu of LTC for the block 2018-21 may be considered for approval.			
<b>Dealing Assistant</b>	<b>S.O.(Administration)</b>	<b>A.O.</b>	<b>Principal</b>

**Accounts Section :**

3.	<b>Advance entitled for Leave Encashment :</b> (a) Leave encashment (100%) = (Basic Pay * 1.17) 10/30	
4.	<b>Advance entitled for Deemed LTC Fare :</b> (b) Deemed LTC fare (50%) = (Deemed LTC fare per person * No. of Dependents) / 2	
<b>Total advance (a+b)</b>		
<b>FOR SETTLEMENT</b> (to be filled at the time of settlement of advance / claiming without advance)		
5.	Total advance availed	
6.	Total bills submitted for claim	
7.	Total eligible amount	
<b>Dealing Assistant      S.O.(Accounts)      A.O.      Bursar      Principal</b>		