## PAKISTAN ATOMIC ENERGY COMMISSION FOUNDATION P.O BOX NO. 216, ISLAMABAD

APPLICATION FOR INTEREST FRE		NEEDS
(Beneficiaries: Officer an		
1. Applicant's Name: (PART-	- 1)	
1. Applicant's Name:		
2. (a) PIN: 2.(b)CNIC#		
3. Designation:	4. Pay-Scale	
3. (a) Current / Last Establishment	5. (b) Previous Establishme	ent
<ul> <li>6. Bank Account Detail (Project / Establishment):-</li> <li>6. (a) Title of bank account</li> </ul>	6. (b) Bank N	Jame
6. (c) IBAN (24Digit Bank Account No.)		
7 (a) Pay-Scale 7(b) Basic Pay at the time of	application Rs	
8. Date of Superannuation / Termination of Contract:		
9. CFP contribution Date:		
<u>(</u>	Month & Year)	
10. (a). Availed any grant / loan from Foundation?	No	L.
Yes     10. (b) If yes, give detail.	No	
11. (a) Purpose of Loan:(Mention amount and datMedical□	e) Oth	er
11. (b) Specify other purposes		
- For Medical Purposes please fill Part II (A	A).	
- For other Purposes please fill Part II (B).		F
12. Any loan from other sources: Yes	No	
13. If Yes, specify the source:		
	IBA 🗌 EW	
	Private Oth	
Principle Amount: Rs Monthly Installments: Rs	Sanctioning Date:	eft:
Montiny instantients. Ks	No. of instantients	
14. Declaration by the Applicant.		
I declare that I have been informed / read the terms &		d I solemnly declare tha
the above information is true to the best of my knowled	dge and belief.	
Date:		
	Signature of the applicant w	ith contact #
15. <u>Endorsement from Head of Administration.</u> <i>The information given by the applicant is verified.</i>		
Date:		
	re & Stamp)	
16. Recommendation of Head of Establishment.		

The information given by the applicant is verified.

Date: \_\_\_\_\_

(Signature & Stamp)

# INTEREST FREE LOAN FOR GENUINE NEEDS TERMS & CONDITIONS

## LOAN AMOUNT:

- Rs. 150,000/- for in-service employees in *Pay-Scale* 1-7
- Rs. 300,000/- for in-service employees in *Pay-Scale* 8 and above.

## **RATE OF RECOVERY:**

25 installments @ Rs. 6,000 per month for Rs. 150,000/- loan
 25 installments @ Rs. 12,000 per month for Rs. 300,000/- loan

The amount and number of installments are adjustable in case superannuation / retirement / Contact Termination falls within the Recovery period.

## **ELIGIBILITY CRITERIA**:

- **10 years** continuous service.
- **5** years continuous CFP Membership.
- An applicant can apply for second time after **<u>TWO Years of full repayment</u>** of previous loan.
- An applicant can avail this facility upto maximum **3 times** in the entire service

#### **INSTRUCTIONS:**

- Application Form **filled-in** by the applicant should be verified / attested by <u>Head of</u> <u>Establishment</u> with dated signatures and stamp.
- Application should be forwarded **through proper channel.**
- Requests regarding Hajj / Umrah / Aqiqia and Daughter's Marriage are not acceptable.

NOTE: - The Applications failing to fulfill the required criteria will not be entertained.

## PAKISTAN ATOMIC ENERGY COMMISSION FOUNDATION P.O BOX NO. 216, ISLAMABAD <u>Application for</u> Interest Free Loan for Genuine Needs

#### (PART-II)

#### A- MEDICAL TREATMENT / EQUIPMENT / APPARATUS PROVISION

For whom requested: Self $\Box$ Spouse $\Box$ Pa	arent 🗌 Chil	d 🗌 Other	
Disease / Ailment Diagnosed:			
Equipment / Apparatus required (If any):			-
Whether covered under NCA Medical Rules?	Yes	No	

#### **DOCUMENTS REQUIRED**

- Attested copies of Doctor's prescription, treatment history including Diagnosis report, Admission / Discharge certificates etc. (preferably from PAEC Hospitals).
- Attested copy of prescription of concerned Consultant for medicine / Apparatus / Equipment with make and model.
- Estimated expenditure report like attested copies of cash memos or at-least three quotations regarding apparatus / equipment price etc.
- Dependency certificate regarding parents, children or others in case the applicant is not applying himself / herself.
- Copy of one leaf of recent cheque book.
- Verification by Head Admin that the applicant's case is not covered under NCA Medical Rules.

#### B- OTHER PURPOSES

Specify the purpose:				
Return of Loan Darriage of Dependant Son / Sister				
House damage due to Natural Disaster				
Any other purpose				

## **DOCUMENTS REQUIRED**

## Common to All Schemes and All Applicants: -

- □ Attested copy of 1<sup>st</sup> & 2<sup>nd</sup> pages of the Service Book showing his / her personal profile including, dates of joining and superannuation.
- Attested copy of immediate **previous month's pay slip**.
- Attested copy of **CNIC**.
- Certificate (in original) from concerned Head, LAO indicating Month and Year of Central Financial Pool (CFP) Membership.
- Signed Irrevocable authorization for recoveries of loan from Head LAO with dated signature and stamp.

## **Additional Documents**

## A- Return of Bank or other Loans:

- Attested **One Year Bank Statement** of the applicant's personal (**Salary**) Bank account showing principal amount of loan and installments deducted. (If any) Prudential / Loan estimation statements issued by Banks will not be acceptable.
- □ In case of personal loan, undertaking detailing the loan amount, period, date and purpose on plain paper with clear names, signatures, CNIC Nos., Cell. Nos. of both the lender and the borrower. The document should be countersigned by the Head (Admin) / Administrator of the concerned Establishment. The amount should also be reflected in the Bank Statement.

## B- Marriage of Dependant Son / Sister:

- **Dependency Certificate from Head (Admin)**
- Attested copy of 'Family **Registration Certificate**' OR "B-Form' issued by NADRA.
- Attested **copy of the Nikah-Nama indicating** date of registration of Nikah with dated Signature and stamp of Nikah *Registrar*.
- Attested copy of Marriage Registration Certificate issued by NADRA.
- C- House Damage due to Natural Disaster:
- □ Statement on plain paper clearly mentioning the extent of damage, address of the damaged house with date and nature of disaster alongwith repair estimates certified by local government official with his dated signatures and stamp.
- **Two photographs of the damaged house** duly verified from local government officials and Head Admin of concerned Project/Establishment.
- □ Attested copies ownership proof of the damaged property.

## D- Any other Purpose:

Certified copies of documents that could fairly establish the genuineness of the case.

## PAKISTAN ATOMIC ENERGY COMMISSION FOUNDATION P.O BOX NO. 216, ISLAMABAD

#### CONSENT OF RECOVERY IRREVOCABLE AUTHORIZATION FOR RECOVERIES OF LOAN

1. a loar	I, n amountir	ng to	Rs	9	/-	from	PAEC	, Foundation		plied to ob purpose	
				(Specify	purpo	ose,)					•
		/- ( <b>R</b> s	t	housand				) installm		only)	per
3.	I irrevoo	cably						Officer / rting from th	0		

\_\_\_\_\_\_, to carry out above recoveries starting from the above cited date and remit the same to PAEC Foundation. In case of my transfer to any other Establishment, the outstanding installments may be indicated in my LPC and will continue to be deducted at new place of duty.

4. In case of failing to comply with or any procedural default in this regard, I undertake to remit the entire loan amount in lump-sum to the Foundation. I also **Irrevocably authorize** Head, LAO, / Accounts Officer / Manager (Finance) \_\_\_\_\_\_ to make recoveries at source from my payable dues immediately for remittance to the PAEC Foundation.

5. In case of my early retirement / resignation / termination of contract / death, stoppage of payment of salary for any reason whatsoever, or on dissociation from service, I **further authorize** PAEC to recover the out-standing dues in lump sum from my pensioney or other payable dues including Gratuity / GPF / CPF and immediately transfer the same to PAEC Foundation.

Dated: \_\_\_\_\_

(Signature of the Applicant)

## **Endorsement**

As per authorization, of recovery above, an amount of Rs. \_\_\_\_\_/- p.m will be deducted at source from the salary of Mr. / Mrs. / Dr. \_\_\_\_\_,

\_\_\_\_\_\_on account of recovery of loan of Rs. \_\_\_\_\_\_/- and will be remitted to PAEC Foundation by 10<sup>th</sup> of every month. In case of transfer of officer to any other Establishment, necessary instruction will be passed on to the concerned Head, LAO.

Dated Signature with stamp of the Head LAO