



ཀྲུལ་ཡོངས་དགོངས་ལཱ་ལེ་རྒྱུ་ཕོགས་དང་འཚོ་རྟོག་མ་དངུལ་།།

**NATIONAL PENSION AND PROVIDENT FUND  
EDUCATION LOAN APPLICATION FORM**  
Documents to be attached with application

**A. Provident Fund as Security**

- |  |                      |
|--|----------------------|
| 1. Application Form  | <input type="text"/> |
| 2. One passport size photograph of the applicant   | <input type="text"/> |
| 3. New Citizenship Identity Card copy  | <input type="text"/> |
| 4. One year in service & Departmental Undertaking Letter from the Agency   | <input type="text"/> |
| 5. New Citizenship Identity Card Copy of the Applicants' beneficiary   | <input type="text"/> |
| 6. One copy of passport size photographs of the beneficiary (if applicable)  | <input type="text"/> |
| 7. Proof of Admission in the school/college/university and Institution   | <input type="text"/> |
| 8. Letter of Guarantee, Marriage Certificate, one passport size photograph and new I.D. Card Copy of the spouse if the spouse wishes to mortgage the Accumulated PF balance. | <input type="text"/> |

**B. Additional Security (Immovable Security –Land and Building)**

- |   |                      |
|---|----------------------|
| 9. Original Ownership Certificate of Land and Building  | <input type="text"/> |
| 10. Approved drawings and Plans   | <input type="text"/> |
| 11. Recent photographs of the building  | <input type="text"/> |
| 12. Approval from respective Authorities  | <input type="text"/> |
| 13. Letter of Guarantee , Marriage Certificate ,one passport size photograph and New I.D. Card Copy of the spouse, if the property is registered in the name of spouse                                    | <input type="text"/> |
| 14. Letter of Guarantee, one passport size photograph and New Citizenship Identity Card copy of the property owner, if the property is owned jointly or registered in the name of close <i>relative</i> . | <input type="text"/> |
| 15. Insurance certificate of the building   | <input type="text"/> |

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**PABX : 324140 / 325758 / 325638 / 325512 / 334788 (PF) / 334787 (CREDIT) / 323233 /328179 (RE)**  
**FAX : 324306 / 334790 / 337179/ 334786, P.O. Box No. 1046, THIMPHU**  
**WEBSITE : <http://www.nppf.org.bt>, E-mail: [npb@druknet.bt](mailto:npb@druknet.bt)**  
**HOTLINE No- 139 SMS SIM No. 1101 or 17117371**



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**NATIONAL PENSION AND PROVIDENT FUND  
LOAN APPLICATION FORM**

Application Date...../...../.....

**PART I  
A. Loan Application Information**

1. **Category:**       Civilian       Armed Forces       Others specify.....
2. **Loan Type:**       Housing Loan       Education Loan       Others specify.....
- (i) Amount of Loan requested      Nu. ....
- (ii) Term required      .....years
3. **Collateral Security**     PF Balance       Immovable property

**B. Borrower Information**

Name : ..... NPPFP No. : .....

Sex                               Male       Female

Father's name: .....

Date of Birth             

Married:                       Yes       No      Name of Spouse:.....

**Permanent Address**

Village      : .....      Dzongkhag :.....

Gewog      : .....      House No      : .....

Thram No : .....



**C. Employment Information**

Citizenship ID No.            Date of Joining Service:     

Employee ID No.            Date of Retirement     

Position/Title: .....

Name & Address of the Employer: .....

Telephone Nos:                      Home: .....      Office:.....

E-mail Address: .....      Mobile No.:.....

Fax No: .....

**Signature of the applicant** : .....

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NATIONAL PENSION AND PROVIDENT FUND

Departmental Undertaking

To  
National Pension & Provident Fund  
Thimphu

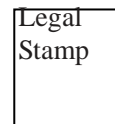
Date:-...../...../.....

Mr./Mrs./Miss.....a regular employee of .....has applied for a Members Education Loan of Nu. .... (Ngultrum.....) from the Pension Fund for the Purpose of education. If the loan is sanctioned, we hereby undertake to deduct the monthly installment from his/her salary and remit it to the Fund until the loan is fully liquidated.

In the event of the employee being suspended of resigning/absconding or being terminated from the service, we hereby undertake to recover the loan outstanding from his/her accumulated service benefits including Gratuity. In case of transfer of the employee, we shall inform the concerned department to deduct the monthly installment and remit it to the Fund without fail.

His/her employment information & salary structure:- (to be filled by Accounts Division)

Designation.....	NPPF A/c no.....	
Grade.....	Joining Date.....	
Earnings: Basic pay..... Allowance ..... Gross pay.....		
<b><u>Deductions:</u></b>		
P/F.....	Salary Tax.....	Health Tax.....
House Rent.....	GIS.....	Vehicle Loan.....
Housing Loan.....	Personal Loan.....	Advance.....
Others.....		
Total Deduction.....	Net payable.....	
Seal Accounts Officer	Name.....	Signature.....



OFFICIAL SEAL

Signature & Seal of the Head of Department  
Name.....  
Address.....

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**To be completed by the School/College/Institution**

Date :

The Chief Executive Officer  
National Pension & Provident Fund  
Thimphu.

**PROOF OF ADMISSION**

This is to certify that:

Mr./Miss \_\_\_\_\_ So/Do \_\_\_\_\_

Village \_\_\_\_\_, Gewog \_\_\_\_\_,

Dzongkhag \_\_\_\_\_ holding House No. \_\_\_\_\_,

Thram No \_\_\_\_\_, Citizenship Identity Card No. \_\_\_\_\_,

Registration No. \_\_\_\_\_ is studying in \_\_\_\_\_ standard during

the academic session \_\_\_\_\_ in our school/college/institution.

Yours faithfully,

**PRINCIPAL**



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Proposal No. ....

**LOAN PROTECTION INSURANCE PROPOSAL FORM**

Name of the proposer .....	Citizenship I/Card .....
Mailing Address .....	Nationality.....
Email Address.....	Phone /Mobile No.....
Gender: Male/ Female .....	Occupation .....
Proposer Date of Birth.....	Loan From.....

Sum Insured/Loan Amount Nu.....

Total Premium Nu.....

If the proposer wishes to nominate a person to whom the money secured by the policy applied for are paid to in the event of your misfortune, please mention the name of the nominee/s

Name of the nominee	I/Card No	Relationship	Age	%share.

Sl. No.	Benefits	Sum Insured (Maximum Liability)
i	Death of Insured Person on account of Accident or Misfortune	Sum insured or principal loan balance whichever is less
ii	Permanent Total Disability of Insured Person on account of Accident	-do-
iii	Natural death of insured Person	-do-
iv	Termination from service	50% of the sum assured or Principal loan balance whichever is less

I hereby warrant and declare the truth of all the above statement and that I have not withheld any material information and I agree that this proposal shall be the basis of the contract between me and the Company, I agree to notify the Company of any material alteration in my occupation, health or habits to accept a policy subject to the terms, exceptions and condition as prescribed by the Company.

Risk to commence on .....date.....

Signature of the proposer