

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

RISHIKESH

APPLICATION FOR GRANT OF L. T. C. ADVANCE

1.	Name of the Government Servant	:	
2.	Designation	:	
3.	Emp. Code No.	:	
4.	Telephone / Intercom No.	:	
5.	E-Mail Address	:	
6.	Date of entering the Central Government Service	:	
7.	Pay	:	
8.	Whether Permanent or Temporary	:	
9.	(a) Home Town-as Recorded in the Service Book	:	
	(b) Nearest Railway Station	:	
10.	Whether wife / husband is employed	:	YES/NO
	& is so whether entitled to L. T. C.	:	YES/NO
11.	Whether the concession is to be availed for visiting home town, and if so Block Year for which L.T. C. is to be availed.	Block Year:.....	
12.	If the concession is to be availed for visit "ANYWHERE IN INDIA", name the place to be visited and Block Year for which L. T. C. is to be availed.	Place..... Block Year.....	
13.	Nature of leave..... Or	From.....to.....	
	Proposed date for onward journey &	:	
	Proposed date for return journey	:	
14.	Single Rail/Bus fare from the Headquarter to Home Town /Place of visit by shortest route.	:	

15. Persons in respect of whom L. T. C. is proposed to be availed:-

Sl. No.	Name	Age	Relationship
1.			
2.			
3.			
4.			
5.			
6.			

16. Amount of advance required Rs. :

17. 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 10 days of the advance, I undertake to refund the entire advance in one lumpsum.

Dated:

(Signature of the applicant)

- Applicable in case of advance required for family members only.

CHECK LIST (Cash and Accounts Section)

1. Amount entitled for : Fare Rs. X 2 X (No. of tickets)
Reimbursement

2. Advance admissible (90% of the amount i. e. Rs.)

Advance of Rs.
may be sanctioned.

Dealing Hand

Signature of D. D. O.

CHECK LIST FOR ADMINISTRATION

L. T. C. advance to.....

1.	Block Year / Calendar Year	:	
2.	Home Town / A place anywhere in India	:	
3.	(a) For whom advance is applied for (b) Total number of persons	:	
4.	Specific grounds wanting sanction	:	for both / onwards/ return journey of advance under Rule G. F. 235 (2) (iii) (a)
5.	Leave application received		
6.	Amount of advance	Rs.	
7.	Temporary / Permanent		
8.	If temporary (surety bond produced)	Yes / No	
Necessary entry has been made in the L. T. C. for the Block / Calendar Year			

We may sanction the advance as per fair sanction letter placed below for approval and signatures of D. D. (Admin) please.

Dealing Hand

D. D. O.

D. D. (Admin)

Pro forma for self-certification by Government employee

1. I Sh./Smt./ Kr./ Dr.
(Name of the Govt. servant) wish to confirm that I am availing.....
(Home Town/ Any Place in India) LTC in respect of self/family member(s) for the block
year..... to visit..... (Place of visit) during
..... (dates of journey). It is stated that I or the family
member for whom I wish to avail LTC has/have not availed of the same before in the
present block.

2. Particulars of members of family in respect of whom the Leave Travel Concession is being
claimed are as under:

Sr. No.	Name(s)	Age	Relationship with the Govt. Servant

3. It is to certified that the above facts are true and any false statement shall make me liable
for appropriate action under Rule 16 of CCS(LTC) Rules, 1988 and the relevant disciplinary
rules.

- N.B.: Government employee may share interesting insights and pictures, if any, of the destination visited while availing LTC on an appropriate forum.