## UNEMPLOYMENT ALLOWANCE FORM



## **EMPLOYEES' STATE INSURANCE CORPORATION**



(Section 61 of ESI Act, 1948)

l	s/w/d of Sh
Insurance No.	have been declared unemployed due to closure
of the Factory/	Estt., retrenchment, permanent invalidity resulting from non-employment injury, as
per the Certific	ate in form UA-2 attached. I claim Unemployment Allowance accordingly for the
period from	to

I declare that I have contributed under the provisions of the ESI Act for the periods as per details overleaf.

	The	amount	due	may	be	paid	into	my	bank	A/c.	No
Bank				Bran	ch				,	IFSC	Code

- I also declare that:-
- 1. I have not taken up any gainful employment during the above period.
- 2. I am not in receipt of any other similar benefit admissible under the provisions of any other enactment.
- 3. I have not attained the age of superannuation or of 60 (sixty) years during the period of claim.
- 4. I have not been convicted u/s 84 of ESI Act.
- 5. I have not been rendered unemployed due to voluntary abandonment of employment, voluntary retirement, pre-mature retirement etc.
- 6. I have not been dismissed/ terminated under disciplinary action.
- 7. I have not challenged the closure/ retrenchment in any court of law.
- 8. I hereby undertake to repay the whole amount forthwith on demand by the ESIC, if it is found at any time that I was not lawfully entitled to that amount.

Dated:

Signature or Thumb Impression of the Claimant

Encl: UA-2

Permanent Address\_\_\_\_\_

Name, Address & Code No. of Factory/ Estt.

Important:-

Any person who makes a false statement or representation for the purpose of obtaining benefit, whether for himself or for some other person, commits an offence punishable with imprisonment for a term which may extend to six months or with a fine upto Rs.2,000/- or with both.