

Annexure – IV

SJVN	TRANSFER/JOINING TRAVELLING ALLOWANCE CLAIM			DIARY NO. DATE:
Name	Employee No.	Designation of joining new HQRs.		Deptt.
Scale of Pay	Pay	Old Station of Posting	Transfer order no. and date	Date of release from old station.
Whether transfer at the request of emp.	Whether spouse employed in SJVN at same station	If yes whether spouse transferred within 6 months to the same new HQRs.	Whether claiming HRA for a place other than new place of posting.	
YES/NO	YES/NO	YES/NO	YES/NO	
Detain of Family members accompanying on Transfer.				
Sl. No.	Name	Relationship	Age.	
Instructions: <ol style="list-style-type: none"> 1. Indicate ticket no or attach M/R wherever rail fare claimed is for other than IInd class, and for air journey enclose used ticket folders. 2. Where tickets are provided by the Company indicate the cost of tickets in remarks column with remarks "Ticket provided by the Company". The amount of ACC, surcharge, reservation charges, sleeper charges and superfast train surcharges should be shown separately, whenever possible. Copy of travel Agent's bill should also be enclosed. 3. Enclose copy of transfer order. 				

SECTION : JOURNEY FARE

Departure			Arrival			KMs	Air/Road/ Rail	Class	No. of fares	Rate	Amount		Ticket No. MR. No.
Date	Time	Station	Date	Time	Station						Rs.	P	

SECTION II : CONVEYNACE CHARGES.

Sl. No.	Date	Station	Place(s)		Distance KMS (approx.)	Means of travel	Amount	
			From	To			Rs.	P.

SECTION III : CONVEYNACE CHARGES.

Total Journey Period	DA admissible for journey period	No. of family members for the purpose of DA	Total no. of DA	Rate	Amount

SECTION IV : BAGGAGE ALLOWANCE:

Note : Enclose receipt(s) for amt. paid.

I) Carriage of personal effects	Place		Actual weight of personal effects	Distance in Kms.	Mode of Transportation	Actual amount paid	Amount Admissible.
	From	To					
Between residence(s) and Railyway Stn.							
Between Rail head to Rail head.							

II Transportation of Conveyance:

Particulars of conveyance	Mode of transportation	Actual amt. paid		Amount admissible		MR receipt no.

Calculation of TA.

Note : Enclose cheque if the amt. at SN. 7 is negative.

Particulars	Amount (Rs.)
1. Journey Fare	

Certified that :

- a) I have vacated the Company's lease accommodation at my old station of posting.
- b) I have not been granted HRA of given lease

2. Conveyance Charges		accommodation t a place of posting other than the new place of posting. Countersigned. Controlling Officer Name Designation & Seal				
3. Baggage Allowance						
4(i) for personal effects						
4(ii) for conveyance						
5. Transfer Grant						
6. Octrol etc.						
Total						
Less advance taken at						
7. Amount payable (+)						
Recoverable (-)						
(For use of Accounts Deptt)						
CC No,	Voucher No.	VR- Date	SC NA	Project	Deptt.	Emp.

Passed for payment of Rs. (in words).....
..... only.

Received Rs.....
..... only.

Account Code..... Amount..... Cash/Bank A/C.

.....
Cheque no. & Date Date.....

Acctt. AO/Sr. AO.