



PROVIDENT FUND CODE NUMBER INTIMATION LETTER

No : 1714547277JAL

Date : 02/04/2015

To

SHELLY SHARMA  
PRINCIPAL  
SARVHITKARI EDUCATIONAL SOCIETY  
SARVA HITKARI VIDYA MANDIR  
HOSHIARPUR HOSHIARPUR  
PUNJAB - null

Sub: Allotment of Code Number to establishment M/s SARVHITKARI EDUCATIONAL SOCIETY under Employees' Provident Fund and Miscellaneous Provisions Act, 1952-regarding.

Sir/Madam ,

Based on the information submitted online by you, your establishment is registered with Employees' Provident Fund Organisation with the following code number :

Code Number : LDJAL0014957000

This code number is allotted based on the following declarations by you:

- 1 Name of Establishment : SARVHITKARI EDUCATIONAL SOCIETY
- 2 PAN of Establishment : AABTS2188L
- 3 Date on which employment strength crossed 19 : -
- 4 Section under which : 0001(3)(b)
- 5 Primary Activity : SCHOOL
- 6 Ownership Type : REGISTERED SOCIETY
- 7 The address proof of the establishment is

- Copy of bank passbook/statement
- Copy of post paid telephone bill of any
- Copy of power connection in the name of the
- Copy of water connection in the name of the
- Any license/certificate/number issued by any

he proof of date of set up 01/04/1981 is 0

As at the time of application, your establishment is having the following licenses and

10. As on date of your application, your establishment is registered with ESIC having Code 29000353380001302.

11. As on date of your application, your establishment is not having LIN.

**SUB REGIONAL OFFICE**

**JALANDHAR**

**SARVA HITKARI VIDYA MANDIR null**

**patyal.adv1663@gmail.com**

Please note that this intimation letter is generated with the Owners' Details in Form 5A and the intimated letter will be valid only if the Form 5A is enclosed.

**Important information:**

1. By virtue of this registration, you are required to comply with the provision of the EPF & MP Act 1952. The obligations/duties/responsibilities cast upon you as an employer of this establishment and penalties, on account of non-compliance with the same, are explained on our website [www.epfindia.gov.in](http://www.epfindia.gov.in). You are required to go through them carefully.

2. Remittance of dues under the provisions of the Act is to be made only through a Challan generated through the Unified portal. (The process for registration on the portal, preparation of the ECR txt file and related information is available on the website and the

3. In case this letter is produced as a proof of the code number of the establishment, before any person including any Inspector from EPFO, the Form 5A generated through the portal at the time of registration should be a part of this letter. The remittance details of the establishment will be available on the EPFO website through the link "Establishment Search" where all payments from December 2016 onwards with the names of employees are

4. Please quote the Code Number LDJAL0014957000 for all the future correspondence with EPFO.

This is a system generated letter and needs no signature.

Employees' Provident Fund Organisation

**Dated: 02/04/2015**

# Establishment Details

1	Estb ID	LDJAL0014957000				
2	Establishment Name	SARVA HITKARI VIDYA MANDIR				
3	Bank Account Details	S.No.	Account Number	IFSC Code	Bank Name	Last Updated
4	Under EPFO Office	1	XXXXXXXXXXXX9745	PUNB0393000	PUNJAB NATIONAL BANK	18/07/2016
5	Exemption Status	PF Exemption Status	Pension Exemption Status	EDLI Exemption Status		
6	Lin No.	U	U	U		
7	Address	1734416278				
8	PAN	KESHAV NAGAR, BHARWAIN ROAD, HOSHIARPUR, Dist. HOSHIARPUR, State: PUNJAB, Pin: 146001				
9	Coverage Section	PAN Number	Verification Status	Verification Date		
10	Estb Status	AABXXXXX8L	Verified	11/04/2015		
11	Primary Email Id	0001(3)(a)	Coverage Date	01/08/1997		
12	Phone	LIVE ESTABLISHMENT	Establishment Type	FIRMS RUN BY TRUST		
13	Industry	SATWANT_PATYAL@yahoo.co.in	Primary Mobile	9815990242		
		9815990242	Fax	Not Available		
		SCHOOL				

Note: To change name of establishment/address, please update your Form 5A and submit a signed copy of the same to the EPFO field office with documentary evidence of your new/correct address.

## Active Signatory List

	Name	Designation	Mobile	Email	Effective From	Effective Till	Signature Status	Signature
1	LALITA SHARMA	PRINCIPAL	9815990242	-	10-JAN-2014	10-JAN-2016	AUTO REJECTED APPROVED CASE	eSigr
2	LALITA SHARMA	PRINCIPAL	9815990242	-	17-MAR-2016	17-MAR-2018	DEACTIVATED	DSC
3	SHELLY SHARMA	PRINCIPAL	8427840115	-	16-JUN-2016	16-JUN-2018	DEACTIVATED	DSC
4	SHELLY SHARMA	PRINCIPAL	8146522322	-	04-SEP-2018	04-SEP-2020	DEACTIVATED	DSC
5	SHELLY SHARMA	PRINCIPAL	8146522322	-	27-NOV-2020	27-NOV-2022	REVOKE LETTER GENERATED. PENDING TO UPLOAD SCAN SIGNED COPY.	DSC
6	ARUN PUNJ	PRINCIPAL	9463696299	-	07-SEP-2021	07-SEP-2023	DEACTIVATED	DSC
7	ARUN PUNJ	PRINCIPAL	9463696299	-	11-SEP-2023	11-SEP-2025	ACTIVE	DSC