INDIRA GANDHI NATIONAL CENTRE FOR THE ARTS
SUTRADHARA DIVISION
Application for LTC Advance

1. Name (in Block Letters) : 
2. Designation : 
3. Grade Pay : 
4. Date of entry in Govt. Service/IGNCA : 
5. Whether permanent or temporary : 

6. (i) Home Town declared by the official : 
   ii) Place in India intended to be visited under for Year Block : 
   iii) Block Year for which the LTC is proposed to be availed of : 
   iv) Distance from Delhi to place of visit by shortest route. : 
   v) Nearest Railway station/Airport where official intends to visit : 

7. Whether LTC last availed of (furnish the date of outward journey). 
   i) for Home Town or : 
   ii) for any place in India : 

8. Nature and period of Leave to be availed during LTC 
   (Please attach a copy of leave application 
   Duly recommended by Controlling Officer) : 

9. Whether leave has been duly sanctioned by the Competent Authority : 

10. Date of onward journey : 

11. Persons in respect of whom LTC is proposed to be availed:

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name</th>
<th>Age</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12. **Single Air/rail fare/bus fare for to & fro**
Journey to Home Town/place of visit
by shortest route.

13. Amount of Advance required:

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 receipt of advance, I undertake to refund the entire advance in one Lump-sum.

Signature: ........................................

Section: ...........................................

Mobile /Tel. No......................................
DECLARATIONS

I .................................................................................................................. hereby certify that the above particulars furnished by me are true and correct.

I also undertake to refund the LTC Advance in full immediately in case of failure to perform the proposed journey for which advance was taken.

I also declare that I will not visit other than the place mentioned in the application without obtaining prior approval of the competent authority.

I also agree to refund one half of the advance if the return journey could not be performed within 90 days from the date of the advance.

I also agree to credit forthwith to the office any excess amount of advance left with me for any reason whatsoever.

I also agree to produce evidence of purchase of tickets, etc, for myself/members of my family, as the case may be, for the forward journey within 10 days or before the commencement of the journey, whichever is earlier, from the date of drawing the advance. I am aware that failure to comply with the above requirement will entail recovery of the advance in one lump-sum from the next drawal of my salary, together with the penal interest @ 2 % over and above the normal interest.

That my husband/wife is not employed in Government service/that my husband/wife is employed in Government service and the concession has not been availed of by him/her separately for himself/herself or for any of the family members for the concerned block years .......................................................... to ..........................................................

That my husband/wife whom LTC is claimed by me is employed in ......................................................... (name of the Public Sector Undertaking/Corporation/Autonomous Body etc.), which provides Leave Travel Concession facilities but he/she has not preferred and will not prefer, any claim in this behalf to his/her employer; and

That my wife/husband for whom LTC is claimed by me is not employed in any public Sector Undertaking/Corporation/Autonomous Body financed wholly or partly by the Central Government or a Local Body, which provides LTC facilities to the employees and their families.

Please tick mark ( ) one, and strike out the two which are applicable.

I am aware that if I do not submit LTC bills within one month from the date of return journey the outstanding LTC advance is recoverable in one lump-sum from my next salary together with the penal interest @ 2 % over and above the normal interest.

I am also aware that my claim will be forfeited if I fail to submit the bills within 3 month from the date of completion of journey.

I also understand that if the LTC is availed for self, the cost is reimbursable only when the journey is performed after availing any kind of leave and not during week-end holidays/other holidays/RH along.

Signature : 

Designation : 

Phone No. : 
The information furnished by the Official in Column. No.s 4 to 11 of the LTC Advance form are verified and found in order/correct. The official is entitled to the LTC applied for.

(Dealing Assistant)

(Section Officer)

ADMINISTRATION SECTION

Advance admissible (90% of amount as per advance claimed) Rs. ..................... . Advance of Rs. ..................... (Rupees..........................) may be sanctioned.

(Under Secretary)
Sutradhara Division
(Admin. Section)

Section Officer

KK/KN/KD/JS/SD

Bill No.............................. Date ..............................

Advance of Rs. ..................... approved and may be paid. The expenditure is debitable to the allocation made under the Head of Accounts-IGNCA-KN/KD/JS/KK/SD-032-LTC.

Appropriation:

Budget Grant for : ..............................................................

Expenditure so far : ..............................................................

Expenditure this Bill : ..............................................................

Total Expenditure : ..............................................................

Balance : ..............................................................

(Accounts Branch)

(Controlling Officer)