


HMT LIMITED,
PINJORE-134 101
DISTT. PANCHKULA (HARYANA)

Ref: PD(E) / 1992 Wage / TRP

Date: 23.08.2018

NOTICE

In continuation to our earlier Notice dated 04.07.2018 regarding payment of 1992 wage revision arrears to eligible ex-employees of Tractor Unit, Pinjore, the last date for submission of claim form has been extended upto 30.09.2018.

General Manager (TRP)


**HMT LIMITED,
PINJORE-134 101
DISTT. PANCHKULA (HARYANA)**

Date: 04.07.2018

NOTICE

HMT Limited has closed its Tractor Unit, Pinjore on 24.01.2018 after following due process of law and is now in the process of winding up of accounts of this unit. The ex-employees of the Tractor Unit are hereby informed to claim payment of 1992 Wage Arrears, if pending, on or before 06st August 2018. No claim thereafter will be entertained.

The procedure for claiming the payment of 1992 wage arrears, if pending, is given as under:-

1. The ex-employee should submit claim on **Form-I** available on website along with two self attested copies of Aadhar Card or other proof of Identity like Ration Card / Voter's Card / Driving License.
2. **In case of death of ex-employee**, the nominee nominated by the employee during his service should submit claim on **Form-II** available on website, along with two original copies of Death Certificate of ex-employee and proof of identity like Aadhar / Ration Card / Voter's Card / Driving License of claimant nominee.
3. **In case of death of both ex-employee as well as his/her nominee nominated by him during his/her service**, one of the family members of the diseased employee as declared in Company's records during his/her service in HMT should submit claim in **Form-III** complying with following requirement—
 - 3.1. The claimant will have to produce Indemnity Bond on non judicial stamp paper of Rs.100/- as per draft (Indemnity Bond) enclosed.
 - 3.2. The other family members will have to submit joint affidavit duly notarized by Public Notary affirming / declaring their no objection in releasing the payment of 1992 Wage Arrears to one of the family members (draft of affidavit enclosed) along with two each self attested copies of proof of Identity like Aadhar / Ration Card / Voter's Card / Driving License of each members signing the joint affidavit.

The above claims are to be submitted in duplicate latest by 06.08.2018 by the eligible claimants at the following address and claims received after 06.08.2018 will not be entertained by the Company:-

**The General Manager (TRP),
HMT Limited,
Pinjore – 134 101,
Distt. Panchkula (Haryana)**

GENERAL MANAGER (TRP)

NB: IN CASE OF ANY QUERY, YOU MAY ALSO CONTACT AT MOB. NO.9466360388 / 9896392058

**APPLICATION FORM (IN DUPLICATE) TO BE SUBMITTED BY THE
EX-EMPLOYEE OF HMT LIMITED, TRACTOR DIVISION, PINJORE FOR
PAYMENT OF 1992 WAGE REVISION ARREARS, IF PENDING**

Date: _____

To

The General Manager (TRP),
HMT Limited,
Pinjore-134 101,
District Panchkula (Haryana)

Dear Sir,

With reference to the information appeared in the newspaper regarding payment of 1992 wage revision arrears, I furnish below the required information:-

Name of ex-employee	
Ticket Number / Section	
Father's Name	
Address with Mobile No.	
E-mail address, if any	
Date of separation from HMT	
DETAILS OF BANK ACCOUNT	
i) Name of bank with its place of operation.	
ii) Account Number	
iii) IFSC Code of the bank	
Note: 1 st Page of Bank Pass Book or a cancelled cheque should be enclosed.	

You are requested to release the payment of 1992 wage revision arrears to me at the earliest.

SIGNATURE OF CLAIMANT

APPLICATION FORM (IN DUPLICATE) TO BE SUBMITTED BY THE NOMINEE OF THE EX-EMPLOYEE OF HMT LIMITED, TRACTOR DIVISION, PINJORE FOR PAYMENT OF 1992 WAGE REVISION ARREARS, IF PENDING.

Date: _____

To

The General Manager (TRP)
HMT Limited,
PINJORE – 134 101

Dear Sir,

With reference to the information appeared in the newspaper regarding payment of 1992 wage revision arrears, I furnish below the required information:-

Name of nominee (attach two copies of proof of indentify)	
Name of deceased spouse	
Ticket No. & Section of deceased spouse	
Date of death of deceased spouse (attach two copies of death certificate)	
Address with Mobile No.	
E-mail address, if any	
DETAILS OF BANK ACCOUNT	
i) Name of bank with its place of operation.	
ii) Account Number	
iii) IFSC Code of the bank	
Note: 1 st Page of Bank Pass Book or a cancelled cheque should be enclosed.	

You are requested to release the payment of 1992 wage revision arrears to me at the earliest.

SIGNATURE OF CLAIMANT

FORM-III

APPLICATION FORM (IN DUPLICATE) TO BE SUBMITTED BY ONE OF THE FAMILY MEMBERS OF THE EX-EMPLOYEE OF HMT LIMITED, TRACTOR DIVISION, PINJORE FOR PAYMENT OF 1992 WAGE REVISION ARREARS, IF PENDING

Date: _____

To

The General Manager (TRP),
HMT Limited,
PINJORE – 134 101

Dear Sir,

With reference to the information appeared in the newspaper regarding payment of 1992 wage revision arrears, I furnish below the required information:-

Name of the claimant		
Relation of the claimant with deceased ex-employee		
Details of deceased ex-employee	Name	
	Ticket Number / Section	
	Date of death (attach two copies of death certificate)	
Details of deceased Nominee	Name	
	Date of death (attach two copies of death certificate)	
Address with Mobile No.		
E-mail address, if any		
DETAILS OF BANK ACCOUNT		
i)	Name of bank with its place of operation.	
ii)	Account Number	
iii)	IFSC Code of the bank	
Note: 1 st Page of Bank Pass Book or a cancelled cheque should be enclosed.		
Details of documents attached		Indemnity Bond
		Joint Notarized Affidavit of other family.
		Identity Proofs of all family members

You are requested to release the payment of 1992 wage revision arrears of my father / mother to me at the earliest.

SIGNATURE OF CLAIMANT

INDEMNITY BOND

(To be typed on non-judicial Stamp Paper of value of Rs.100/-)

To,

The General Manager
HMT Limited,
PINJORE-134101
District Panchkula (Haryana)

Dear Sir,

Whereas my father Shri _____, on the rolls of HMT Limited, Pinjore (hereinafter referred as HMT) bearing T.No. ____ Section No. _____, retired under VRS / superannuated / resigned from the services of HMT w.e.f. _____ and later on expired on _____ (Death certificate attached). My mother Smt. _____ who was declared nominee in Company's records by my father, also expired on _____ (Death certificate attached).

Whereas a sum of Rupees _____ payable to my father on account of 1992 wage arrears is to be paid by HMT Limited, Pinjore to the legal heir on producing succession certificate.

Whereas the process of obtaining succession certificate is lengthy & time consuming involving expenses more than that of payment of above petty dues. I request you to release the above payment to me on submitting Indemnity Bond supported with affidavit by family of my father consisting of i) _____ ii) _____ iii) _____ jointly authorizing me to receive the said payment. (Affidavit attached).

NOW THEREFORE, in consideration of my request to you to release the above dues, I hereby agree and undertake to indemnify and keep indemnified, saved, defended, harmless to the Company and its successors and assignees for all time hereafter against all losses, costs, claims, actions, demands, risks, charges, expenses, damages etc., whatsoever which the Company may suffer and/or incur by reason of releasing dues on account of 1992 wage revision arrears pending in the name of my father at my request, as hereinabove mentioned. I further agree that any claim made by the Company in view of excess payment or any recoveries due to payment of 1992 wage arrears will be honoured by me and the same shall be remitted / refunded to HMT by me within thirty (30) days of such notice.

Signature of applicant _____

Aadhaar No. _____

Address

Mobile No.

IN WITNESS WHEREOF this Indemnity Bond has been signed at HMT Pinjore by the aforesaid applicant

In the presence of Witnesses:

1 Signature:
 Name :
 Address :
 Aadhar No.

2 Signature:
 Name :
 Address :
 Aadhar No.

(To be typed on non-judicial Stamp Paper of value of Rs.10/- duly attested by Oath Commissioner or Notary Public)

AFFIDAVIT

We,

- i) _____ Son/Daughter/Wife of late Sh. _____, age _____, resident of _____,
- ii) _____ Son/Daughter/Wife of late Sh. _____, age _____, resident of _____,
- iii) _____ Son/Daughter/Wife of Sh. _____, age _____, resident of _____ and _____
- iv) _____ Son/Daughter/Wife of Sh. _____, age _____, resident of _____, do hereby solemnly affirm and declare as under:--

- 1. That our father Shri _____, on the rolls of HMT Limited, Pinjore bearing T.No. ____ Section No. _____, retired under VRS / superannuated / resigned from the services of HMT w.e.f. _____ and later on expired on _____. Our mother Smt. _____ who was declared nominee in Company's records by my father, also expired on _____.
- 2. That we are the only legal heirs of deceased late Sh. _____ son of late Sh. _____, r/o _____ and no other legal heir (s) has been left out.
- 3. That our brother / sister Sh/Smt. _____ s/o late Sh. _____, resident of _____ has applied for the release of amount of 1992 wage arrears lying due in HMT Limited, Pinjore in the name of our father.
- 4. That we have no objection if the above payment of 1992 wage arrears of our father is released to our brother / sister. We hereby relinquish our claim in the said amount in favour of our brother / sister Sh. _____.
- 5. That we hereby undertake that we will never make any claim in the said amount and hereby undertake that the amount to be released to our brother / sister Sh. _____ will be deemed to be received by us.

DEPONENTS

Place: ____

Date: ____

Verification:

We the above named deponents do hereby verify that the above statement of us is correct to the best of our knowledge and belief and nothing has been concealed therein.

DEPONENTS

Place: _____

Date: _____