



भारतीय पेट्रोलियम और ऊर्जा संस्थान
INDIAN INSTITUTE OF PETROLEUM AND ENERGY

LEAVE TRAVEL CONCESSION (LTC) CLAIM

1	Name of the Employee	
2	Designation & Employee Code	
3	Department	
4	Pay Level & present Basic Pay	
5	Sanction Letter No. & date	
6	Advance drawn Rs.	

7. Particulars of members of family in respect of whom the LTC, has been claimed/ availed:

Sl	Name	DoB/ Age	Relationship with the employee
(i)			
(ii)			
(iii)			
(iv)			
(v)			
(vi)			

8. Details of journey(s) performed by employee & the members of his/her family:

Departure			Arrival			Mode of Journey (Rail/Air/ Road)	Class of travel	Distance (in Kms)	Fare (in Rs.)	Details of PNR/ Flight
Station	Date	Time	Station	Date	Time					

Total Amount Claimed (in Rs.) _____

Less: Advance drawn amount (if any) _____

Balance due to Self/ Institute _____

Date:

Signature of the Employee _____

