



**GOVERNMENT OF PAKISTAN
MINISTRY OF HOUSING & WORKS
PHA FOUNDATION**

FORM PHAF-02



MEMBERSHIP REGISTRATION FORM

FEDERALLY CONSTITUTED OCCUPATIONAL GROUPS & FEDERAL GOVERNMENT CIVIL OFFICERS (BPS 17 AND ABOVE)

MEMBERSHIP REGISTRATION FORM

Membership Fee RS-5000/- (non refundable)

NAME OF OFFICER	<input type="text"/>			Paste Photograph (1'x1') Don't staple
FATHER'S / HUSBAND's NAME	<input type="text"/>			
CNIC #	<input type="text"/>		Copy to be attached	
OFFICE'S NAME	<input type="text"/>			
OFFICE STATUS	Ministries / Divisions / Attached Departments etc.		<input type="checkbox"/> Other organizations	<input type="checkbox"/>
DATE OF JOINING SERVICE	<input type="text"/>	<input type="text"/>	(dd-mm-yyyy)	
POST HELD	<input type="text"/>			BPS <input type="text"/>
OCCUTIONAL GROUP (IF ANY)	<input type="text"/>			
DATE OF BIRTH	<input type="text"/>	<input type="text"/>	SUPERANNUATION DATE	<input type="text"/>
OFFICE ADDRESS	<input type="text"/>			
PERMANENT ADDRESS	<input type="text"/>			
TELEPHONE #	OFFICE	<input type="text"/>	HOME	<input type="text"/>
	CELL #	<input type="text"/>		
EMAIL ADDRESS	<input type="text"/>			
Deposit Slip NO.	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>

Paste copy of CNIC (Front Side). Don't staple

Paste copy of CNIC (Back Side). Don't staple

I certify that the information filled in this proforma is correct according to the best of my knowledge and I am a regular Federal Government Civil servant

DATE OF APPLICATION	<input type="text"/>	(dd-mm-yyyy)	Applicant's Signature
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It is certified that the information filled in this form is correct to the official record. It is also certified that the applicant is/was a regular Federal Government servant.	Signature with date & stamp of authorized Officer
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PLEASE CAREFULLY READ THE GENERAL INSTRUCTIONS ON THE BACK BEFORE FILLING THE FORM

APPLICANT'S COPY

Membership Registration Form

Received with thanks from Mr./Mrs./Ms. _____ CNIC _____

A Membership Registration Form along with demand draft/pay order/cash For the sum of RS-(In Figures) _____

(In Words) _____

Vide demand draft/pay order/bank receipt no. _____ Date: _____

Note: Please submit demand draft alongwith original application form at PHAF head office for record.

Authorise Officer _____
Stamp & Signature _____

GENERAL INSTRUCTIONS

1. ELIGIBILITY

- a. All officers / officials of the Federal Government working in Ministries / Divisions / Attached Departments and Sub-ordinate Offices including civil employees paid from defense estimates and employees of Federal Government Autonomous Bodies / Corporations and other Federal Govt. organizations in BPS 17 and above are eligible for membership registration.
- b. Those F.G employees who have been already allotted apartment, unit / house from PHAF are not eligible for registration of membership.
- c. Only those F.G employees of BPS (1 to 22) will be eligible for applying for allotment who registers their membership.
- d. The Federal Government contract employees, adhoc employees and work charge employees shall not be eligible.

2. MEMBERSHIP REGISTRATION FORM TO BE USED

- a. Following MEMBERSHIP REGISTRATION FORM shall be used:
 - i. Federal Government Employees vide para 1 (a) in BPS 17 and above shall apply on form **PHAF-02**

3. AVAILABILITY OF MEMBERSHIP REGISTRATION FORM

- a. Membership registration form can be downloaded from the web site of PHA Foundation at www.pha.gov.pk
- c. Photocopies of the Forms can be used. Use A4 size paper for photocopying. ***DO NOT REDUCE OR ENLARGE THE SIZE OF THE MEMBERSHIP REGISTRATION FORM WHILE MAKING A PHOTOCOPY.***

4. SUBMISSION OF MEMBERSHIP REGISTRATION FORM

- a. Government Servants in BPS 17 and above shall submit their filled-form **PHAF-02** duly verified by Drawing & Disbursing Officer (DDO)/ Authorized Officer/ Reporting Officer of their present posting offices.

5. INSTRUCTIONS FOR FILLING REGISTRATION FORM

- a. Please type or print in CAPITAL letters.
- b. All entries in the forms must be duly filled in English.
- c. Cutting / overwriting or ambiguous entries shall not be accepted.
- d. Latest Photograph shall be affixed on Registration Form where specified.
- e. Attested copy of CNIC shall be enclosed.
- f. Signature on application should match with Computerized National Identity Card (CNIC)
- g. Membership registration form should be counter-signed by the authorized officer of the present office.
- h. **Non-Refundable Fee of Rs. 5,000/- should be deposited along with the membership registration form.**
- i. Membership registration forms should be submitted by hand or by postal mail at PHAF Head Office along with demand draft.