

एच.पी. स्टेट सिविल सप्लाइज कारपोरेशन लिमिटेड

पंजीकृत कार्यालय: ब्लॉक नं. 16-17, एस.डी.ए. कमर्शियल
कॉम्प्लेक्स, कसुम्पटी, शिमला-171 009, हि0 प्र0
सी.आई.एन.: U99999HP1980SGC004263
जी.एस.टी.आई.एन.: 02AABCH4054K1ZV



दूरभाष नं.: 0177-2621583, 2621951, 2627951,
2621176, 2627017, 2620539
फैक्स नं.: 0177-2625537
ई-मेल: headoffice@himapurti.com,
वेबसाइट: www.himapurti.in

No. HPSCSC/ Admn. - 10735-10820

Dated: 03-12-2025

**All the DMs/Area Managers,
HPSCSC Ltd.,
CPO, Darlaghat & Barmana.**

Sub: - Regarding maintenance of Service Books.

Sir,

On the above subject, it is informed that the CAG compliance Audit team has raised observations that some essential documents such as nomination certificates, family details, photographs and proper verification of Service Book are not being maintained properly by the HPSCSC Ltd.

In view of the above, you are requested to obtain nomination certificates, family details and latest photographs (as per Annexure-I) from the Officers/officials working under your office and ensure to enter these details in their Service Books accordingly timely in the Service Books.

It may also be ensured that the service verification of the entire service period and entry of all kind of leave is done.

It is also informed, after completion of entry of the records of all the employees, compliance report in this regard, may be submitted to this office positively.

Yours faithfully,


Executive Director

Copy forwarded for information & necessary action to the: -

1. All the Officers/Managers, HPSCSC Ltd. Head Office, Shimla.
2. The Financial Advisor, HPSCSC Ltd. Head Office, Shimla with reference to U.O. Accts./Compliance Audit-2022 to 2025-7284-7289 No. 04.09.2025 for information and necessary action.
3. All the officials HPSCSC Ltd. Head Office, Shimla.
4. Notice Board of HPSCSC Ltd. Head Office, Shimla.
5. Guard file.


Executive Director

Annexure-I**H.P. State Civil Supplies Corporation Ltd.**

1	Name of Employee	
2	Father's name	
3	Designation	
4	Date of Birth	
5	Permanent Home address	
6	Date of initial joining in the Corporation (Name of post)	
7	Present place of posting	

S. No.	Detail of family member (s)	Age	Relation
1			
2			
3			
4			
5			

S. No.	Name of Nominee (s)	Relation	% age of share
1			
2			
3			
4			
5			

Note: -Latest photograph may be pinned with this Form.

Signature of employee
Date: