



**HEADQUARTERS  
EMPLOYEES STATE INSURANCE CORPORATION  
PANCHDEEP BHAWAN, CIG MARG, NEW DELHI-02**

P-11/14/11/ABVKY/2018

Dated 14.12.2018

**ATAL BEEMIT VYAKTI KALYAN YOJANA**

In pursuance to the Gazette Notification published in Extraordinary Part III Section 4 dated 06.12.2018, the Competent Authority has approved the following procedure for disbursing the relief under the "Atal Beemit Vyakti Kalyan Yojana" in the form of cash transfer to the bank account of the beneficiary directly. The details of the scheme and the procedure are as follows:-

**A. Introduction of the Scheme**

The ESI Corporation in its 175<sup>th</sup> meeting on 18.09.2018 has decided to provide Relief in the form of cash compensation to the Insured Person (IP) who has been rendered unemployed subject to the exclusions. The scheme named as "Atal Beemit Vyakti Kalyan Yojana" is a welfare measure for employees covered under Section 2(9), in the form of cash compensation up to ninety (90) days, once in a lifetime, to be claimed after three months in one or more spells for being rendered unemployed; provided the employee should have completed two years of insurable employment and has contributed not less than Seventy eight (78) days in each of the four consecutive contribution periods immediately preceding to the claim of the relief. The relief shall not exceed twenty five percent (25%) of the average earning per day. The scheme shall be treated effective from 01-07-2018. The scheme is implemented on pilot basis for a period of two years initially.

**B. Provision under the Act**

Section 19 of the ESI Act provides that the Corporation may, in addition to the scheme of benefits specified in this Act, promote measures for improvement of the health and welfare of Insured Persons and for rehabilitation and re-employment of Insured Persons who have been disabled or injured and may incur in respect of such measures

expenditure from the funds of the Corporation within such limits as may be prescribed by the Central Government.

### **C. Eligibility Conditions**

1. The Insured Person should have been rendered unemployed during the period the relief is claimed.
2. The Insured Person should have been in insurable employment for a minimum period of two years immediately before his/her unemployment.
3. The Insured Person should have contributed not less than 78 days during each of the preceding four contribution periods.
4. The contribution in respect of him/her should have been paid or payable by the employer.
5. The contingency of the unemployment should not have been as a result of any punishment for misconduct or superannuation or voluntary retirement.
6. Aadhar and Bank Account of the Insured Person should be linked with insured person data base.

### **D. Other Conditions for administration of the Scheme**

1. In case the IP is working for more than one employer and is covered under the ESI scheme he will be considered unemployed only in case he is rendered unemployed with all employers.
2. As specified in Section 65 of the Act, an IP shall not be entitled to any other cash compensation and the Relief under ABVKY simultaneously for the same period. However, periodical payments of PDB under ESI Act and Regulations shall continue.
3. As specified under Section 61 of the ESI Act, an IP who is in receipt of Relief under ABVKY shall not be entitled to receive any similar benefit admissible under the provisions of any other enactment.
4. The IP will be eligible for Medical benefit as provided under the act for the period he is availing this relief.

### **E. Implementation**

The Scheme shall be treated effective from 01-07-2018 and relief under the scheme shall become due for payment after 90 days. The scheme is implemented on pilot basis for a period of two years initially.

## **F. Disqualification/Termination of relief under ABVKY.**

Relief under ABVKY shall not be admissible in the following circumstance:

1. During lock out.
2. Strike resorted to by the employees declared illegal by the competent authority.
3. Voluntary abandonment of employment/ voluntary retirement/ premature retirement.
4. Less than two years contributory service.
5. On attaining the age of superannuation.
6. Convicted (i.e. punished for false statement) under the provisions of Section 84 of the ESI Act read with Rule 62 of the ESI (Central) Rule
7. On being re-employed elsewhere during the period he/she is in receipt of Relief under ABVKY.
8. Dismissal/termination under disciplinary action.
9. On death of IP.

## **G. Benefits of the scheme**

Relief to the extent of 25% of the average per day earning (total earning during the four contribution period/730) during the previous four contribution periods to be paid up to maximum 90 days of unemployment once in lifetime of the IP on submission of claim in form of an Affidavit.

## **H. Calculation of the Relief Amount**

(a) Illustration-I

Date of Unemployment : 01/04/2019

Contributory particulars of the preceding four contribution periods:

Contribution Period	No. of Days	Wages
Oct 18 to March 19	182	60000
April 18 to Sep 18	183	60000
Oct 17 to March 18	182	60000
April 17 to Sep 17	183	60000
Total	730	240000

Amount of relief/Benefit available for 90 days:  $(2,40,000/730) \times (25/100) \times 90 = \text{Rs.}7397/-$

(b)Illustration-II

Date of Unemployment : 02/10/2018

Contributory particulars of the preceding four contribution periods:

Contribution Period	No. of Days	Wages
April 18 to Sep 18	80	26667
Oct 17 to March 18	183	60000
April 17 to Sep 17	78	26000
Oct 16 to March 17	78	26000
Total	419	138667

Amount of relief/Benefit available for 90 days:- $(1,38,667/730) \times (25/100) \times 90 = \text{Rs.}4274/-$

**I. Duration of allowance**

1. The maximum duration, for which an IP shall be eligible to draw the Relief under the Atal Beemit Vyakti Kalyan Yojana (ABVKY) will be 90 days once in life time after a minimum of two years of Insurable Employment and subject to the contributory conditions specified above. The claim for relief under the Atal Beemit Kalyaan Yojana will be payable after the three months of his/her clear unemployment. The relief will be paid for clear month of unemployment. No prospective claim will be allowed.
2. In case the beneficiary gets gainful employment in between the three months of unemployment for which he was eligible for relief under ABVKY, the relief will be payable for clear month of unemployment between the date of unemployment and date of re-employment. The balance of 90 days of relief in this case may be claimed in the same manner as mentioned above based upon the initial contributory conditions by the beneficiary in case he again renders unemployed from Insurable employment within one year from initial unemployment.

**J. Submission of claim for relief under ABVKY**

1. The claim for Relief under ABVKY may be submitted by the claimant anytime after being rendered unemployed, but not later than one year from the date of unemployment to the appropriate Branch Office in form of affidavit in prescribed Form (AB-1). No prospective claim i.e. claim for relief under ABVKY for any future period will be allowed.

2. The IP will submit his claim to his designated Branch office. A link for generating claim for Atal Beemit Kalyan Yojana will be given on the ESIC Portal. The Insured person will have to enter his insurance number, bank account number along with bank branch, Aadhar number, the period of claim, Bank account details and the mobile number on the page the above-mentioned link opens. The system after checking his eligibility will generate either (a) in case the IP is eligible for relief under ABVKY the claim in form AB-1 along with a forwarding letter from his last employer in form AB-2 and instruction for the IP **OR** (b) in case the IP is found not eligible, a regret message that the IP is not eligible for relief under the Atal Beemit Vyakti Kalyan Yojana.
3. The eligible Insured person will take the printouts of the claim submitted above and letter to the employer thus generated by the system and submit the duly signed claim in affidavit along with required forwarding by the employer to his designated ESIC Branch Office. Each claim thus generated will have an auto generated unique ID number.
4. On receipt of the claim the details as mentioned by the applicant IP will be checked in the system by the staff at the Branch Office under supervision of the Branch Manager. The system will calculate the claimant's eligibility for relief under the scheme and its quantum for which the claimant is entitled based upon the details provided by the IP as well as the contribution and other details available in the system. The payment of the relief will be made to the IP's bank account.

#### **K. Mode of payment.**

1. The Relief under ABVKY shall be paid/ payable by Branch Office to IPs directly in their bank account electronically only. In the event of death of IP, the amount of Relief under ABVKY shall be paid/ payable to his/her nominee/legal heir as prescribed under Para(s) P.3.79.1 to P.3.81 of the Branch Office Manual by the account payee cheque only.
2. The bank account details of the claimant in the ESIC Database is a pre-condition for claiming this relief, but in case the bank account details of the claimant are not available in the ESIC Database or the IP has changed his bank account then the same may be authenticated by the Branch Manager on the basis of the canceled cheque leaf or the passbook of the bank account having name of the claimant on it,

which the claimant will provide along with the claim for this relief. The claim shall be processed on AB-3.

**L. Maintenance of records and registers at branch office.**

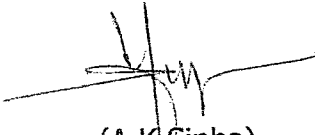
Register as per prescribed proforma in Form AB-4 shall be maintained by the Branch Office.

**M. Preparation of payment docket and schedule sheet.**

The payment of Relief under ABVKY shall be passed only by Branch Manager and the payment will be booked under the head "Other Benefits" with a distinct sub-head "ABVKY Relief" which should be reflected separately in Form MISLO-01 (Old form ESIC-19), as well as in MISLO-02, and monthly summary. Corresponding entries should be made in ledger sheet in red ink.

The Claim form, covering note from the employer, instructions to the Insured Person, Payment docket and format of register for maintaining the records are appended in Annexure-I to V and the draft notification.

Enclosure: - As above.



(A.K. Sinha)

INSURANCE COMMISSIONER

To,

1. PPS to the Director General/ Financial Commissioner/ Chief Vigilance Officer for information.
2. PPS/ PS to all Divisional Heads, ESIC Hqrs./ NTA, New Delhi.
3. All Additional Commissioner/Regional Directors/ SRO In-charge.
4. Director (M) Delhi/ Noida/ K K Nagar.
5. All Medical Superintendents, ESIC / Model Hospitals.
6. All Deans, ESIC Medical Educational Institution.
7. All JD (F)/ DD (F) Regional offices/ Sub-Regional Offices/ESIC / Model Hospitals/ D(M) Delhi/ Noida/ KK Nagar/ ESIC Educational Institutions.
8. Website content Manager, for uploading on ESIC website.
9. Guard File.
10. Spare Copies.

Claim Id:- .....(Year)/.....(RO/SRO code)/.....(No.)

Form AB-1

**EMPLOYEES' STATE INSURANCE CORPORATION**

**CLAIM FOR PAYMENT UNDER ATAL BEEMIT VYAKTI KALYAN YOJANA**

**(To be prepared on Rs 20/- Non-judicial Stamp paper Duly notarized)**

I \_\_\_\_\_ s/w/d of Sh. \_\_\_\_\_ Insurance  
No. \_\_\_\_\_ Aadhaar No. \_\_\_\_\_ declare that I have been rendered  
unemployed w.e.f \_\_\_\_\_ . I claim amount of relief under the Atal Beemit Vyakti  
Kalyan Yojana for the period from \_\_\_\_\_ to \_\_\_\_\_ .

The amount due may be paid to me directly into my bank account details of which are as under:-

Bank Account Number.....

Name of the bank and branch .....

Name of the Account Holder.....

IFSC Code.....(Canceled cheque enclosed).

I further also declare that:-

1. I have not taken up any gainful employment during the above period.
2. I am not in receipt of any other similar benefit admissible under the provisions of any other enactment.
3. I have not attained the age of superannuation during the period of claim.
4. I have not been convicted under Section 84 of ESI Act.
5. My unemployment has not been as a result of any punishment for misconduct or superannuation or Voluntary retirement.
6. I have not been dismissed / terminated under disciplinary action.
7. I hereby undertake to repay the whole amount forthwith on demand by the ESIC, if it is discovered at any time that I was not lawfully entitled to that amount.

Dated:-

Place:-

Claimant's Signature/Thumb Impression .....

Permanent address of the claimant.....

.....  
Mobile Number of the claimant .....

**Annexure-II**

**Claim Id:- .....(Year)/ .....(RO/SRO code)/ .....(No.)**

**Form – AB-2**

**(to be furnished by the last employer)**

To  
The Manager,  
Branch Office \_\_\_\_\_,  
Employees' State Insurance Corporation,  
\_\_\_\_\_.

Subject:-Report in respect of Insured Person declared unemployed.

Sir/Madam,

It is informed that the Insured Person Sh./ Smt./Ms.....Insurance No.....who worked in M/s..... from the period ..... to..... on the post .....has become unemployed due to ..... (reason (s) for unemployment).

It is requested to consider his claim for relief under the Atal Beemit Vyakti Kalyaan Yojana. The Claim for relief is also enclosed.

**Signature of authorized officer:-.....**

**Name:-.....**

**Seal of the Institution:-.....**



**Instruction for the Insured Person**

1. On entering the relevant information online, based upon the data available, the system will process to generate a claim form AB-1 and covering letter from the employer.
2. Take a printout of both these documents (AB-1 and covering letter form last employer) and sign/ put the left thumb impression on the claim form and get the forwarding letter signed by the last employer or authorized signatory.
3. Submit these documents in the designated ESIC Branch Office along with a canceled cheque or self attested photocopy of the bank Passbook.
4. The Relief under ABVKY is 25% of the average earning per day (total earning during the four consecutive contribution period/730 days) during the previous four contribution periods to be paid up to maximum 90 days of unemployment once in lifetime. The relief is paid for clear month of unemployment only.
5. The eligibility criteria for relief under ABVKY are :-
  - (a) The Insured Person should have been rendered unemployed during the period the relief is claimed.
  - (b) The Insured Person should have been in insurable employment for a minimum period of two years immediately preceding to unemployment.
  - (c) The Insured Person should have contributed not less than 78 days during each of the preceding four contribution periods.
  - (d) The contribution in respect of him should have been paid or payable by the employer.
  - (e) The contingency of the unemployment should not have been as a result of any punishment for misconduct or superannuation or voluntary retirement.
  - (f) Aadhar and Bank Account of the Insured Person should be linked with insured person data base.

Claim Id:- .....(Year)/.....(RO/SRO code)/.....(No.)

Form AB-3

BRANCH OFFICE \_\_\_\_\_

## EMPLOYEES' STATE INSURANCE CORPORATION

1. Insurance Number of I.P. \_\_\_\_\_
2. Name of insured person \_\_\_\_\_
3. Father's / husband's name \_\_\_\_\_
4. Permanent address \_\_\_\_\_
5. Name, code No. & address of the employer \_\_\_\_\_
6. Date of appointment \_\_\_\_\_
7. Date of Unemployment \_\_\_\_\_

## 8. Details of Contributory particulars:-

Sl. No.	Contribution Period (s)	No. of days	Amount of Wages	Sl. No. of R.C./ CCP/ ESIC 71 Register	Code No. of the Employer
1					
2					
3					
4					
5					

9. Whether employer's forwarding is enclosed YES/NO
10. Whether the I.P. is in receipt of any other similar Benefit:- YES/NO
11. Whether eligible for Relief under ABVKY YES/NO
14. Daily Rate of Relief under ABVKY:Rs. \_\_\_\_\_ (Rs. \_\_\_\_\_)
15. Total Rs. \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_ paid to Sh. \_\_\_\_\_ as relief under ABYKY.

Signature of D.A.

Signature of Checker

Signature of Br. Manager

BRANCH OFFICE \_\_\_\_\_

**EMPLOYEES' STATE INSURANCE CORPORATION**

REGISTER FOR ALLOWANCE UNDER THE ATAL BEEMIT VYAKTI KALYAN YOJANA

Name of I.P./I.W.	Insurance No.	Daily Rate of Relief under ABVKY
1	2	3

Date of Claim	Period of Claim	Amount
4	5	6

Prep. By	Checked by	Initial of BM	S.S. No. & Date
7	8	9	10



# भारत का राजपत्र

## The Gazette of India

असाधारण

EXTRAORDINARY

भाग III—खण्ड 4

PART III—Section 4

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं. 469] नई दिल्ली, बृहस्पतिवार, दिसम्बर 6, 2018/अग्रहायण 15, 1940  
 No. 469] NEW DELHI, THURSDAY, DECEMBER 6, 2018/AGRAHAYANA 15, 1940

कर्मचारी राज्य बीमा निगम

अधिसूचना

नई दिल्ली, 26 नवंबर, 2016

सं. एन-12/13/1/2016 पी एण्ड डी.—कर्मचारी राज्य बीमा अधिनियम, (1948 का 34) की धारा 97 की उप धारा (1) के अंतर्गत प्रदत्त शक्तियों का प्रयोग करते हुए कर्मचारी राज्य बीमा निगम, एतद्वारा अधिनियम की धारा 2(9) के अंतर्गत व्याप्त कर्मचारियों के लिए कल्याण उपाय के रूप में जीवनकाल में एक बार, नब्बे (90) दिनों तक नकद क्षतिपूर्ति के रूप में धारा 19 के अंतर्गत "अटल बीमित व्यक्ति कल्याण योजना" राहत, अधिसूचित करता है, जिसका दावा बेरोजगारी रहने की स्थिति में एक अथवा दो समयावधि में तीन माह पश्चात किया जा सकेगा; बशर्त कर्मचारी द्वारा बीमायोग्य रोजगार में दो वर्ष पूर्ण किए होने चाहिए तथा राहत के दावे से तत्काल पूर्ववर्ती प्रत्येक चार लगातार अंशदान अवधि में अठहत्तर (78) दिनों से कम अंशदान न किया हो। यह राहत प्रतिदिन औसत अर्जन के 25 प्रतिशत से अधिक नहीं होगी।

2. बेरोजगारी की आकस्मिकता कदाचार के लिए किसी दंड अथवा अधिवर्षिता अथवा स्वैच्छिक सेवानिवृत्ति के परिणामस्वरूप नहीं होनी चाहिए।

3. प्रतिदिन औसत अर्जन, चार लगातार अंशदान अवधि के दौरान प्राप्त मजदूरी की कुल राशि को सात सौ तीस (730) दिनों से भाग देने पर होगा।

4. पहचान सामान्यतः विधिवत् सत्यापित अथवा अधिप्रमाणित आधार संख्या युक्त क.रा.बी.निगम डाटा बेस से स्थापित की जाएगी।

5. यह योजना दिनांक 01.07.2018 से प्रभावी मानी जाएगी तथा भुगतान के लिए तीन माह पश्चात देय होगी।

6. बीमाकृत व्यक्ति शपथ पत्र में, अपने आवंटित शाखा कार्यालय को उसके पिछले नियोक्ता द्वारा विधिवत् अग्रेषित फार्म कख-1 (संलग्नक) में अपना दावा प्रस्तुत करेगा / करेगी।

7. यह योजना दो वर्षों की अवधि के लिए प्रायोगिक आधार पर शुरू की गई है।

इस अधिसूचना के संबंध में किसी भी व्यक्ति से प्रकाशन की तिथि से तीस (30) दिनों के भीतर कोई आपत्ति अथवा सुझाव प्राप्त होता है, तो कर्मचारी राज्य बीमा निगम द्वारा उस पर विचार किया जाएगा। यदि कोई आपत्ति तथा सुझाव हों, तो श्री एस. रविचन्द्रन, अपर आयुक्त (यो. एवं वि.) कर्मचारी राज्य बीमा निगम, पंचदीप भवन, सी. आई. जी. मार्ग, नई दिल्ली-110002 (ई-मेल: dir-pnd@esic.nic.in) को संबोधित किए जाएं।

एस. रविचन्द्रन, अपर आयुक्त (यो.व.वि.)

[विज्ञापन-III/4/असाधारण/391/18]

**EMPLOYEES' STATE INSURANCE CORPORATION**  
**NOTIFICATION**

New Delhi, the 26 th November, 2018

**No. N-12/13/1/2016-P&D.**—In exercise of the powers conferred under sub section (1) of Section 97 of the Employees' State Insurance Act, 1948 (34 of 1948), the Employees' State Insurance Corporation, do hereby notify a relief ATAL BIMIT VYAKTI KALYAN YOJANA under Section 19 of the Act as a welfare measure for employees covered under Section 2(9), in the form of cash compensation up to Ninety (90) days, once in a lifetime, to be claimed after three months in one or more spells for being rendered unemployed; provided the employee should have completed two years of insurable employment and have contributed not less than seventy eight (78) days in each of the four consecutive contribution periods immediately preceding to the claim of relief. The relief shall not exceed twenty five per cent (25%) of the average earning per day.

2. The contingency of unemployment should not have been as a result of any punishment for misconduct or superannuation or voluntary retirement.

3. The average earning per day shall be the total amount of wages received during the four consecutive contribution periods divided by seven hundred and thirty (730) days.

4. The identity shall ordinarily be established from ESIC data base having duly verified or authenticated Aadhar Number.

5. The Scheme shall be treated effective from 01-07-2018 and shall become due for payment after three months.

6. The Insured Person shall furnish his/her claim in an affidavit, the form AB-1 (Annexure) duly forwarded by his last employer to his/her allotted Branch Office.

7. The Scheme is introduced on pilot basis for a period of two years.

Any objection or suggestion, which may be received from any person in respect of this notification within a period of thirty (30) days from the date of publication, will be considered by the Employees' State Insurance Corporation. The objections and suggestions, if any, may be addressed to Shri S. Ravichandran, Addl. Commissioner (P&D), Employees' State Insurance Corporation, Panchdeep Bhawan, C.I.G Marg, New Delhi-110002 (email: [dir-pnd@esic.nic.in](mailto:dir-pnd@esic.nic.in)).

S.RAVICHANDRAN, Addl.Commissioner (P&D)

[ADVT.-III/4/Exty./391/18]