

Final Settlement Clearance Certificate

Date:

Employee Name:

Employee ID:

Department:

Designation:

Last Working Day:

Settlement Amount (if any):

Remarks:

This is to certify that the above-named employee has completed all necessary clearance formalities and all dues between the company and the employee have been fully settled. As such, the employee is hereby granted final clearance as of the last working day stated above.

Authorized Signatory

Date: _____

Employee Signature

Date: _____

Important Notes:

- This certificate is an official confirmation of the completion of the final settlement between the employee and the organization.
- Please ensure all dues, assets, and responsibilities are cleared before signing.
- Incorrect information in this document may result in legal or financial complications.
- This document should be duly signed by both parties for validation.
- Keep copies of this certificate for future reference and record keeping.