

ANNEXURE-I
FORM PENSION-15
FORMAL APPLICATION FOR PENSION

From

Sh.....

S/D/o.....

To

.....

.....

Subject: Application for sanction of pension.

Sir,

I beg to say that I am due to retire from service with effect from the my date of birth being I, therefore, request that steps may kindly be taken with a view to the pension and gratuity admissible to me being sanctioned by the date of my retirement. I desire to draw my pension from.....Treasury.....

2. I hereby declare that I have neither applied for, nor received any pension or gratuity in respect of any portion of service qualifying for the pension and in respect of which pension and or gratuity is claimed therein nor shall I submit an application hereafter without quoting reference to this application and the orders which may be passed herein :

- i) Three specimen signature of mine duly attested.
- ii) Five passport size photographs/ joint photographs with my wife /husband Smt/Sh. Also duly attested.
- iii) Three slips each being my left thumb and fingers impressions (it is applicable in respect of illiterate Govt., servants.
- iv) My present address is and after retirement will be

Yours faithfully

(SEE RULE 9.2)

Particulars to be obtain by the Head of Office from the retiring Govt., Employee before eight months of the date of retirement:-

1. Name of the Govt., Employee.
2. Date of Birth/ Retirement.
3. Two specimen signatures duly attested
(to be furnished in a separate sheet)
4. four copies of passport size joint
Photographs of the Govt., employees
with his /her wife / husband.
5. Two slip showing the particulars of height
and personal identification mark duly attested.
6. Present address
7. Address after retirement.
8. Name of the Treasury/ public Sector Bank
Branch through which the Govt., employee
wants to draw his/her pension
9. Detains of the family as defined in
appendix-1 of the Punjab CSR Vol.11

Dated, the

Signature

Designation

Department/office

Particulars of height and identifications mark in respect of Shri

Height

Identification mark

Dated Chandigarh, the

Signature

Designation

ATTESTED

Statement giving details of members of family for purpose of family pension scheme, 1964.

Sr. No.	Name	Relation	Date of birth
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Dated, Chandigarh

Signature

ATTESTED

A certificate regarding non-payment of gratuity/pension as required by rule 9.6 of C.S.R Vol. II

CERTIFICATE

I, hereby declare that I have neither applied for nor received pension or gratuity in respect of any portion of the service included in this application and in respect of which pension or gratuity is claimed herein nor shall I submit an application hereafter without quoting a reference to this application and the orders which may be passed therein.

Dated
.....

CERTIFICATE

Whereas the Chief Secretary to Government, Haryana has consented to grant me a pension of Rs. (Rs.) and Death-cum-retirement/Gratuity of Rs. (

) I, hereby acknowledge that in accepting the aforesaid amount I fully under stand that the pension/ Death-cum- retirement gratuity are subject or revision of on their being found to be in excess of that to which I am entitled under rules and I promise to have no objection to such revision .I further promise to repay any amount advanced to me in excess to which I may eventually be found entitled

.....
.....

Option of Pension Rule

I, ...hereby opt for
Rules 9(i) (a) of New Pension Rules.

2. I also want to be governed by the family pension scheme 1964.

Dated, the

()

ATTESTED

DECLARATION UNDER RULE 9.15 OF PUNJAB C.S.R. VOLUME II

“ Whereas the(here state the designation of the officer, sanctioning the pension/family pension/service gratuity/ deat- cum- retirement gratuity /arrears of pensions or gratuity) has consented to grant me/ us the sum of Rs..... a month as the amount of my pension/ family pension and /or the sum of Rs.....as the amount of gratuity due to Sh./Smt.....(here given the name and designation of the Government servants). I/we hereby acknowledge that in accepting this amount. I/we fully understand that the pension/family pension/ gratuity due to Sh./Smt. is subject to revision on its being found to be in excess of that to which I/we am/are entitled under the rules and I/we further promise to repay any amount advanced to me/us in excess of that which I/we may be eventually found entitled.

.....

Specimen signature of

Signature

.....

.....

.....

Dated Chandigarh, the

ATTESTED

AMENDED FORM OF SURETY TO BE SUBSTITUTED, FOR ANNEXURE IV TO PUNJAB GOVERNMENT FINANCE DEPARTMENT LETTER NO 6034-2FRI-59/8041, DATED THE 2nd SEPTEMBER, 1959 IN SUPERSSION OF THE REVISED FORM INTRODUCED VIDE PUNJAB GOVERNMENT LETTER NO. 2838-6 FRI-60/3692 DATED THE 19th APRIL 1960.

FORM OF SURETY BOND

In consideration of the Governor of Haryana (hereinafter called "the Government" which expression shall include his successors and assigns) having agreed to settle the final account of Sh./Smt. _____ without production of a "NO DEMAND CERTIFICATE" from the Estate Officer. I, _____ hereby stands Administrators Legal representatives and assigns) for payment by the said _____ or rent and other dues in respect of the residence that may be allotted or that was allotted to the said _____ from time to time by Government. I, the surety further agree and undertake to identify the Government against all loss and damage until delivery of vacant possession of the above said residence is made over to the Government.

2. I hereby also stand surety for any amount that may be due by the said _____ to Government by way of overpayment of pay, allowances leave salary, advances for conveyances, hours building or other purpose, for any amount which may be paid or payable by Government on behalf of the said _____ or any other dues whatsoever of the Government.

3. The obligation undertaken by me shall not be discharge or in any way effected by an extension or time or any other indulgence granted by the Government to the said _____ and the Government shall have the full liberty without effecting the guarantee to postpones for any time for time to time any of the powers exercisable by it against the said _____ and either to endorse & I will not be released for the liability under this guarantee by any exercise of the Government of liberty with reference to the matters aforesaid or by reason of any other forbearance act or omission of the part of the Govt. for any indulgence by the Government to the said _____ or by any other matter or things whatsoever which under the law relating to sureties shall, but for this provision, have the effect of so releasing me from my such liability.

4. This guarantee shall remain in force till :-

- i) the 'No Demand Certificate' is issued by the Estate Officer in favour of the said _____.
- ii) the Head of office in which the said _____ was last employee and in case/he was drawing pay and allowances or gazetted Govt. servants bill forms, the concerned audit officer has certified that nothing is now due to the Govt. from the said _____ and
- iii) the 'No Demand Certificate' is issued by the Estate Officer in favour of the said _____ in respect of water and electricity dues in case Govt. had given a guarantees for these dues, on behalf of the said _____.

The stamp duty on this instrument shall be born by the Government.

Signature of the surety

Address-

Signed and delivered by the said

Surety at _____ This _____ day

on _____ in the presence of

1. Signature, Address and _____
occupation of the witness _____
2. Signature, Address and _____
occupation of the witness _____

Certified that Sh/Smt. _____ is a permanent Government servant.

Signature of the Head of the Deptt.
or the office in which the surety is
employee.

The above bond is accepted.

(Signature and Designation)
on behalf of the Governor of Haryana).

CERTIFICATE REGARDING MILITARY SERVICE

Certified that I have not rendered any military service, nor I have received any pension / gratuity.

OR

Certified that I have rendered military service and have received pension / gratuity. Details are as follows: -

1. Total period of military service date of Commencement and end of each period of military service.
2. Amount and nature of any pension/gratuity received for the military service

Signature.....

Designation.....

Attested

Annexure-A-Departmental Data Sheet

10 digits DDO Code 0542 Class of pension _____

Name _____ Sex Male/Female _____

Designation _____ Group/ Class _____

a) Address Before Retirement

b) Address After Retirement

Department _____

Place/ District of Retirement _____

DDO Retired from _____

T.O. for Pension _____ T.O. for DCRG _____

Bank Details

a) Bank Name _____

b) Bank Branch _____

c) Bank A/c.No. _____

G.P.G. Account No. allotted by AG. Office _____

Date of Birth _____ Date of Appointment _____

Date of commencement _____ Date of Retirement/Death _____

of Pensionable service _____

Date of Medical Certificate invalidating Government Servant _____

Date of lodging FIR in absconding cases _____

Period of Foreign Service: _____

Whether contributions received for the above period _____

Length of Military Service, if any: _____

Amount of Military Pension/ Gratuity, if any: _____

	Year	Months	Days
Gross Service			
Non-Qualifying Service			
Weightage			
Net Qualifying Service			

Average Emoluments		Last Pay drawn	
Non-Practicing Allowance		DP	
Other Allowances		DA	

Signature of the Competent Authority.

FORM OF APPLICATION FOR COMMUTATION OF PENSION WITHOUT MEDICAL EXAMINATION UNDER F.D.CIRCULAR LETTER NO. 1/2(II)84- 2FR.II DATED 9.7.85.

To,

The
(Head of Office)

Subject:- Commutation of pension without Medical Examination.

Sir,

I, further below the relevant particulars and request that I may be permitted to commute a part of my pension as indicated below (an attested copy of my photograph is pasted on this application and an unattested copy is enclosed.

1. Name in block letter
2. Date of birth
3. Date of superannuation on attaining the age of 58/60 years
4. Designation of the post held at the time of superannuation and Department/Office.
5. Amount of pension sanctioned and whether it is provisional or final.
6. Class of pension defined in Chapter-V of Pb. CSR Vol.II
7. Name of Treasury from which pension is being drawn
8. Name of the Treasury/Bank through which the commuted value is desired to be paid, if payment is not desired through the Account Officer who authorized the pension.
9. Designation of the Accounts Officer and the number and date of the P.P.O, if issued.
10. Amount (in whole Rupee's) or percentage of pension
11. Particulars of any application for commutation of pension made previously and whether appeared before any Medical Authority or not.

Dated

Signature
(Full Postal Address)