

(Pension Forms)
(Forms for Retiring Pension in triplicate copy)

FORM-7

Form for assessing Pension and Gratuity

[See Rules 58,60,61(1) and (3) and 65]

(To be sent in duplicate if payment is desired in a different circle of accounting unit)

part-I

1. Name of the Government Servant
2. Father's Name (and also husband name
in the case of female Govt. servants)
3. Date of Birth (by Christian era)
4. Religion
5. Permanent residential address.
Showing village, town, district
and state
6. Present or last appointment including
name of establishment :
(i) Substantive
(ii) Officiating if any
7. Date of beginning of service
8. Date of ending of service
9. (i) Total period of military service
for which pension or gratuity
was sanctioned.
(ii) Amount and nature of any
pension/gratuity received
for the military service
10. Amount and nature of any
Pension/gratuity received
For the previous civil service
11. Government under which service
has been rendered in order **Years** **Months**
Days
of employment
12. Class of pension applicable
.....
13. The date on which action initiated to :
(i) obtain the 'No demand Certificate'

from the Directorate of Estates.
as provided in Rule 57 :

(ii) assess the service and
emoluments qualifying for
pension as provided in
Rule 59; and

(iii) assess the Government dues
other than the dues relating
to the allotment of Government
accommodation as provided
in rule 73 (1)

14. Details of omissions, imperfections
or deficiencies in the service book
which have been ignored under
Rule 59-(1) (b) (ii)

15. Total length of qualifying
service (for the purpose of
adding towards broken periods,
a month is reckoned as thirty days)

16. Periods of non-qualifying service from to

(i) Interruption in service
condoned under Rule 28

(ii) Extraordinary leave not
qualifying for pension

(iii) Period of suspension not
treated as qualifying

(iv) Any other service not treated
as qualifying service

TOTAL

17. Emoluments reckoning for gratuity

.....

18. Average emoluments.

26. Whether family pension, 1964 applies to the Government servant and if so:-

- (i) emoluments reckoning for the family pension
- (ii) The amount of the family pension becoming
Payable to the family of the Government
Servant, if death takes place after retirement
 - (a) Before attaining the age of 67 years,
Rs.....
 - or
 - (b) after attaining the age of 67 years,
Rs.....
- (iii) Complete and up-to-date details of the family as given in Form 3:-

Sl. No.	Name of the member of the family	Date of Birth	Relationship with the Government Servant

27. Height

.....

28. Identification marks

.....

29. Place of payment of pension
(Treasury, Sub-Treasury or
Branch of Public Sector Bank

Or the Pay and Accounts Office)

.....
30. Head of Accounts to which pension
and gratuity are debitable
.....

Signature of the Head of Office

Emoluments drawn during the last ten months of services.

Post held	From	To	Pay	Personal
Average				Pay or
Emoluments				Special Pay

.....
19. Date on which Form 5 has been
obtained from the Government
servant (To be obtained eight months
before the date of retirement
of Government servant)
.....

20. (i) Proposed pension
.....

- (ii) Proposed graded relief
.....
21. Proposed death-cum-retirement
gratuity
.....
22. Date from which pension is to
commence
.....
23. Proposed amount of provisional
pension. If departmental or judicial
proceedings is instituted against
the Government Servant before
judgment
.....
24. Details of Government dues recoverable out of gratuity.
(i) Licence fee for the allotment
of Government accommodation [See
Sub-rules(2),(3) and (4) of Rule 72]
.....
- (ii) Dues referred to in Rule 73
.....
25. Whether nomination made for
(i) Death-cum-retirement gratuity
.....
- (ii) Family pension, 1950, it applicable
.....

SECTION-II

1. Name of the Government servant
.....
2. Class of pension or gratuity
.....
3. Amount of pension authorised
.....
4. Amount of gratuity authorised
.....

5. Date of commencement of pension
.....
6. Amount of family pension in the event of death after retirement:
- (i) if death takes place before 67 years
of age or
.....
 - (ii) if death takes place after 67 years
of age
.....
7. The amount of graded relief admissible
on pension
.....
8. The Government dues recoverable out
of gratuity before authorising its
payment
.....
9. The amount of cash deposit or the
amount of gratuity held over for adjustment
of unassessed Government dues
.....
10. Date on which the pension papers
received by the Accounts Officer
.....

PART-II

SECTION-I

Account enfacement :

1. Total period of qualifying service, which has been accepted for the grant of superannuation or retiring or invalid or compensation or compulsory retirement pension and gratuity, with reasons for disallowance, if any (other than disallowance indicated in Part I of this form)

.....

2. Amount of superannuation or retiring or invalid or compensation or compulsory retirement pension or gratuity that has been admitted

.....

3. The date from which superannuation or retiring or invalid or compensation or compulsory retirement pension or gratuity is admissible

.....

4. Head of Account to which superannuation or retiring or invalid or compensation or compulsory retirement pension or gratuity is chargeable

.....

5. The amount of the Family Pension, 1964, becoming payable to the entitled members of the family in the event of death of the Government servant after retirement

.....

FORM-3

[See Rule-54 (12)]
Details of Family

Name of the Government Servant

.....

Designation

.....

Date of Birth

.....

Date of appointment

.....

Details of the members of my family as on

.....

**

Sl. No.	Name of the members of family	Date of Birth	Relationship with the officer	Initial of the head of office	Remark

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of office any addition or alteration.

Place.....

Signature of Government Servant

Date

** Family for this purpose means as defined in Clause (b) of Sub-Rule(14) of Rule 54 of the C.C.S. (pension) Rules, 1972.

Note : Wife and husband shall include respectively judicially separated wife and husband.

FORM-5

[See Rules 59 (1) (c) and 61 (1)]

particulars to be obtained by the Head of Office from the retiring Government servant eight months before the date of his retirement.

1. Name

.....

2. (a) Date of birth

.....

(b) Date of retirement

.....

3. Two specimen signatures (to be furnished in a separate sheet duly attested by a gazetted Government servant).

4. Three copies of passport size photograph with wife or Husband (To be attested by the Head of Office).

5. Two slips showing the particulars of height and personal identification marks duly attested by gazetted Government servant.

6. Present Address :

.....

.....

.....

.....

7. Address after retirement

.....

.....

.....

.....

8. Name of the Treasury or the Branch of Public Sector Bank or the pay and Accounts Office through which the pension is to be drawn

.....

9. Details of the family in form-3

10. Indicate whether family pensions is admissible from any other source-military or State Government and / or a Public Sector Undertaking autonomous body/Local Fund under the Central or State Government.

Place.....

Signature
Designation

Date.....
Ministry/Deptt./Office

8. Disbursing authority from which pension is to be drawn after retirement:

(a) Treasury/Sub-treasury.
(Name and complete address of the Treasury/Sub-treasury to be indicated).....

(b) (i) Branch of the nominated nationalised bank with complete postal address.....

(ii) Bank Account No. to which monthly pension is to be credited each month.....

(c) Account Office of the Ministry/Department/ office
.....

Place.....
Address

Signature
Present Postal

Date:.....
retirement

Postal Address after

.....
.....

PART-II
(ACKNOWLEDGEMENT)

Received from
Shri/Smt./Kumari.....
.....(designation).....

.....
application in part I of from 1-A for commutation of pension without medical examination

Place.....

Signature

Date
office

Head of

Note : If the application has been received by the Head of Office before the date of retirement of superannuation this acknowledgement should be detached from the Form and handed over to the applicant.

If the form has been received by post, it has to acknowledged on the same day and the acknowledgement be sent under registered cover to the applicant. In case it is received after the specified date, it should be accepted only if it has been put into the post on or before that date subjected to the production of evidence to that effect by the applicant.

FORM-1A

Form of application for commutation of a fraction of superannuation pension without medical examination when applicant desires that the payment of the commuted value of pension should be authorized through the pension payment order.

[See Rules 5 (2), 12, 13(3), 14 (1) and 15(3)]

(To be submitted in duplicate at least three months before the date of retirement)

PART-1

The.....
.....
.....
.....

(Here indicate the designation and full address of the Head of Office.)

Subject : Commutation of pension without medical examination.

Sir,

I desire to commute a fraction of my pension in accordance with the provisions of the Central Civil Services (Commutation of Pension) Rules, 1981. The necessary particulars are furnished below;-

1. Name in block letter

.....

2. Father's name and also husband's name in the case of female Govt. servant.....

.....

3. Designation.....

.....

4. Name of
Office/Department/Ministry.....
In which employed

.....

.....

5. Date of Birth (By Christian era).....

6. Date of retirement on superannuation or on the expiry of extension in service granted under FR 56 (d).....

...

7. Fraction of superannuation pension proposed to be commuted.

.....

contd.....

PART-III

Forwarded to the Accounts Officer

(here indicate the address and designation)

.....

.....
.....
with re remarks that:-

1. (i) The particulars furnished by the applicant in pat-I have been verified and are correct.
(ii) The applicant is eligible to get a fraction of his pension commuted without medical examination.
(iii) the commuted value of pension determined with reference to the Table applicable at present

comes to
Rs.....

(iv) the amount of residuary pension after commutation will be
Rs.....

2. The pension papers of the applicant completed in all respects were forwarded under this Ministry/Department/Office letter No.

.....
dated..... It is requested that the payment of commuted value of pension may be authorized through the pension payment order which may be issued one month before the retirement of the application.

3. The receipt of Part I of this form has been acknowledged in Part – II which has been forwarded separately to the application on

-
4. The commuted value of pension is debitable to Head of Account

.....
Place :
Signature

Date :
Office)

(Head of

FORM-1

[See Rule-53 (1)]

Nomination for Death-Cum-Retirement Gratuity

When the Government Servant has a family and wishes to nominate one member, or more than one member, thereof.

Ihereby nominate the person/ persons mentioned below who is/are member(s) of my family and confer on him/them the right to receive, to the extent specified below, any gratuity the payment of which may be authorized by the Central Government in the event of my death while in service and the right to receive on my death, to the extent specified below any gratuity which having become admissible to me on retirement may remain unpaid at my death:-

Original Nominee (s)			Alternate Nominee (s)		
Name & address of nominee/nominees	Relationship with the Govt. Servant	Age	Amount of Share of gratuity payable to each*	Name, Address, Relationship and age of the person or persons, if any to whom the right conferred on the nominee shall pass in the event of the nominee pre-deceasing the Govt. servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity	Amount or share of gratuity payable to each**
1.	2.	3.	4.	5.	6.

This nomination supersedes the nomination made by me earlier on which stands cancelled.

Note: (i) The Government servant shall draw lines across the blank space below the last entry to prevent insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this.....day of200 at
.....

Witnesses to signature:

1.

Signature of Govt. Servant

2.

(To be filled by the Head of

Office)

Nomination by

Designation.....

Signature of Head of Office

Office.....

Date.....

.....

Designation.....

Proforma for acknowledging the receipt of the nomination form by the Head of Office.

To,

.....

.....

.....

Sir,

In acknowledging the receipt of your nomination.....

thecancellation, dated the

.....of

the nomination made earlier in respect of gratuity in form.....

I am to state that it has been duly placed on record.

Place.....

Signature of Head of Office

Dated the

Designation.....

Note: The Government Servant is advised that it would be in the interest of his nominee (s) if copies of the nomination and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his death.

- * This column should be filled in so as to cover the whole amount of the gratuity.
- ** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original nominee (s).

OFFICE OF THE ACCOUNTANT GENERAL (A&E)-II, U.P., ALLAHABAD.

Specimen signature in respect of Shri.....
.....Designation.....
Personal No.....

	1.
Signature	2.
Attested	3

OFFICE OF THE ACCOUNTANT GENERAL (A&E)-II, U.P., ALLAHABAD.

Specimen signature in respect of Shri.....
.....Designation.....
Personal No.....

	1
Signature	2.
Attested	3

Photograph of Shri/Shrimati_____

_____ with his/her wife/husband

Shri/Shrimati_____

_____.

Attested

OFFICE OF THE ACCOUNTANT GENERAL (A&E)-II, U.P., ALLAHABAD.

Personal marks of indentification of Shri/Shrimati _____

_____ Designation _____

Personal No. _____

Retiring on _____

1. Height _____

2.

Attested

OFFICE OF THE ACCOUNTANT GENERAL (A&E)-II, U.P., ALLAHABAD.

Personal marks of indentification of Shri/Shrimati _____

_____ Designation _____

Personal No. _____

Retiring on _____

1. Height _____

2.

Attested

वसूली जाँच अनुशासनात्मक कार्यवाही सम्बन्धी प्रमाण पत्र

प्रमाणित किया जाता है कि श्री

.....

ख0ले0अ0.1 / ख0ले0अ0.2 / व0ख0ले0अ0.....

.....के विरुद्ध कोई भी वसूली शेष नहीं है तथा उनके विरुद्ध कोई भी जाँच एवं अनुशासनात्मक कार्यवाही नहीं चल रही है ।

श्री ख०ले०अ०.१ / ख०ले०अ०.

२/ व०ख०ले०अ० का सेवा सत्यापन विवरण

१. जन्म तिथि
२. कार्यभार ग्रहण करने की तिथि
३. सेवा निवृत्ति की तिथि

क्रमांक	तैनाती का स्थान	पद	अवधि	सेवा सत्यापन का विवरण	
				अवधि	सेवा पुस्तिका का पृष्ठ सं०

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CONSENT FOR RECOVERY

I hereby give my consent that any amount of Pension/Family Pension/D.C.R.G. found to have been paid to me in excess of what I am entitled under rules or any other amount found as recoverable from me may be deducted from my Pension/Family Pension and or D.C.R. Gratuity.

(Signature of the Applicant)

Place.....

Date.....

Attested

Signature.....

Designation.....

CONSENT FOR RECOVERY

I hereby give my consent that any amount of family pension/D.C.R.G. found to have been paid to me in excess of what I am entitled under rules or any other amount found as recoverable from me may be deducted from my Pension/Family Pension and or D.C.R. Gratuity.

(Signature of the Applicant)

Place.....

Date.....

Attested

Signature.....

Designation.....

Detail of Earned Leave Account of Shri.....

D.A.O. -I/D.A.O.-II/Sr. D.A.O.

Sl.No.	Period	Leave Earned	Total Earned Leave	Leave Taken		Balance E/L

--	--	--	--	--	--	--

Signature of D.D.O./Ex. En.
Office Seal

ANNEXURE- 'C'
RECEIPTED BILL

Received the sum of Rs.....
.....being the total of entitlement of Rs.....
from the Insurance Fund and/or Rs.....
the saving fund accrued to

Name

Designation.....Group/A/B/C/D CentralGovt. Employees Group
Insurance Scheme 1990.

Affix Revenue Stamp
recipient (s)

Signature (s) of

Dated
letters)

(Name in block

FOR USE IN DEPARTMENT/OFFICE

- (a) Relevant biodata of the member
1. Type of group of the member (i.e. lowest Viz * D C B A on initially joining the scheme on).
2. Year of acquiring membership of higher group.

(i)	C	19
(ii)	B	19
(iii)	A	19

be countersigned for payment of Rs.....
(Rupees.....)
to claimant (s).

Signature

Date

**Designation of
DDO**

FOR USE IN PAY AND ACCOUNTS OFFICE

Passed for payment of Rs.....

Payment through cheque (s) No.....Date.....(Rs.....)

Pay and Accounts Officer

*Delete whichever is not applicable