

Information for IFS Pension Case

Officer Name Shri : _____ Father's Name _____

Date of Birth : _____ Height (Cm.) _____

Date of Joining in the Service _____

Retirement Date : _____

Identification Mark
(Personal Mark of Identification) _____

Details of the members of my family

S. No.	Name of the family members	Date of Birth	Relationship with the officer	Remarks
(A) SPOUSE (WIFE/HUSBAND)				
(B) OTHER MEMBERS				
1.				
2.				
3.				

Mobile No. : _____

Present Address : _____

Address after retirement (With PIN Code): _____

Treasury Name : _____

Bank Name and Branch : _____

Bank Postal Address : _____

Bank Account No. : _____

Branch Code of Bank : _____

IFSC Code of Bank : _____

Aadhaar Number : _____

PAN : _____

E-Mail ID : _____

(Please attach Five (05) Joint Photos (Passport size) with spouse/nominee for pension, & Five Single Photos (Passport size) of self. Please also attach photo copy of current pay slip & Bank Pass Book (first page showing details of account, etc.)

Dated:

Signature & Designation

FORM - 1 (For IFS)**[See Rule 46 (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, there of.

I, hereby nominate the persons mentioned below who are member(s) of my family, and confer on him/them the right to receive to the extent specified below, any gratuity that may be sanctioned by the Government in the event of my death while in service or after retirement -

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

This nomination supersedes the nomination made by me earlier on(date), which stands cancelled.

Dated this _____ day of _____ 20__ at _____.

Witness to Signature :

1. _____
2. _____

Signature of the
Government Servant

NOTE : 1. The Government servant shall draw lines across the blank space below the last entry to prevent insertion of any name after he/she has signed.
2. Strike out if not applicable.

[To be filled in by the Head of Office / Audit Officer]

Nomination by.....

Signature of Head of Office /
Audit officer

Designation : _____

Date

Office : _____

Designation

**PROFORMA FOR ACKNOWLEDGING THE RECEIPT OF THE
NOMINATION FORM BY THE HEAD OF OFFICE AUDIT**

To,

I, acknowledge the receipt of your nomination dated the _____ / cancellation dated the _____ of the nomination made earlier in respect of Gratuity in Form-1(under Rule 46 (1)) and state that it has been duly placed on record.

Place-----

Signature of Head of Office/
Audit officer
[Designation]

Dated the

NOTE : The Government servant is advised that it would be in the interest of his nominees, if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they come into the possession of the beneficiaries in the event of his/her death.

FORM -3

(Sub Rule 54 (12))

Details of Family

Name of the Govt. servant :

Designation :

Date of Birth :

Date of appointment :

Details of the members of my family, are :-

Sr. No	Names of the members of family	Date of birth	Relationship with the Officer	Initials of the head of office	Remarks
1	2	3	4	5	6
1					
2					
3					
4					

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

Place : Bhopal

Date :

Signature of Govt. servant

FORM -5

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

- 1 Name of Government Servant
- 2 Date of Birth / Retirement
- 3 Two specimen signatures duly attested
(To be furnished in a separate sheet)
- 4 Three copies of passport size joint photographs of the Govt. servant with his/ her/ wife/ daughter/ husband.
- 5 Two slips showing the particulars of height and personal identification marks duly attested.
- 6 Present address
- 7 Address after retirement
- 8 Name of the Treasury/Public sector Bank and Branch through which the Government servant wants to draw his/her pension.
- 9 Details of the family in Form 3

Place : Bhopal

Date :

Signature of Govt. servant

Two slips each bearing the left hand thumb and finger impressions duly attested, may be furnished by a person who is not literate enough to sign his name.

If such a Government servant on account of physical disability is unable to give left hand thumb and finger impressions, he/she may give the thumb and finger impression of right hand. Where a government servant has lost both the hands, he may give his toe impressions; impressions should be duly attested.

Only two copies of passport size photographs of self need be furnished -

- i. If the government servant is governed by Rule 54 of the CCS (Pension Rules 1972 and is unmarried or a widower or widow.
- ii. If the government servant is governed by Rule 55 of the CCS (Pension) Rules, 1972.

FORM -7

[See Rule 62,63(6),66(1),68,69(2), 71(1) and 73(1) and (7)

FORM FOR ASSESSING PENSION AND GRATUITY

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

Part - 1

- 1 Name of Government Servant
- 2 Father's name (and also husband's name in the case of a female Government servant).
- 3 Date of Birth (by Christian era)
- 4 Religion and Nationality
- 5 Permanent residential address showing Village / Town, District & State
- 6 Present or last appointment including names of establishment.
 - a. Substantive
 - b. Officiating, if any
- 7 DATE OF BEGINNING OF SERVICE
DATE OF END OF SERVICE on superannuation age
- 9
 - i. Total period of military service for which pension / 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 of employment
- 12 Interruption and non-qualifying service
- 13 Length of qualifying service including Training period
- 14 Class of pension of service gratuity applied for by the Government servant; cause of application (in case of invalid pension, medical certificate to be attached)
- 15 Whether the Government servant is a pre 1939 entrent and chapter VT of the Central civil service (pension) Rules, 1972 applies to him
- 16 Emoluments reckoning for gratuity
- 17 Average emoluments reckoning for pension
- 18 Date on which Government servant applied for pension in Form 5.
- 19 Proposed pension

- 20 Proposed death-cum-retirement gratuity
- 21 Proposed service gratuity, if any -
- 22 Date from which pension is to commence
- 23 Proposed amount of the provisional pension if departmental disciplinary/judicial proceeding is instituted against the Government servant before retirement.
- 24 Whether nomination made for
- a. Death-cum-retirement gratuity
- b. Non-contributory family pension, if applicable
- 25 Whether Family pension 1964 applies to the Government servant, and if so
- a. emoluments reckoning for contributory family pension -
- b. The amount of contribution to be recovered out of the gratuity -
- c. The amount of the contributory pension
-
- 26 Family pension becoming payable to the wife/husband of the Govt. servant in the event of his/her death after retirement -
Complete and up-to-date details of family as given in form 3

Sr. No.	Names of the members of family	Date of birth	Relationship with the Officer
1	2	3	4
1			
2			
3			
4			

- 27 Height
- 28 Identification marks
- 29 Place of payment of pension/ gratuity (Treasury / Sub-Treasury)
- 30 Head of account to which pension and gratuity are debitable

Place : Bhopal

Date :

**Signature of Head of Office /
Accounts Officer**

Form No 7
PART - II
[SECTION - I]

EMOLUMENTS DRAWN DURING THE LAST TEN MONTHS OF SERVICE :

Post held	From	To	Pay	Months	Total
------------------	-------------	-----------	------------	---------------	--------------

AVERAGE EMOLUMENTS

[SECTION - II]
Details of non-qualifying service
From To

- 1- Interruption (s)
 - 2- Extraordinary leave not qualifying for pension
 - 3- Period of suspension not treated as qualifying
 - 4- Any other service not treated as qualifying
- Total :-

[SECTION - III]

Period of service not verified with reference to acquaintance rolls.
Whether the above period has been verified in accordance with the provisions of Rule 67 of the Central Civil Service (Pension) Rules, 1972

[SECTION - IV]

- NOT APPLICABLE -

(To be cases by the Head of Offices in the case of non-gazetted Government servants referred to in Rule - 66)

Details of provisional pension and gratuity to be drawn and disbursed by the Head of Office in accordance with the provisions of Rule-71

Provisional pension Rs.p.m.

Gratuity (Three-Fourth of the gratuity mentioned against item 20 of par-I less. Rs.

- (a) Contribution towards contributory family pension, if applicable (Sec. Item 26(ii) of Part-i)

* In case where the last ten months include some period not to be reckoned for calculating average emoluments, an equal period backwards has to be taken for calculating the average emoluments.

PENSION CALCULATION SHEET

A. Name			
B. Designation of post from which retired.			
C. Ministry/Department/Office last served			
D. Date of birth			
E. Date of superannuation/retirement			
F. Date of appointment to the service			
G. Rules under which pensioners/benefits were nettled			
H. Qualifying service for pension in Indian Forest Service, including Training period	Years	Months	Days
Total			
Please Indicate separately -			
(i) Period of service if any rendered by the officer before his appointment to the service, which is reckoned as qualifying service.			
(ii) Addition to qualifying service, if any allowed under rules 3(A) and Rules 1953	-		
(iii) Period of service not qualifying for pension with the pension for not qualifying indicating against.	-		
I. Emoluments drawn during the last 10 month (along with the pay scale) preceding retirement/superannuation (pay, special pay deputation).			
J. Computation of average emoluments on which pension is to be fixed.			
K. Total amount of pension and family pension sanctioned.			

Family pension

L. Detail of commutation of pension

(i) percentage/amount of monthly pension commuted and

(ii) Amount of commuted value of pension authorized

40%

M. Commutation of DCRG

N. Amount of DCRG sanctioned

Remarks :

The commuted value of pension determined with reference to the table applicable at present comes to Rs. and the amount of subsidiary pension after commutation will be Rs.

Signature of Head of Office

FORM - D

**FORM OF APPLICATION FOR CUMMUTATION OF A FRACTION OF
SUPER ANNUATION PENSION WITHOUT MEDICAL EXAMINATION WHEN APPLICANT
DESIRES THAT THE PAYMENT OF THE COMMUTED VALUE OF PENSION SHOULD
BE AUTHORISED THROUGH THE PENSION PAYMENT ORDER**

*To be submitted in duplicate 3 months before the date
of retirement.*

Photo

PART - I

To,

The Principal Secretary to the Government
of M.P. Forest Deptt. Bhopal

Sub.: Commutation of pension without medical examination.

Sir,

I desire to commute a fraction of my pension in accordance with the provisions of the AIS (Commutation of Pension) Regulations 1959. The necessary particulars are furnished below -

- 1 Name in Block letters
- 2 Father's name (and also Husband's name in the case of female member of the service)
- 3 Designation
- 4 Ministry/Department/ Office last served
- 5 Date of birth (in figures and words)
- 6 Date of superannuation or on the expiry of extension in service.
- 7 Fraction of superannuation. pension proposed to be commuted (Maximum amount of pension that can be commuted is one third.)

- 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 nationalized Bank with complete postal address

 - b ii Bank Account No. to which monthly pension is to be credited each month.

 - c Designation & Address of the Accounts Officer (applicable in a case where the pension is proposed to be drawn through an Accounts Officer other than A.O. issuing the P.P.O.)

Signature
Present Postal Address

Place : Bhopal

Date :

Note - The payment of commuted value of pension shall be made through the disbursing authority from which pension is to be drawn after retirement. It is not open to an applicant to draw the commuted value of pension from a disbursing authority other than the disbursing authority from which pension is to be drawn.

DECLARATION

I hereby declare that I have neither applied for nor received any pension or gratuity and death-cum-retirement gratuity in respect of any portion of service included in this application and in respect of which pension or gratuity and death-cum-retirement 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 thereon.

Signature of Govt. servant

Attested

Form-5
(See rule 7)

To

Head of Office,
CPAO, New Delhi

I _____ (Name of the pensioner in Capital letters) hereby nominate the person named below under rule 7 of the Central Civil Services (Commutation of Pension) rules, 1981

Name and address of nominee	Relationship with the pensioner	If nominee is minor		Name and address of other nominee in case the nominee under column-1	Relationship with the pensioner	Date of birth if other nominee is minor	Name and address of person who may receive the commuted value of pension during the other nominee's minority	Contingency on the happening of which nomination shall become invalid
		Date of birth	Name and address of person who may receive the said commuted value during the nominee's minority					
1	2	3	4	5	6	7	8	9
		-	-				-	-

Place

Signature

Date

Name of Pensioner :

Address :

Witnesses: Signature

Signature of Head of Office

Name and Address :

Stamp

Specimen signature of :

Designation :

Office of the :

1. _____

2. _____

3. _____

Attested

.....

I hereby give my consent for the recovery of Govt. dues, if any, from my pension and D.C.R.G.

Signature of Govt. servant

Attested

My Latest Postal Address

Present

:

:

:

:

:

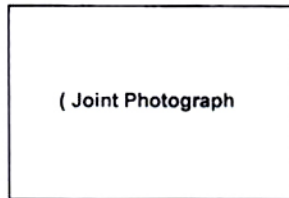
I am willing to draw my pension :
& DCRG from the District Treasury

Signature

Pension case : Shri _____

(Joint Photograph)

Joint photograph of Shri _____ (IFS) _____
_____ and his/her wife/husband _____ office of
the _____ retiring on superannuation on



Signature of Govt. servant

Attested

Pension case : Shri _____

Personal marks of identification of Shri(IFS)

----- retiring on superannuation on

1. Height :

2. Personal mark of identification :

Signature of Govt. servant

Attested

श्री (भा0व0से0) के
अंगुष्ठ/अंगुलियों के निशान निम्नानुसार सत्यापित है :-

बायें हाथ के निशान

हस्ताक्षर

नाम.....

से.निवृत्ति पर पदनाम.....

प्रतिहस्ताक्षरित/सत्यापि

प्रति,

प्रमुख सचिव
म.प्र.शासन, वन विभाग,
भोपाल ।

विषय:- सी.जी.एच.एस. की सुविधा प्राप्त करने के संबंध में।

-: 0 :-

महोदय,

उपरोक्त विषय में निवेदन है कि मैं अधोहस्ताक्षरकर्ता सेवा निवृत्ति उपरान्त पेन्शन के साथ, चिकित्सा भत्ता नहीं लेते हुए, सी.जी.एच.एस. की सुविधा प्राप्त करने के लिये विकल्प देता हूँ।

दिनांक :

भ व दी य

()

भा.व.से.

SPECIMEN LETTER OF UNDERTAKING BY THE PENSIONER

Date.....

To
The Branch Manager

Dear Sir,

Sub.- Payment of pension under P.P.O. No. _____ through your office.

-----000-----

In consideration of your having, at my request, agreed to make payment of pension due to me every month by credit to my account with you, I, the undersigned, agree and undertake to refund or make good any amount to which I am not entitled or any amount which may be credited to my account in excess of the amount to which I am or would be entitled. I further hereby undertake and agree to bind myself and my heirs, successor, executors and administrators to indemnify the bank from and against any loss, suffered or incurred by the bank in so crediting my pension to my account under the scheme and to forthwith pay the same to the bank and also irrevocably authorise the bank to recover the amount due by debit to my said account or any other account/ deposits belonging to me in the possession of the bank.

Yours faithfully,

Signature :

Name:

Address:

Witnesses:

(1) Signature:

Name:

Address:

Date:

(2) Signature:

Name:

Address:

Date:

PROFORMA FOR ZERO OPTION OF DRAWAL OF PENSION IN RESPECT OF ALL INDIA SERVICE OFFICERS (AT THE TIME OF RETIREMENT)

1. I opt to draw my pension/family pension from (tick \checkmark) :-

- Government of India
- State Government

2. Name (in block letter) : _____
3. Designation & Cadre/batch : _____
4. Date of Retirement/Death : _____
5. Office Address with
Tele phone No. : _____
6. Residential Address : _____
: _____
: _____
7. Telephone No. (Res) : _____
8. Aadhaar Number : _____
9. E-Mail ID, if any : _____
10. PAN No. : _____
11. PPO No. (in case of retired officer) : _____

Signature of Pensioner

Place:

Date: