**Annex-A**

**CERTIFICATE / INFORMATION TO BE GIVEN BY THE PENSIONER**

**(to be given by retiring government servant in case of superannuation / invalid pension / compulsory retirement / retiring pension / family pension) PHOTO**

**Descriptive Roll (list of family members)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S.No. | Name | Relation with Retiring/deceased Govt. Servant / deceased pensioner | C.N.I.C. | Age/Date of Birth | Marital Status |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |

**Signature of retiring Government Servant /**

**Person Claiming Family Pension**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I hereby undertake to refund the amounts established against me during or after my service or the same may be deducted at source from my pension / commutation (applicable in case of superannuation / invalid / compulsory retirement / retiring pension)

**Signature of retiring**

**Government Servant**

I hereby opt full pension without commutation or commutation @-----(subject to a maximum of 35%) of my gross pension. (applicable in case of superannuation / invalid / compulsory retirement / retiring pension)

**Signature of retiring Government Servant**

I hereby undertake to refund any outstanding amount/liability established against the deceased government servant/pensioner during his service or thereafter and if so, the same may be deducted at source / adjusted against my family pension / gratuity. (applicable in case of Family Pension)

**Signature of the person claiming**

**Family pension**

I hereby solemnly declare that I Mst./Mr./Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name and relation with government servant/pensioner) am a bonafide entitled family member to receive pension of late Mr./Mrs.\_\_\_\_\_\_\_\_ S/o /D/o \_\_\_\_\_\_\_\_ who expired on \_\_\_\_\_\_\_ while in-service/after retirement and who was in receipt of pension/family pension, as the case may be.

i. Death Certificate is attached

ii. PPO / FPPO (in case of pensioner’s death certificate is attached)

(applicable in case of Family Pension only)

**Signature of the person claiming**

**Family Pension**

**Note**: This proforma must be attested by the PSA / DDO