

**ANNEXURE 2 (Revised)**

(FOR PENSIONER)

(Reference of OM No. 2/23/2016-1 Pension dated 10<sup>th</sup> January, 2018.)

Sr. No.	Particulars	Remarks
1.	Name of the Pensioner	
2.	Father/Husband's Name	
2A.	<b>Current Address of the Pensioner with Mobile No.</b>	
3.	Date of Birth	
4.	Date of Joining	
5.	Date of Retirement	
5A.	<b>Date of Death (After 01.01.2016)</b>	
6.	Qualifying Service (in years)	
7.	Pension Payment Order No.	
8.	Post Held at the time of Retirement	
8A.	<b>Current Pension Disbursing Authority (Treasury/Sub Treasury)</b>	
9.	Savings Bank Account No.	
10.	Scale of Pay (or Pay Band & G.P.) at the time of retirement or Notional pay scale as on 1.1.1986 for those retired before 1.1.1986	
11.	Pay on retirement or Notional Pay as on 1.1.1986 for those who retired before 1.1.1986	
12.	<b>Pension as on 01.01.2016 before revision</b>	
13.	<b>Revised pension</b> by multiplying pre-revised pension by <b>2.57 (Col. No. 12)</b>	
14.	Pay fixed on notional basis on 01.01.1996	
15.	Pay fixed on notional basis on 01.01.2006	
16.	Pay fixed on notional basis on 01.01.2016	
17.	<b>Revised pension w.e.f 1.1.2016</b> as per first formulation (Amount of pension has been <b>reduced pro-rata</b> according to length of service as prescribed in the rules and calculation has also been made on the basis of average emoluments of last ten months or last pay drawn (as the case may be)	
18.	<b>Revised pension payable (Higher of Sr. -No. 13 and 17)</b>	
19.	<b>Revised Family Pension w.e.f. 1.1.2016 as per first formulation after the death of the employee after 01.01.2016.</b>	
20.	<b>Class of Pension</b>	



Verified by  
SAS Personnel of Department  
(Name & Designation)

Signature of DDO  
(Name & Designation)

**ANNEXURE 3 (Revised)**  
**(FOR FAMILY PENSIONER)**

(Reference of OM No. 2/23/2016-1 Pension dated 10<sup>th</sup> January, 2018.)

Sr. No.	Particulars	Remarks
1.	Name of the Family Pensioner	
2.	Father/Husband's Name	
<b>2A.</b>	<b>Current Address of the pensioner with Mobile No.</b>	
3.	Date of Joining of Deceased Employee	
4.	Date of Death of the employee	
5.	Post Held by the deceased at the time of Retirement/Death	
6.	Qualifying Service (in years) of deceased employee	
7.	Date of Birth of Family Pensioner	
8.	Family Pension Payment Order No.	
<b>8A.</b>	<b>Current Pension Disbursing Authority (Treasury/Sub Treasury)</b>	
9.	<b>Bank Branch</b> and Savings Bank Account No.	
10.	Scale of Pay (or Pay Band & G.P.) at the time of Death or Notional pay scale as on 1.1.1986 for those who died before 1.1.1986	
11.	Pay on date of death or Notional Pay as on 1.1.1986 for those who retired before 1.1.1986	
12.	<b>Family pension as on 01.01.2016 before revision</b>	
13.	Family pension at enhanced rate as on 01.01.2016 before revision (if applicable)	
14.	<b>Revised family pension</b> by multiplying pre-revised family pension by <b>2.57 (Col. No. 12)</b>	
15.	Revised family pension at enhanced rate by multiplying pre-revised enhanced family pension by <b>2.57 (Col. No. 13)</b>	
16.	Pay fixed on notional basis on 01.01.1996	
17.	Pay fixed on notional basis on 01.01.2006	
18.	Pay fixed on notional basis on 01.01.2016	
19.	<b>Revised family pension w.e.f. 1.1.2016</b> as per first formulation	
20.	Revised family pension at enhanced rate w.e.f. 1.1.2016 as per first formulation.	
21.	<b>Revised family pension payable (Higher of S.No. 14 and 19)</b>	
22.	Revised family pension at enhanced rate payable ( <b>Higher of S.No. 15 and 20</b> )	

Signature of DDO  
(Name & Designation)

Verified by  
SAS Personnel of Department  
(Name & Designation)

ANNEXURE-1

[See rule 17 (1)] [as per FD letter no. 2/23/16-1 Pension]  
dt. 10.1.18

UNDERTAKING

I hereby undertake that in case excess payment is found to have been made as a result of incorrect fixation of pension/family pension or any excess payment detected in the light of discrepancies noticed subsequently shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise.

Date:

Signature \_\_\_\_\_

Place:

Name \_\_\_\_\_

Address \_\_\_\_\_

**ANNEXURE-II**

*[See rule 17 (2)]*

**UNDERTAKING**

I hereby undertake that as a result of any rectification or adjustment in the pension granted to me on the basis of any interim order by any Court of law, any excess amount which is found to have been made as a result of relevant appropriate decision taken by the Government on the final decision of the Court of law, shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise. I further undertake to abide by such relevant appropriate decision of the Government taken on the final decision of such Court of law as the case may be.

Date:

Signature \_\_\_\_\_

Place:

Name \_\_\_\_\_

Address \_\_\_\_\_