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/her retirement.

- 1. Name :
- 2. (a) Date of Birth : (b) Date of Retirement :
- 3. Three specimen signatures duly attested to be furnished on a separate sheet) duly attested by Gazetted Govt. Servant.
- 4. Three copies of passport size joint photograph with wife or husband (to be attested by the Head of Office).
- 5. Three slips showing the particulars of height and personal identification marks duly attested by a Gazetted Government Servant.
- 6. Present Address :
- 7. Address after retirement:
- 8. "Name of the Treasury through which: the pension is to be drawn
- 9. Details of the family in Form-3.
- 10. Indicate whether family pension is admissible from any other source —military or State Govt, and/or a public sector undertaking/autonomous body/Local fund under the control of a state govt.

Place: New Delhi Signature

Date : Designation:

Division/Regional Station I.A.S.R.I, New Delhi- 12.

Left hand thumb and finger impression of		
Shri		
Thumb		
Pointer Finger		
Middle Finger		
Ring Finger		
Little Finger		
Signature		
<u>Attested</u>		
1. Signature		
2. Designation		
3. Signature		
4. Designation		
Date:-		
Specimen Signature of Shri		
In the Indian Council of Agricultural Research, New Delhi.		
(1)		
(2)		
(3)		
ATTESTED BY		
(1)		

INDIAN COUNCIL OF AGRIULTURAL RESEARCH KRISHI BHAWAN, NEW DELHI- 110 001

Descriptive roll of Shri ______ in the Indian Council of Agricultural Research. 1. Date of Birth : 2. Height 3. Personal Mark on hand or face (1) (2) 4. Signature (1) (2) (3) ATTESTED (Two Gazetted Officers) (1) (2) Pass Port size Photograph of Shri in the Indian Council of Agricultural Research, Krishi Bhawan, New Delhi-110 001

Name of wife/husband: _____

ATTESTED BY (Two Gazetted Officers)

(1)		
(2)		
((To be signed by the retiring Government S	Servant)
state the orgratuity/Deasum of Rs and or the the amount said amount Retirement (in excess of raise on objection).	eas the designation of the officer sanctioning to the cum Retirement Gratuity) has consented sum of Rs. of my gratuity, I here by acknowledge the case of the pension of the same that the which I am entitled under the rule jection to such revision. I further promite to me in excess of that to which I may be the consented to me in excess of that to which I may be the consented to me in excess of that to which I may be the consented to me in excess of that to which I may be the consented to	the pension/service ed to grant me the as as nat in accepting the Gratuity/Death-cumber being found to be es, and I promise to mise to refund any
	Signature o	of the Govt. Servant
(1)	Signature	
	Address & Occupation of witness	
(2)	Signature	
	Address & Occupation of witness	
	declaration should be witnessed by y in the town, village, or pargana in v	-

DETAILS OF FAMILY

(for the purpose of grant of Family Pension under the scheme for Central Govt. Employees 1964)

Name of the	Govt. Employee:		
Office			
			-
Name of the	family members	Date of Birth	Relation with
			Govt. servant
		Cianatura	
		Signature	
		Designation	
Counter sign	ed	Govt. side/Research si	de
Note:	Any changes occu	rring in the family shou	ıld be immediately
	intimate to Establis	shment Section concerne	ed, I.C.A.R.
	Name of wife/hus	band as the case may	be and names of
	minor son/un-mari	ried daughter only shoul	d be given.

FORM-7 (See Rules 58, 60, 61(1) and (3) and 65(1))

FORM FOR ASSESSING PENSION AND GRATUITY

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

PART- I

5. Permanent residential address: showing village, town district and state. 6. Present or last appointment including name of establishment Substantive (i) Officiating, if any (ii) 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.

Amount and nature of any:

Name of the Govt. Servant:

husband's name in the case of female Government Servant

Date of birth by Christian era:

Father's name (and also

1.

2.

3.

4.

10.

Religion

pension/gratuity received for the military service. Government under which service: 11. has been rendered in order of employment Year Month Day 12. Class of pension applicable 13. The date on which action initiated to (i) Obtain the "No Demand Certificate" from the directorate of I states as provided in rule 57; (ii) Assess the government dues other than the dues relating to the allotment of Govt. accommodation as provided in rule 73(1) 14. Details of ommissions, 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 (i) Interruption in service condened under rule 28 (ii) Extraordinary leave not qualifying for pension (iii) Period of suspension not treated as qualifying Total

(17) Emoluments reckoning for gratuity

(18) Average emoluments

Emoluments drawn during the last ten months of service ----- Post held from to Pay Personnal or special pay Average emoluments

- 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 retirement.
- 24. Details of government dues recoverable out of gratuity:
 - i) License for the allotment of Government accommodation (see (sub-rule (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, if applicable
- 26. Whether family pension 1964 applied 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 65 years, or
- b) after attaining the age of 65 years.
- (iii) Complete and up-to-date details of the family as given in Form-3

S.No. Name of the member Date of Birth Relationship with of the family the govt. servant

- 27. Height
- 28. Identification marks :
- 29. Place of payment of pension IASRI (Treasury, Sub-Treasury or Branch of public sector bank or the Pay and Accounts Office.)
- 30. Head of Account to which pension And gratuity are debitable.

CHIEF ADMINISTRATIVE OFFICER

INDIAN COUNCIL OF AGRIULTURAL RESEARCH KRISHI BHAWAN, NEW DELHI- 110 001

I hereby agree	e to the recovery	of Rs	on account
of overdrawal of pay	and allowances	and of Rs.	on
account of arrear of rer	nt and other miso	cellaneous r	ecoveries being made
for my pension and/or D	C.R. Gratuity.		
			(Signature)
			Designation:
Witness:			
1.			
2.			
NON		ATLV DENICT	ONI
NOI	<u>IINATION OF FAN</u>	<u> 11LY PENSIO</u>	<u> </u>
I hereby no	ominate the pers	sons mentic	oned below, who are
members of my family	•		•
pension which may be			•
after completion of 10 y	,		,
	, , ,		
Name and address	 Relationship	Λαο	 Whether married
of nominee	with Officer	Age	or unmarried

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

N.B. : The Officer should draw lines across the blank space

below the last entry to prevent the insertion of

any name after he has signed.

Witness & Signature:

(1) (2)

PROFORMA

- 1. Date from which continuous appointment of the Govt. of India.
- 2. Brief particulars of Service rendered from time to time.
- 3. If even on foreign service, if so periods and details thereof.
- Whether House Building/ Conveyance Advance sanctioned if so details thereof indicating the balance amount which will remain outstanding at the time of retirement.
- 5. Whether opted for Liberalized Pension Rules including Family Pension Scheme' 64.
- Whether nomination for Deathcum-Retirement gratuity, Family Pension and Details of Family furnished.
- 7. Particulars of Govt. accommodation allotted from 1.3.1960.

Dated the	SIGNATURE OF RETIRING OFFICER
	DESIGNATION:

FORM OF APPLICATION FOR COMMUTATION OF PENSION WITHOUT MEDICAL EXAMINATION 9 UNDER MINISTERY OF FINANCE OFFICE MEMORANDUM NO. 14(5)-EV (A)/76 DATED 26TH December, 1977.

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The Director NCAP, New Delhi		

Sub: - Commutation of Pension without Medical Examination.

Sir,

I furnish 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 Letters :
- 2. Date of Birth :
- 3. Date of Superannuation on attaining the age of 58 years (or 60 years in the case of Group 'D' employees).
- 4. Designation of the post held at the time of superannuation and the name of the Ministry/ Department/Office.
- 5. Amount of pension sanctioned and whether it is provisional or final.
- 6. Class of pension as defined

	(Pension Rules) 1972.	
7.	Name of Treasury or Bank and Account Number from which pension is being drawn.	:
8.	Name of the Treasury or Bank through which are commuted value is desired to be paid, if through the Accounts Officer who authorized the Pension.	:
9.	Designation of the Accounts Officer and the number and date of the PPO, if issued.	:
10.	Amount (in whole Rupees) or percentage of pension proposed to be commuted.	:
11.	Particulars of any application for commutation of pension made previously and whether appeared any Medical Authority or not.	
Date:		
		Signature Full Postal Address
desire		
	PART-	<u>II</u>
	Forwarded to the	
	(Acco authorizing the payment o	ounts Officer) f the commuted value
Place Date	: New Delhi : Name	Signature & Address of the Head of Office

ACKNOWLEDGEMENT

Received from	retiring
an application for commuta	tion of pension without medical examination.
D-t-	Cianatana Nana O Addusa of the
Date	Signature, Name & Address of the
	Head of the Office (with stamp)

This acknowledgement is to be signed stamped and dated and is to be detached from the form and handed over to the applicant. If the form is received by post, it has to be acknowledged in the same day and sent under registered cover to the applicant.