

FORM NO. 3
DETAILS OF FAMILY
{See Rule 54(12) of CCS (Pension) Rules, 1972}

.....

Name of Govt. Servant	:				
Designation	:				
Date of Birth	:				
Date of Appointment	:				
Details of the members of my family* as on	:				
S.No.	Name of the member of family	Date of Birth	Relationship with the Official	Initials of the Head of Office	Remarks
1.					
2.					
3.					
4.					
5.					
6.					

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 the Government Servant

Date: _____

*Family for this purpose means family as defined in clause(b) of sub-rule(14) of Rule 54 of the CCS(Pension) Rules, 1972.

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

FORM-5

(See Rules 59(1© & 61(1)

[Also see Rule 5(2), 12, 13(3),14(1) and 15(3) of Central Civil Service (Commutation of Pension)Rules.1981]

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 the Government servant	
2.	(a) Permanent Account NO. For Income Tax(PAN) (b) Adhaar No., if available	
3.	Specify a few marks of identification, not less than two, if possible	
4.	Height	
5.	Address after retirement/permanent address for future correspondence	
6.	Bank Account No. to which pension is to be credited: (joint Account, either or survivor, with the spouse)(In case the Head of Office is satisfied that it is not possible for the retiring Govt. servant to open a joint account for reasons beyond his/her control, this requirement may be relaxed).	
7.	Name of the Branch of Bank through which pension is to be drawn a) BSR code of the branch b) IFSC code of the branch	
8.	Indicate whether family pension is also admissible from any other source – Military or State Govt. and/or a Public Sector Undertaking/Autonomous body/Local Fund under the Central or a State Govt.	
9.	I desire to commute ...40..... % (up to 40%) of my superannuation pension in accordance with the provisions of the Central Civil Services(Commutation of Pension) Rules, 1981.	

I am aware that future good conduct of the pensioner/family pensioner shall be an implied condition for every grant of pension/family pension and its continuance.

Place :

Signature_____

Dated :

Designation

Ministry/Department,

Note 1: Commutation of pension is optional. Item 9 may be stuck off if the retiring Govt. Servant does not desire to commute a percentage of pension.

Note2:A separate application for commutation of superannuation pension in Form 1-A of Central Service (Commutation of Pension) Rules, 1981 is require to be submitted in case of retiring Govt. servant desires to apply for Commutation of Pension after submission of this form but three months before retirement.

Note 3:It is in the interest of the Govt. servant to provide E-mail ID and Mobile number, which facilitates future correspondence.

Check List of Documents to be submitted alongwith Form 5.

S.No.	Description of documents to be enclosed	Whether enclosed
1.(a) (b)	Two Specimen signature duly attested (To be furnished in separate sheet) Additional information (only in case of an illiterate or disabled Govt. Servant):- Two slips each bearing the left hand thumb and finger impression duly attested may be furnished by a person who is not literate and cannot sign his name. If such a Govt. servant on account of physical disability is unable to give left hand thumb and finger impression he may give thumb and finger impression of the right hand. Where a Govt. servant has lost both the hands, he may give his toe impressions. Impression should duly attested by a Gazetted Govt. servant.	
2.	Three copies of passport size joint+ photograph with wife or husband. Where it is not possible for a Govt. servant to submit a photograph with his wife or her husband, he or she may submit separate photographs. The photographs shall be attested by the Head of Office. Three copies of a passport size photographs of disabled child/siblings/dependent parents, if applicable.(To be attested by the Head of Office)	
3.	Details of the family Form-3	
4.	Undertaking in form 26, for those who served in Security-related or Intelligence Organisation referred to in Rule 8 of the CCS(Pension) Rules, 1972.	
5.	Written statement for counting of period of service under Rule 59(1(a), if any	
6.	Undertaking for refunding any excess payment made by the pension disbursing Bank.	
7.	Nomination for gratuity, CGEGIS and GPF in Common Nomination Form.	
8.	Nomination for arrears of pension and commuted value of pension (if applied for commutation of pension) in common Nomination Form	

FORM-A

FORM OF APPLICATION FOR COMMUTATION OF A FRACTION OF SUPERANNUATION PENSION WITHOUT MEDICAL EXAMINATION WHEN APPLICANT DESIRES THAT THE PAYMENT OF THE COMPUTED VALUE OF PENSION SHOULD BE AUTHORISED 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-I

To,

The Head of Office
Ministry of Environment and Forests
New Delhi

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 letters)	:	
2.	Father's name (and also husband's name in the case of a female Government 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 if extension in service granted under FR 56(d)	:	
7.	Fraction of superannuation pension proposed to be commuted	:	

*The applicant should indicate the fraction of the amount of monthly pension (subject to a maximum of one-third thereof) which he/she desires to commute and not the amount in rupees).

.....2/-

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 nationalized 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	:	
	Present Postal Address:	:	
	Postal address after retirement	:	

Place: _____

Date: _____

Signature of the Government Servant

Specimen signature of Shri/Smt _____
in the Ministry of Environment and Forests, CGO Complex, Lodi Road,
New Delhi.

1. _____

2. _____

3. _____

ATTESTED BY

1.

2.

Passport-size joint photographs of Shri/ Smt. _____.

in the National Commission for Ministry of Environment, Forest &
Climate Change New Delhi-110 003

ATTESTED BY

1.

Space for
passport size
photographs

2.

Space for joint
passport size
photographs

PARTICULARS OF HEIGHTS AND IDENTIFICATION MARK OF

SHRI/SMT. _____

Heights : _____

Personal mark : _____

Attested

1.

2.

"Form 1

(Common Nomination Form for Gratuity, General Provident Fund and Central Government Employees' Group Insurance Scheme)

{See Rule 53 of CCS (Pension) Rule 5 of General Provident Fund (Central Services) Rule, 1960 and Para. 19.7 of Central Government Employees' Group Insurance Scheme, 1980}

I.....hereby nominate the person/persons mentioned below and confer on him/her/them the right to receive in the event of my death, to the extent specified below, amount on account on the following:-

- (i) Any gratuity the payment of which may be authorized under Rule 50 of CCS (Pension)Rule.
- (ii) Amount that may stand to my credit in General Provident Fund.
- (iii) Any amount that may be sanctioned by the Central Government under the Central Government Employees' Group Insurance Scheme, 1980.

Name, Date of Birth (DOB) and address of the nominee	Relation-ship with employee/pensioner	Share to be paid to each	If nomi-nee is minor name DOB address of person who may receive the amount on behalf of minor	Name, DOB and address of alternate nominee in case the nominee under Column (1) predeceases the employee/pensioner	Relation-ship with employee/pensioner	Name, DOB address of person who may receive the amount if alternate nominee in Col. (5) is minor	Contingency on happening of which nomination shall become invalid
							Insanity

These nominations supersede any nominations made by me earlier.

Place and date:

Signature of Government Servant/
Pensioner Tel. No.

NOTE 1.-Completely strike out the benefit for which nomination is not intended to be made. Separate copies of this nomination Form may be used for nominating different person for benefit (i), (ii) and (iii)above.

NOTE2.- The Government servant shall draw lines across the blank space below the last entry to prevent the insertion of any name after he/she has signed. The nominee(s)/alternate nominee(s)' shares together should cover the whole amount.

(To be filled in by the Head of Office/Authorized Gazetted Officer)

Received the nomination, dated.....under the following Rules:-

1. Central Civil Services (Pension)Rule, 1972 for Gratuity
2. General Provident Fund (Central Services) Rules, 1960.
3. Central Government under the Central Government Employees' Group Insurance Scheme, 1980.

Made by Shri/Smt./Kumari.....

Designation.....

Office

(Strike out which nomination is not received)

Entry of receipt of nomination (s) has been made in page

.....Volume.....of Service Book

Name, Signature and Designation of Head of Office /authorized Gazetted Officer with seal

Date of receipt.....

The receiving officer will fill the above information and return a duly signed copy of the complete Form to the Government servant who should keep it in safe custody so that it may come into the possession of the beneficiaries in the event of his/her death.

The receiving officer shall put his/her dated signature on both pages on this form.”

(c) Form B shall be omitted.

"Form A

(Common Nomination Form for Arrears of Pension and Commutation of Pension)

I.....hereby nominate the person/persons mentioned below and confer on him/her/them the right to receive in the event of my death, to the extent specified below, amount on account on the following:-

- (i) Arrears of Pension
- (ii) Commuted Value of Pension payable under Central Civil Services (Commutation of Pension) Rules, 1981.

Name, Date of Birth (DOB) and address of the nominee	Relation-ship with employee/ Pension-ner	Share to be paid to each	If nominee is minor, name, DOB address of person who may receive the amount on behalf of minor	Name, DOB and address of alternate nominee in case the nominee under Column (1) predeceases the employee/pensioner	Relationsh ip with employee/ pensioner	Name, DOB address of person who may receive the amount if alternat e nominee in Col. (5) is minor	Contingency on happening of which nomination shall become invalid
							Insanity

These nominations supersede any nominations made by me earlier.

Place and date:

Signature of Government Servant
Pensioner Tel. No.

NOTE 1.-Completely strike out the benefit for which nomination is not intended to be made. Separate copies of this nomination Form may be used for nominating different person for benefit (i) and (ii) above.

NOTE2.- The Government servant shall draw lines across the blank space below the last entry to prevent the insertion of any name after he/she has signed. The nominee(s)/alternate nominee(s)' shares together should cover the whole amount.

(To be filled in by the Head of Office/Authorized Gazetted Officer)

Received the nomination, dated.....under the following Rules:-

1. Payment of Arrears of Pension (Nomination)Rules, 1983
2. Central Civil Services (Commutation of Pension)Rule, 1981

Made by Shri/Smt./Kumari.....

Designation.....

Office

(Strike out which nomination is not received)

Entry of receipt of nomination (s) has been made in page

.....Volume.....of Service Book

Name, Signature and Designation of Head of Office /authorized Gazetted Officer with seal

Date of receipt.....

The receiving officer will fill the above information and return a duly signed copy of the complete Form to the Government servant who should keep it in safe custody so that it may come into the possession of the beneficiaries in the event of his/her death.

The receiving officer shall put his/her dated signature on both pages on this form.”

(d) Form B shall be omitted.

Annexure-III

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 ✓) :-
 - 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. PPO No. (in case of retired officer): _____

Place:
Dated:

Signature of Pensioner