

The Trustees,
Punjab & Sind Bank Employees' Pension Fund Trust,
H. O. Provident Fund Department
 Siddhartha Enclave, Ashram Chowk,
 New Delhi – 110014

Reg: Terminal Dues claim form & Family Pension Application of Sh/ Smt
(PF Code :)

With reference to the captioned subject, we are forwarding the Family Pension application along with the requisite documents.

We confirm that the application is complete in all respects as per the check list and we recommend that family pension may be sanctioned to the Applicant as per Punjab & Sind Bank Employees' Pension Regulation'1995.

(Signature of the Forwarding Authority alongwith Seal)

Date

Branch / ZO/ HO -.....

Family Pension application checklist :

1	Applicant's Photo & Signature are duly attested (affix 2 Extra set of PHOTO)	
2	Independent witnesses have been obtained from other than those who have attested the Applicant's signature	
3	The details of direct/indirect liabilities outstanding in the name of Ex-employee Pensioner is enclosed	
4	The application is duly forwarded with seal and signature	

Enclosures:- (Self-verified by the family pensioner and duly verified with original by the authorized Branch Official)

a	Attested copy of death certificate of Ex- Staff	
b	Attested copy of proof of Age / Date of birth of children, If applicant is minor	
c	Two passport sized PHOTO of the Applicant & Guardian (wherever applicable) in addition to affixed with the application	
d	<ul style="list-style-type: none"> • Non - Marriage certificate in case of daughter • Non - Remarriage certificate in case of spouse 	
e	<ul style="list-style-type: none"> • Certificate of non-employment, • If Employed / self-employed, Income certificate of Son / Daughter / Parents including declaration of Employment & detail of salary (where applicant is Son / Daughter) 	
f	KYC Documents of the applicant establishing identity AADHAR Card / Election Identity Card / Passport etc & PAN Card	
g	In case applicant of family pension is son or daughter - who is/are physically crippled or suffering from disorder or disability of mind. Certificate from the Doctor approved by the Bank to the effect that the disability or handicap is of such a nature as to prevent him / her from earning livelihood, stating exact mental or physical condition of a child (such certificate is to be produced every three years to the Bank).	

Original Application form is to be submitted to Head office Provident Fund Department for processing of Family Pension and a copy of the same is to be kept in the Pension file at Pension Paying Branch.

APPLICATION FOR GRANT OF FAMILY PENSION ON THE DEATH OF AN EMPLOYEE / PENSIONER

The Trustee,
Punjab & Sind Bank (Employees)
Pension Fund Trust,
 Siddhartha Enclave, Ashram Chowk,
 New Delhi – 110014

Photograph to be attested by Branch Incharge with full Seal & Signature, failing which the application will not be entertained.

Passport Size Photograph of Family Pension Applicant

Dear Sir,

Reg: Application for Grant of Family Pension

I want to inform you that Sh / Smt who was drawing pension vide PPO No..... / who was serving at(Office) as..... (Designation) died on Being the spouse / family member of the deceased, I request for sanction of family pension. Necessary details are submitted hereunder:-

1.	Name of the Applicant	
	Relationship of the applicant with the deceased Employee / Pensioner	WIDOW / WIDOWER / SON / DAUGHTER / PARENT
	If the Applicant is a minor, name of the Guardian	
	Nature of Guardianship	NATURAL GUARDIAN (Father or Mother) / LEGAL GUARDIAN (appointed by Court) <i>(In case of Legal Guardianship attested copy of Court Order to be enclosed)</i>

2.	Details of surviving widow / widower and children (age below 25 years) of the deceased Employee / Pensioner :					
	Sl. No.	Name	Relationship with the deceased Employee / Pensioner	Date of Birth	Marital Status	Handicapped (Y / N)
	1					
	2					
	3					
	4					
	5					

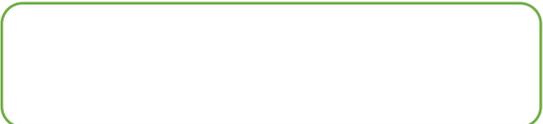
3.	Details of the deceased Employee / Pensioner	
	1	Name
	2	PF Code / PPO No.
	3	Date of death
	4	Office / Branch in which the deceased Ex-Staff last served / Getting Pension

4.	Details of the Applicant													
	Name of the Applicant													
	Address of Applicant													
	Contact No.	Mobile												
		E-mail												
	PAN (in capital letters)													
AADHAR Number														
5.	Branch from where Family pension is desired to be paid													
	Pension Branch Code													
	Pension Branch Name													
	Pension Account No													

6.	Whether the applicant is already in receipt of Family pension of Father / Mother : - Yes / No												
	i.) If Yes, The date of death and appointment of Father /Mother												
	ii.) PPO No of Father / Mother												
	iii.) Name												
	iv.) Amount of Family Pension												

Place :

Date :


 Signature of the Applicant
 (Left hand thumb impression in case of illiterate)

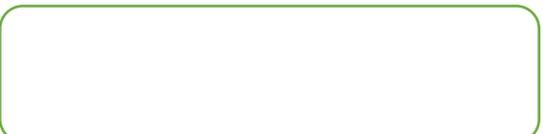
For Branch use

Family Pensioner detail and Signature is to be attested by Bank official

We certify that the information furnished above is correct to the best of our knowledge and belief and we have verified the Photo and Signature of the applicant of Family Pension.

Date :

Place :


 Signature of BM/ Dealing Official (With Branch Seal)

Name of the Bank official :

Bank official PF Code :

Branch name / code :

Witness (Independent witnesses other than those who have attested the Applicant's signature)

Signature :

Name :

Full Address :

A/c No., If any :

CERTIFICATE OF NON - REMARRIAGE / NON- MARRIAGE

I hereby declare that I am the legally wedded wife /husband of Sh./ Smt.
(PF Code) and **I have not been re-married** as on date. In case of remarriage, I undertake to report such an event promptly to the Bank.

(Applicable only for widow/ widower recipient of family pension and to be furnished once in every six months.)

Or

I hereby declare that **I am not married** as on date and I undertake to report such an event promptly to the Bank.

(Applicable only to unmarried daughters till the age of 25 years and to be furnished once in every six months.)

Place :.....

Date :.....

Signature of the Applicant
(Left hand thumb impression in case of illiterate)

Name :

PPO No. / PF Code :

Pension A/c No :

For Branch use

We certify to the best of my knowledge and belief that the above declaration of the applicant is correct.

Signature the Bank official :

Name of the Bank official :

Designation of the Bank official :

Bank official signature number /PF Code :

Branch/ Office stamp / seal :

CERTIFICATE OF NON-EMPLOYMENT /RE-EMPLOYMENT

(Only in case of children / dependents)

I declare that I, Sh/Smt.....(Name of applicant) Son/Daughter of late Sh/Smt.....(PF Code) (name of Ex-Staff) have not been serving in any capacity either in a Government Department / Office, Any other organization, company, corporation, autonomous body or Society of Central or State Government or Union Territory or a Local Fund.

OR

I declare that I have been employed / re-employed in the Office of(Name of the Employer & address) as (Designation) and drawing monthly emoluments of Rs..... .

OR

I am Self-employed and earning Rsas income per month.

I certify to the best of my knowledge and belief that the above declaration is correct.

Place :.....
Date :.....

Signature of the Applicant
(Left hand thumb impression in case of illiterate)

For Branch use

We certify to the best of my knowledge and belief that the above declaration of the applicant is correct.

Signature the Bank official :
Name of the Bank official :
Designation of the Bank official :
Bank official signature number /PF Code :
Branch/ Office stamp / seal :

Nomination for Arrears of Pension
[As per Punjab & Sind Bank Employees' Pension Regulation'1995]

The Trustee,
 Punjab & Sind Bank Employees' Pension Fund Trust,
 Siddhartha Enclave, Ashram Chowk,
 New Delhi – 110014

I, hereby nominate the person/ person(s) mentioned below, who is/ are members of my family to receive the amount of pensionary benefits in the event of my death before that amount becomes payable or having become payable, has not been paid, and direct that the said amount shall be distributed among the said person / person(s) in the manner shown against their names:

Sr.No.	Name of the nominee	Address of the nominee	Relationship with the pensioner	Age / Date of Birth	Percentage Share	If nominee is minor
						Name and address of person who may receive the said pension during the nominee's minority.
	1	2	3	4	5	6
1						
2						

This Nomination supersedes the any Nomination made earlier and earlier made Nomination stand cancelled.

Name of Family Pensioner :
 PPO No / PF Code :
 Permanent Address :

Place :
 Date :

Signature of the Applicant
 (Left hand thumb impression in case of illiterate)

Witness

Signature :
 Name :
 Complete Address :

 A/c No., If any :

Attested by the Pension Paying Branch / ZO / HO -

Date :

(Signatures of the BM / ZM / HOD)
Seal of attesting authority

Letter of undertaking by the Pensioner / Family Pensioner

**The Trustee,
Punjab & Sind Bank (Employees)
Pension Fund Trust,
Siddhartha Enclave, Ashram Chowk,
New Delhi – 110014**

Dear Sir,

Sub: Payment of Pension under Punjab & Sind Bank Employees' Pension Regulation'1995

In consideration of making payment of pension due to me every month. 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 affirm, undertake and agree to bind myself and my heirs, successors, executors and administrators jointly & severally to indemnify the Bank, its successors and assigns 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 authorize the Bank to recover the amount due by debit to my said pension account or any other account/deposits belonging to me in the possession of the Bank.

Place :

Date :

Signature of the Applicant
(Left hand thumb impression in case of illiterate)

Name :
PPO No. :
Address :
:

Witness _____

Signature :
Name :
Full Address :
A/c No., If any :