

No. 5/15/2014-3Pension (FD)

From

Additional Chief Secretary to Government, Haryana,
Finance Department

To

1. All Heads of Departments in Haryana.
2. Commissioners, Ambala, Hisar, Rohtak & Gurgaon Divisions.
3. All Deputy Commissioners, Haryana.
4. Registrar, Punjab & Haryana High Court, Chandigarh.

Dated Chandigarh, the 02nd December, 2015.

Subject:- Timely Submission of Pension/Family Pension papers.

I am directed to invite your attention to the instructions issued by this Department time to time vide letters No. 68/2/2001/FD/Pension/SAP dated **10.10.2006, 18.06.2012, 29.08.2012, 11.12.2014 and 27.08.2015** on the subject cited above.

It has come to the notice of Finance Department that although instructions have been issued by the State Government from time to time, many departments have not followed the said Time Schedule to ensure to provide the pension papers timely to Govt. employee. Due to non submission of pension papers on time, delay is being occurred in finalization of pension cases of the Govt. employee.

To avoid such delay in submission and finalization of pension/family pension cases, the following guidelines are now again being issued to streamline the existing procedure regarding expeditious finalization of cases of pensionary benefits:-

- (i) To get the pension papers filed from the retiree 24 months before the date of his retirement. A set of pension paper will be provided to the pensioner **which are available on the website of Finance Department i.e. www.finhry.gov.in and Principal Accountant General Haryana i.e. www.aghry.gov.in.**
- (ii) On receipt of pension papers, officer concerned will take action for verification/ completion of service book/record.
- (iii) The pension case should be sent to the PAG (A&E) Haryana for the issue of **Certificate and Report** at least one year before the date of retirement of the Govt. employee.
- (iv) It should be ensured that steps are taken to expedite enquiries, if any, pending against the Govt. employee.
- (v) In the case of transfer of an employee from one office to another, the service book will be completed with regard to service verification, entitlement of leave etc. The service book complete in all respect should be forwarded at the time of issuance of LPC.
- (vi) It should be ensured that retiring employee of Haryana Govt. are given PPO/CPO/GPO on the date of their retirement.

You are, therefore, requested to direct the officers/officials concerned dealing with pension cases for strict compliance of these instructions.

A copy of these instructions is also available on Finance Department website and can be downloaded from the site www.finhry.gov.in.

The receipt of these instructions may be acknowledged.

Yours faithfully,

Santom Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department

Endst No. 5/15/2014-3Pension (FD) Dated, Chandigarh the **02.12.2015**

A copy is forwarded to following for information and necessary action:-

1. The Chief Secretary to Government Haryana.
2. All the Additional Chief Secretaries to Government Haryana.
3. All the Principal/ Administrative Secretaries to Govt. Haryana.

Santom Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department

To

1. The Chief Secretary to Government Haryana.
2. All the Additional Chief Secretaries to Government Haryana.
3. All the Principal/ Administrative Secretaries to Govt. Haryana.

Endst No. 5/15/2014-3Pension (FD) Dated, Chandigarh the **02.12.2015**

A copy alongwith 10 spare copies is forwarded to Principal Accountant General (A&E)/Audit, Haryana, Chandigarh for information and necessary action.

Santom Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department

Endst No. 5/15/2014-3Pension (FD) Dated, Chandigarh the **02.12.2015**

A copy each is forwarded to the Principal Secretary/Additional Principal Secretary I & II/Officers on Special Duty I & II/Special Senior Secretaries/Secretaries/Private Secretaries to Chief Minister/Ministers/Ministers of State, Haryana for information and necessary action.

Santom Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department

To

The Principal Secretary/Additional Principal Secretary I & II/
Officers on Special Duty I & II/Special Senior Secretaries/Secretaries/Private
Secretaries to Chief Minister/Ministers/Ministers of State, Haryana for
information and necessary action:-

Santosh Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department *W*

Endst No. 5/15/2014-3Pension (FD) Dated, Chandigarh the **02.12.2015**

A copy alongwith 10 spare copies is forwarded to the Director
Treasuries and Accounts Department Haryana for information and necessary
action.

Santosh Sharma
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department *W*

Endst No. 5/15/2014-3Pension (FD) Dated, Chandigarh the **02.12.2015**

A copy is forwarded to the In-charge, Computer Cell, Finance
Department for placing it on the official website of Finance Department.

Santosh Sharma.
Under Secretary Finance (Pension)
for Addl. Chief Secretary to Government, Haryana,
Finance Department *W*

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53882—F.D.—H.G.P., Chd.

FORM PEN - 16 [See rule 9.17(1)]

Form of Letter to the Accounts Officer forwarding the Pension papers of a Govt. Employee

No.

Government of Haryana

Department / Office

Dated the

To

The Accountant General(A&E) Haryana.

**Subject: - Pension Papers of Shri / Shrimati/Kumari
for authorization of pension.**

Sir,

I am directed to forward herewith the pension papers of Shri / Shrimati / Kumari
..... of this department / office for further necessary action.

2. The details of Government dues which will remain outstanding on the date of retirement of the Government employee and which need to be recovered out of the amount of death-cum-retirement gratuity are indicated below: -

(a) Balance of the house - building or conveyance advance	..	Rs.
(b) Over payment of pay and allowances including leave salary	..	Rs.
(c) Income Tax deductible at source under the ITA, 1961 (43 of 1961)	..	Rs.
(d) Arrears of licence fee for occupation of Govt. accommodation	..	Rs.
(e) The amount of licence fee for occupation of Govt. accommodation for the permissible period of 2 months beyond the date of retirement	..	Rs.
(f) Any other assessed dues and the nature thereof	..	Rs.
(g) The amount of gratuity to be withheld for adjustment of unassessed dues, if any	..	Rs.
Total	..	Rs.

3. Your attention is invited to the list of enclosures, which is forwarded herewith.

4. The receipt of this letter may be acknowledged and this Department / Office informed that necessary instructions for the disbursement of pension have been issued to disbursing authority concerned.

Yours faithfully,

Head of Office / Pension Sanctioning Authority

Enclosures: -

1. Form PEN 1 and Form PEN 9* duly completed.
2. Medical certificate of incapacity (if the claim is for invalid pension)
3. Statement of the savings effected and the reasons why employment could not be found else where (if claim is for compensation pension or gratuity)
4. Service book (date of retirement to be indicated in the service book).
5. a) Two specimen signatures, duly attested by a gazetted Government employee or in the case of pensioner not literate enough to sign his name, two slips bearing the left hand thumb and finger impressions, duly attested by a gazetted Government employee.
b) **Three copies of passport size photograph with wife or husband (either jointly or separately) duly attested by the Head of Office.
c) Two slips showing the particulars of height and identification marks, duly attested by a gazetted Government employee.
6. A statement indicating the reasons for delay in case the pension papers are not forwarded before one year of the retirement of Government employee.
7. Written statement, if any, of the Government employee as required under rule 9.5 (1) (a).
8. Brief statement leading to reinstatement of the Government employee in case the Government employee has been reinstated after having been suspended compulsorily retired, removed or dismissed from service.

Note: - When initials or name of the Government employee are/is incorrectly given in the various records consulted, this fact should be mentioned in the letter.

**If a Government employee is compulsorily retired from service and delay is anticipated in obtaining Form PEN 9 from the Government employee, the Head of Office may forward the pension papers to the Accounts Officer without Form PEN 9. The Form may be sent as soon as it is obtained from the Government employee.*

***Only two copies of passport size photograph need to be furnished if the Government employee is governed by Appendix-I (i.e. a Family pension Scheme, 1964) and is unmarried or a widower or a widow.*

FORM PEN 1

[See rules 9.4, 9.6, 9.7 (1), (3) and 9.11 (1)]

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

PART-I

1. Name of the Government Employee _____
2. Father's Name _____
Husband's name (in the case of a female Govt. Employee) _____
3. Date of birth (by Chirstain era) _____
4. Religion and Nationality _____
5. Permanent residential address _____
(Showing village, district & state) _____
6. Present and last appointment including Name of establishment
i) Substantive _____
ii) Officiating, if any _____
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 _____
10. Amount and nature of any pension/gratuity
received for previous civil service _____
11. Government under which service has been rendered in order of employment

Year	_____
Months	_____
Days	_____
12. Class of pension applicable _____
13. The date on which action initiated to
i) obtain the No demand certificate from
the Accounts officer (Rent)/Rent Assessing
Authority as provided in rule 9.3 _____
ii) assess the service and emoluments qualifying
for pension as provided in rule 9.5, and _____
iii) assess the Government dues other than the
dues relating to the allotment of Govt.
accommodation as provided in rule 9.19(1) _____
14. Details of omissions, imperfections or deficiencies
in the service book which have been ignored
under rule 9.5(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	_____	To	_____
------	-------	----	-------

i) Interruption in service condoned
under rule 3.17A

_____	_____
-------	-------

ii) Extraordinary leave not qualifying
for pension

_____	_____
-------	-------

iii) Period of suspension not treated as
qualifying for pension

_____	_____
-------	-------

iv) Any other service not treated as
qualifying for pension

_____	_____
-------	-------

Total	_____	_____
-------	-------	-------

17. Emoluments reckoning for gratuity _____
18. Average emoluments _____
 Emoluments drawn during the last ten months of service _____
-

Post held From _____ To _____ Pay _____

Personal pay or special pay _____ Average emoluments _____

- i) In case where the last ten months include some period not to be rockoned for calculating average emoluments an equal period backward has to be taken for calculating average emoluments.
- ii) The calculation of average emoluments should be based on actual number of days contained in each month.
19. Date on which form PEN 9 has been obtained from the Government employee (to be obtained one year Before the date of retirement of Government employee _____
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 are instituted against the Government employee before retirement. _____

24. Details of Government dues recoverable out of gratuity:-
 i) Licence fee for the allotment of Government accommodation (See sub-rule(2),(3) and (4) of rule 9.18) _____
 ii)Dues referred to in rule 9.19 _____
25. Whether nomination made for death-cum-retirement gratuity. _____
26. i) The amount of the family pension becoming payable to the family of the Government employee, if death takes place after retirement.
 a) Before attaining the age of 65 years **Rs.** _____
 b) After attaining the age o f 65 years **Rs.** _____
 ii) Complete and up to date details of the family, as given below:-

Sr. No.	Name of the member of the family	Date of birth	Relations with the Government employee
1	2	3	4

27. Height _____
28. Identification marks _____
29. Place of payment of pension _____
 (Treasury, Sub-Treasury or Branch of Public Sector Bank)
30. Head of Account to which pension and gratuity are debitable _____

Signature of the Head of Office

FORM PEN 9

(See rule 9.2)

Particulars to be obtained by the Head of Office from the retiring Government employee before one year of the date of retirement

1. Name of the Government employee _____
2. a) Date of Birth _____
b) Date of retirement _____
- ¹[3. Two specimen signatures duly attested (to be furnished in a separate sheet)
- ²[4. Three copies of passport size Joint photographs of the Government employee with his/her wife/husband.
5. Two slips showing the particulars of height and personal identification marks duly attested.
6. Present address ...
- ⁴[7. Address after retirement ...
8. Name of the Treasury/Public Sector Bank Branch through which the Government employee wants to draw his pension ...
- ⁵[9. Details of the family as defined in Appendix-I of the Punjab C.S.R. Vol.II ...

Signature _____

Designation _____

Department/Office _____

Dated the _____

¹[Two slips each bearing the left hand thumb and finger impressions duly attested, may be furnished by a person who is not literate enough to sign his/her name. If such a Government employee on account of physical disability is unable to give left hand thumb and finger impressions, he may give the thumb and finger impressions of the right hand. Where a Government employee has lost both the hands, he may give his toe impressions. Impressions should be duly attested by a Gazetted Government employee.

²[Only two copies of passport size photographs of self need be furnished if the Government employee is governed by Appendix I of Punjab C.S.R. Vol-II and is unmarried or a widower or widow.

³[Where it is not possible for a Government employee to submit a photograph with his wife/her husband he/she may submit separate photographs. The photograph shall be attested by the Head of Office.

⁴[Any subsequent change of address should be notified to the Head of Office/Accounts Office.

⁵[Applicable only where Appendix I of the Punjab CSR Vol.-II is applied to the Govt. employee].

Calculation Sheet of Pension

Name

Father's / Husband's Name

- 1. Designation of the Post from which retired
- 2. Office last served
- 3. Date of Birth
- 4. Date of entry into Govt. Service
- 5. Date of Retirement / Superannuation
- 6. Rules under which pensionary benefits were settled.....
- 7. Total period of Service
- 8. Period not recognised as service
- 9. Period recognised as service
- 10. Average emoluments for last ten months
- 11. Average emoluments on which Pension fixed.....
- 12. Total amount of pension.....
- 13. Total amount of family pension.....
- 14. Death-cum-Retirement Gratuity.....
- 15. Percentage / amount of monthly pension commuted.....
- 16. Amount of commuted value of pension authorised.....
- 17. Remarks

(Signature of Head of office)

Designation.....
(with Stamp)

Chart Indicating the Service Verification

Name Designation

S. No.	Period		Page No. of Service Book	No. or part of page of Service Book
	From	To		

Table -I : Details of Qualifying Service

Shri / Smt. Designation

Name of Govt. under which employed (in order of employment)	Name of Establishment	From	To	Total Period	Less non-qualifying service (see table-II)	Qualifying service.
1	2	3	4	5	6	7

Average Emoluments Calculation Sheet

Average Emoluments in respect of Sh. / Smt.

Designation Office

During the last ten months from to

S. No.	PERIOD		Month	Pay @ Per Month (Rs.)	Total Pay (Rs.)
	From	To			

Average emoluments for one month :

Declaration/undertaking to refund pension/Gratuity DCRG if paid in excess

(ANNEXURE 'A' To Rule 9.15 of Punjab Civil Services Rule Volume 1 to be signed by the retiring Government servant).

Whereas the _____ has consented to grant me the sum of Rs. ____ per month as the amount of my pension w.e.f. _____ and /or the sum of Rs. _____ as the amount of my gratuity/ death-cum-retirement gratuity, I hereby acknowledge that in accepting the said amount (s). I fully understand that the pension, gratuity/death-cum-retirement gratuity, is subject to revision and the same being found to be in excess of that to which I am entitled under the rules and I promise to raise no objection to such revision. I further promise to refund any amount paid to me in excess of that to which I may be eventually found entitled.

Signature _____

Designation _____

1. Signature of witness _____

Attested

Occupation _____

Address _____

2. Signature of witness _____

(Head of Office)

Occupation _____

Designation

Address _____

(with Stamp)

The declaration should be witnessed by two persons, of responsibility in the town, village or pargana in which the applicant resides.

Authority Letter to Recover Govt. Dues from Pension

I hereby authorise _____ to recover any Govt. dues such as overpayment of pay, allowances, leave salary or admitted and obvious dues such as house rent, postal life insurance premium, outstanding house building advance, travelling allowances and other advances or any amount, if any discrepancy is found recoverable from me at any stage from my pension.

Attested

Signature _____

(Head of Office)

Designation _____

Declaration Regarding Non-Receipt of Pension or Death-cum-Retirement Gratuity

I hereby declare that I have neither applied for nor received any pension or gratuity in respect of any portion of the service included in this application and in respect of which pension or gratuity is claimed herein, nor shall I submit an application hereafter without quoting a reference to this application and the orders which may be passed thereon.

Attested

Signature _____

(Head of Office)

Designation _____

Declaration Regarding Anticipatory Pension

"Whereas the (here state the designation of the authority sanctioning the advance) has consented provisionally to advance me the sum of Rs..... a month anticipation of the completion of the enquiries necessary to enable the Government to fix the amount of my pension, I hereby acknowledge that in accepting the advance, I fully understand that my pension is subject to revision on the completion of necessary formal enquiries and promise to raise no objection to such revision on the grounds that the provisional pension now to be paid to me exceeds the pension to which I may be eventually found entitled. I further promise to repay any amount advanced to me in excess of the pension to which I may be eventually found entitled."

Attested

Signature.....

(Head of Office)

Designation.....

Certificate Regarding Military Service

Certified that I have not rendered any military service, nor have received any pension or gratuity.

OR

Certified that I have rendered military service, and have received pension/gratuity. Details as follows:

1. Total period of military service
Date of Commencement and end
of each period of military service.
2. Amount and nature of any pension/gratuity
received for the military service.

Attested

Signature.....

(Head of Office)

Designation.....

No Dues Certificate

Certified that there is no term advances and other advances outstanding/pending against
Name.....

Designation.....

Date of Retirement.....

Date of Birth.....

(Signature of Head Office)

No Complaint/Enquiry Certificate

Certified that there is no Complaint/Enquiry pending against
Name.....

Designation.....

Date of Retirement.....

Date of Birth.....

(Signature of Head of Office)

Certificate of Verification of Service for Pension

Certificate that Sh./Smt./Km.....
Designation.....has completed a qualifying service ofyears
.....months.....days as on..... (date). The service has been verified on
the basis of his service documents an in accordance with the rules regarding qualifying service in force at
present. The verification of service shall be treated as final and shall not be reopened except when
necessitated by a subsequent change in the rules and orders governing the conditions under which the
service qualifies for pension.

(Signature of Head of Office)

Details of Members of Family

Name.....		Designation.....			
S.No.	Name	Age	Marital Status	Relation	Date of Birth
1	2	3	4	5	6

Particulars of Height/Identification Marks

Name.....Designation.....

Particulars of Height.....

Personal Marks of Identification.....

Attested

.....

.....

(Signature)

Designation with Stamp

Particulars of Height/Identification Marks

Name.....Designation.....

Particulars of Height.....

Personal Marks of Identification.....

Attested

.....

.....

(Signature)

Designation with Stamp

Address for Correspondence

Present Address.....

.....

.....

Address after Retirement.....

.....

.....

Address for Correspondence

Present Address.....

.....

.....

Address after Retirement.....

.....

.....

Specimen Signatures/left hand thumb and finger impressions

Name _____ Designation _____

Specimen Signatures

1. _____ 2. _____

OR

Left hand thumb and finger impressions (In case the pensioner is illiterate):

(Little Finger) (Ring Finger) (Middle Finger) (Index Finger) (Thumb)

Attested

Signature _____

Designation _____
(with Stamp)

Specimen Signatures/left hand thumb and finger impressions

Name _____ Designation _____

Specimen Signatures

1. _____ 2. _____

OR

Left hand thumb and finger impressions (In case the pensioner is illiterate):

(Little Finger) (Ring Finger) (Middle Finger) (Index Finger) (Thumb)

Attested

Signature _____

Designation _____
(with Stamp)

Last Pay Certificate L.P.C

Office of the _____

No _____

Office case _____ (Provincial)

Last Pay Certificate of _____

of the _____ proceeding on

to _____

2. He has been paid upto _____

at the following rate:-

PARTICULARS	RATE	
	Rs.	P.
Substantive Pay		
Officiating Pay		
Exchange Compensation Allowance		

Deductions

3. He has made over charge of the office of _____

on the _____ noon of the _____ 19 _____

4. Recoveries are to be made from the pay of the Government servant as detailed on the reverse.

5. He has been paid leave salary as detailed below. Deductions have been made as noted on the reverse:-

Period			Rate	Amount
From	to	at	Rs.	a month
From	to	at	Rs.	a month
From	to	at	Rs.	a month
From	to	at	Rs.	a month

6. He is entitled to draw the following scale of pay _____

increment accrues on _____ every year.

7. He is also entitled to joining time for _____ days.

8. The details of the income tax recovered from him upto the date from the beginning of the current year are noted on the reverse.

Dated _____ 19 _____

Head of Office/Deptt

DETAILS OF RECOVERIES

Name of recovery _____

Amount: Rupees _____

To be recovered in _____ installments

SALARY DEDUCTIONS MADE FROM LEAVE SALARY

From to On account of Rs.

From to On account of Rs.

From to On account of Rs.

Head of Office/Deptt
Signature with Stamp

Name of months	Pay	Gratuity Fee	Funds and Other Deductions	Amount of Income-tax recovered	Remarks
April 19					
May 19					
June 19					
July 19					
August 19					
September 19					
October 19					
November 19					
December 19					
January 19					
February 19					
March 19					

He tookover/assumed of the office of _____

on the _____ noon of _____

(Signature)
(Designation)

Form PEN 12-A (See Rules 11.1, 11.11, 11.18, 11.19, 11.20, 11.21)

Form of application for COMMUTATION OF A FRACTION OF PENSION

Without medical examination

(To be submitted in duplicate after retirement but within one year from the date of retirement)

PART-I

To

The _____

_____ Here indicate the designation and
_____ full address of the Head of Office

Subject:- Commutation of pension without medical examination

Sir,

I furnish below the relevant particulars and request that I may be permitted to cummute a part of my pension as indicated below: -

1. Name (in Block letters) _____

2. Father's Name _____

Husband's name (in case of female Govt. employee) _____

3. Designation at the time of retirement _____

4. Name of Office/Department in which employed _____

5. Date of Birth (by Christian era) _____

6. Date of retirement _____

7. Class of pension on which retired _____

8. Amount of pension authorized _____

(in case final amount of pension has not been authorized indicate the amount of provisional pension)

9*. Fraction of pension proposed to be commuted _____

10. Designation of the Accounts Officer _____

who authorized the pension and No. and date of Pension Payment Order, if issued

11. Disbursing authority for payment of pension

** a) Treasury/Sub treasury _____

(name and Complete address _____

of the treasury/Sub treasury _____

to be indicated) _____

**b)i) Branch of the Nationalised _____

Bank with complete _____

Postal address _____

ii) Bank Account No. _____

to which monthly pension is being credited each month.

Place _____ Signature _____

Date _____ Postal Address _____

Note: - The payment of commuted value of pension shall be made through the disbursing authority from which pension is being drawn. It is not open to an applicant to draw the commuted value of pension from disbursing authority other than the disbursing authority from which pension is being drawn.

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

*** Score out which is not applicable.*

PART III

No _____

Dated _____

Forwarded to the Accounts Officer, (here indicate the address & Designation) _____

with the remarks that:-

- i) the particulars furnished by the applicant in PART-I have been verified and are correct,
- ii) the applicant is eligible to get a fraction of his pension commuted without medical examination,
- iii) The commuted value of pension determined with reference to the Table applicable at present comes to Rs _____ (Rupees _____)
- iv) The amount of residuary pension after commutation will be Rs _____ (Rupees _____)

2. It is requested that further action to authorize the payment of the amount of commuted value of pension may please be taken in accordance with Rule 11.21 of these rules.

3. The receipt of Part-I of the form has been acknowledged in Part-II which has been forwarded separately to the applicant on _____

4. The commuted value of pension is debitable to Head of account namely _____

Place _____

Signature

Date _____

Head of Office

------(Detach from here)-----

PART II

Acknowledgement

Received from Shri/Smt _____ (Name & former designation) Application in Part I of Form 12-A for the Commutation of a fraction of pension without medical examination.

Place _____

Signature

Date _____

Head of Office

Note: - This acknowledgement is to be signed, stamped and dated and is to be detached from the form & handed over to the applicant. If the form has been received by post, it has to be acknowledged on the same day and the acknowledgment sent under registered over.

FORM PEN 18
[See rule 9.24(1)]

Form of letter to the Audit Officer forwarding papers for the grant of family pension and death-cum-retirement gratuity to the family to a Government employee who dies while in service.

No.....
Government of Haryana
Department/Office.....
Dated, the.....

To

Accountant General, Haryana.
.....
.....

Subject: - Grant of Family pension and death-cum-retirement gratuity.

Sir,

I am directed to say that Shri/Smt.....
designation.....died on.....His
family has become eligible for the grant of family pension and death-cum-retirement
gratuity. Form PEN 17 duly completed is forwarded herewith for further necessary
action.

2. Government dues in respect of the deceased Government employee will be recovered out of the death-cum-retirement gratuity as indicated in section II of part I of form PEN 17.
3. Your attention is invited to the list of enclosures, which is forwarded herewith.
4. The receipt of this letter may be acknowledged and this Department/Office informed that necessary instructions for the disbursement of family pension and death-cum-retirement gratuity have been issued to the disbursing authority concerned.

Yours faithfully,

Head of Office/Pension Sanctioning Authority

List of enclosures: -

1. Form PEN 17 duly completed.
2. Service book (date of death to be indicated in the service book).
3. Two specimen signatures or left hand thumb and finger impression of the claimant or guardian duly attested.
4. Two copies of passport size photographs of the claimant or guardian duly attested.
5. Two copies of descriptive roll of the claimant or guardian duly attested indicating height and personal identification marks.
6. Postal address of the claimant or guardian.

FORM PEN 17

[See rules 9.22(1) 9.24(1), (3) and (5) and 9.26(1) and (5)]

Form for assessing and authorizing the payment of family pension and death-cum-retirement gratuity when a Government employee dies while in service.

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

PART I

Section 1

- 1. Name of the deceased Government employee.....
- 2. Father's/Husband's Name.....
- 3. Date of birth (by Christian era).....
- 4. Date of death (by Christian era).....
- 5. Religion and Nationality.....
- 6. Office/Department in which last employed.....
- 7. Appointment held last:
 - (1) Substantive.....
 - (2) Officiating.....
- 8. Date of beginning of service.....
- 9. Date of ending of service.....
- 10. (i) Total period of military service for which pension/gratuity was sanctioned:.....
(ii) Amount and nature of any pension/gratuity received for Military service.....
- 11. Amount and nature of any pension received for previous Civil service, if any.....
- 12. Government under which service has been rendered in order of employment.....
- 13. The date on which intimation regarding the death of a Government employee was received by the Head of Office.....
- 14. The date on which action initiated to: -
 - (i) Obtain claim or claims from the claimants in the appropriate form death-cum-retirement gratuity and family pension as provided in rule 9.21.
 - (ii) Obtain the 'No demand certificate' from the Accounts officer (Rent)/Rent Assessing Authority as provided in rule 9.27 (1).
 - (iii) Assess the Government dues other than the dues pertaining to occupation of Government accommodation as provided in rule 9.24(2).
 - (iv) Assess the service and emoluments qualifying for death-cum-retirement gratuity and family pension as provided in rules 9.22 and 9.23.
- 15. Whether nomination made for death-cum-retirement gratuity.....
- 16. Length of service qualifying for death-cum-retirement gratuity/pension.....
- 17. Period of non-qualifying service.....
 - (i) Interruption service condoned under rule 3.17 A.....
 - (ii) Extraordinary leave not qualifying for gratuity.....
 - (iii) Period of suspension treated as non-qualifying from.....to.....
 - (iv) Any other service not treated as qualifying service.....
- Total period of non-qualifying service.....**
- 18. (a) Emoluments reckoning for death-cum-retirement gratuity.....
(b) Amount of death-cum-retirement gratuity.....

FORM PEN 17 (Contd....)

- 19. If family pension 1964 applies.
 - (i) Proposed family pension at: -

- (a) Enhanced rates (if service rendered at the time of death is more than seven years).....
(as in para 2 of Appendix I to these rules)
- (b) Ordinary rates as (in para I of Appendix I to these rules)
- (ii) Period of tenability of family pension 1964. From..... To.....
 - (a) Enhanced rates.....
 - (b) Ordinary rates.....
- 20. Person to whom family pension is payable.
 - Name:.....
 - Relationship with the deceased Government employee
 - Full Postal Address:
- 21. Details of Government dues recoverable out of gratuity: -
 - (i) License fee for occupation of Government accommodation (See rule 9.27).....
 - (ii) Amount of death-cum-retirement gratuity to be held over pending receipt of information from the Accounts Officer (Rent) Rent Assessing Authority. (See rule 9.27 (1) (v)).....
 - (iii) Dues referred to in rule 9.27(2).....
- 22. Date on which claim received from the claimants.....
- 23. Name of guardian who will receive payment of death-cum-retirement gratuity family pension in the case of minors.....
- 24. Place of payment (Treasury, Sub-Treasury or branch of Public Sector Bank).....
- 25. Head of Account to which death-cum-retirement gratuity and family pension are debitible.

Place:

Dated, the

Signature of Head of Office

SECTION II

Details of provisional family pension and gratuity to be sanctioned by Pension sanction Authority in accordance with rule. 9.25

Provisional family pension ... Rs.

Gratuity (the amount mentioned in item 18 (b) of Part (1) ... Rs.

Less

(a) Licence fee recoverable from gratuity for occupation of Government accommodation (as in item 21 (i) of Part (1) ... Rs.

(b) Amount of Gratuity to be held over pending receipt of information from the Accounts Officer (Rent)/Rent Assessing Authority (as in item 21 (ii) of Part (1)

... Rs.

(c) Other Government dues as mentioned in item 21 (iii) of Part I.

... Rs.

(d) Total of (a), (b) & (c),

... Rs.

Place:

Dated, the

Signature of Head of Office

ANNEXURE-1

Form of letter to the widow/widower of a deceased Govt. employee for a grant of a Family Pension, 1964

No.....
Government of Haryana
Department/Office.....
Dated, the.....

To

.....
.....
.....

Subject: - Payment of Family Pension Scheme, 1964 in respect of Late
Shri/Smt.....

Sir/Madam,

1. I am directed to say that in terms of Appendix I of Punjab Civil Services Rules, Volume II, a family pension is payable to you as widow/widower of the late
Shri/Smt.....
(Designation.....in the Office/Department
of.....)
2. You are advised that a claim for the grant of family pension may be submitted in the enclosed Annexure II.
3. The family pension will be payable till your death or re-marriage, whichever event occurs earlier. In the event of your death or re-marriage, the family pension shall be granted to the child or children, if any, through the guardian.

Yours faithfully,

(Head of Office)

Attestation should be done by two Gazetted Government employees or two or more persons of respectability in the town, village or pargana in which the applicant resides.

ANNEXURE-II

Form of application for the grant of family pension on the death of a Govt. Employee/Pensioner.
--

1. Name of the applicant
 - (i) Widow/widower.....
 - (ii) Guardian, if the deceased person is survived by child or children.....
2. Name and age of surviving widow/widower and children of the deceased Government employee/pensioner.

Serial No.	Name	Relationship with the deceased person	Date of birth (to be attested by the Head of Office)
1			
2			
3			
4			

3. Date of death of the Government employee/pensioner.....
4. Office/Department in which the deceased Government employee/pensioner served last.....
5. If the applicant is guardian, his date of birth.....
Relationship with the Govt. employee/Pensioner
- 5A If the applicant is widow/widower the amount of service pension which she/he may be in receipt on the date of death of the husband/wife.....
6. Full address of the applicant.....
.....
7. Place of payment of pension and gratuity.....
(Treasury, Sub-Treasury, Public Sector Bank Branch).
8. Enclosures: -
 - (i) Two specimen signatures of the applicant duly attested (in case of literate claimants) (To be furnished in two separate sheets).
 - (ii) Two copies of passport size photograph of the applicant, duly attested.
 - (iii) Two slips each bearing left hand thumb and finger impressions of the applicant, duly attested (in case of illiterate claimants).
 - (iv) Descriptive Roll of the applicant, duly attested, indicating (a) height and (b) personal marks, if any, on the hand, face, etc. (To be furnished in duplicate).
 - (v) Certificate(s) of age (in original with two attested copies) showing the dates of birth of the children. The certificate should be from the Municipal Authorities or from the Local Panchayat or from the head of a recognized school if the child is studying in such school. (This information should be furnished in respect of such child or children the particulars of whose dates of birth are not available with the Audit Officer/Head of Office).
 - (vi) Death Certificate.
9. Signature or left-hand thumb impression of the applicant.....

10. Attested by:		
Name	Full Address	Signature
(i).....	.....	.....
(ii).....	.....	.....
11. Witnesses:		
(i).....	.....	.....
(ii).....	.....	.....

Note: - Attestation should be done by two gazetted Government employees or two or more persons of respectability in the town, village or pargana in which the applicant resides. To be furnished in case the applicant is not literate enough to sign his name.

In the case of re-marriage of the widow while applying for family pension on behalf of the minor child, the widow should furnish (i) the date of her re-marriage, (ii) name of the Treasury/Sub-Treasury at which payment is desired and (iii) her full address in the application for family pension. It is not necessary to furnish a fresh application nor the document as they are already available with the pension papers on which family pension was originally admitted to her.

Signature & Designation of Sanctioning Authority

ANNEXURE-III

FORM FOR SANCTIONING FAMILY PENSION
--

1. Name of the Government employee.....
2. Father's Name
(and also husband's name in the case of a woman Government servant)
3. Religion and Nationality.....
4. Last appointment held including name of establishment.....
5. Date of beginning of Service.....
6. Date of ending of service.....
7. Substantive appointment held.....
8. Pension Rules opted/eligible.....
9. Length of continuous qualifying service prior to death.....
10. Pay as per paragraph 2 of the Punjab Govt. Finance Department's letter No. 7856 (7) FRI/64/9691, dated 16th October, 1964 (Annexure I to Punjab CSR Vol.II 1969 Edition as applicable to Haryana State).....
11. Amount of Family Pension admissible.....
12. Date from which pension is to commence.....
13. Place of payment (Government Treasury sub-treasury or Branch of Public Sector Bank).....

The undersigned having satisfied himself of the above particulars of late Shri/Smt.....
Hereby orders the grant of a family pension of Rs.....P.M.
to Shri/Smt.....
which may be accepted by the Accountant General, Haryana as admissible under the rules.

Signature and Designation
of the Sanctioning Authority

FORM PEN-19
[See rule 9.21 (1)]

Form of letter to the member or members of the family of a deceased Govt. employee where valid nomination for the grant of the death-cum-retirement gratuity exists.

No.....
Government of Haryana
Department/Office.....
Dated, the.....

To

.....
.....
.....

Subject: - Payment of death-cum-retirement gratuity in respect of the late Shri/Smt.....

Sir/Madam,

I am directed to state that in terms of the nomination made by the late Shri/Smt.....
.....(Designation) in the office/Deptt. of
..... a death-cum-retirement gratuity is payable to his/her nominee(s). A copy of the said nomination is enclosed herewith.

2. I am to request that a claim for the grant of the gratuity may be submitted by you in the enclosed FORM PEN 1B.
3. Should any contingency have happened since the date of making the nomination, so as to render the nomination invalid, in whole or in part, precise details of the contingency may kindly be stated.

Yours faithfully,

Head of Office

FORM PEN-20

Form of letter to the member or members of the family of a deceased Govt. employee where valid nomination for the grant of the death-cum-retirement gratuity does not exists.

No.....
Government of Haryana
Department/Office.....
Dated, the.....

To

.....
.....
.....

Subject: - Payment of death-cum-retirement gratuity in respect of the late
Shri/Smt.....

Sir/Madam,

I am directed to say that in terms of rule 6.16-A of Punjab CSR Vol.II, a death-cum-retirement gratuity is payable to the following members of the family of late Sh./Smt.....(Designation), in the Office/Department of In equal share: -

- (i) Wife/Husband including judicially separated wife/husband.
- (ii) Sons including step children and adopted children.
- (iii) Unmarried daughters -do-

2. In the event of there being no surviving member of the family as indicated above, the gratuity will be payable to the following members of the family in equal share: -

- (i) Widowed daughters
- (ii) Father
- (iii) Mother
(Including adoptive parents in case of individuals whose personal laws permit adoption)
- (iv) Brother below the age of eighteen years and unmarried and widowed sisters (including step brothers and step sisters).
- (v) Married daughter, and
- (vi) Children of pre-deceased son.

3. It is requested that a claim for the payment of gratuity may be submitted in the enclosed Form PEN 1B as soon as possible.

Yours faithfully,

Head of Office

FORM PEN 1B

[See rule 9.21 (1)]

Form of applicant for the Grant of death-cum-retirement gratuity on the death of a Government Employee.

(To be filled in separately by each claimant and in the case claimant is minor, the Form should be filled in by the guardian on his/her behalf. Where there are more than one minor, the guardian should claim gratuity in one Form on their behalf).

1. (i) Name of the claimant in case he is not minor.....
(ii) Date of birth of the claimant.....
2. (i) Name of the guardian in case the claimants are minors.....
(ii) Date of birth of the guardian.....
3. (i) Name of the deceased Government employee in respect of whom gratuity is being claimed.....
(ii) Date of death of Government employee.....
(iii) Office/Department in which the deceased served last.....
4. Relationship of the claimant/guardian with the deceased Government employee.....
5. Full postal address of the claimant/guardian.....
6. (i) Where gratuity is claimed by the guardian on behalf of minors the names of the minors, their ages, relationship with the deceased Government employee, etc.: -

Serial No.	Name	Age	Relationship with the deceased Govt. employee	Postal Address
1				
2				
3				
4				

(ii) Relationship of the guardian with minor.....

7. Place of payment of pension and gratuity.....
(Treasury/Sub-Treasury/Public Sector Bank Branch)

Signature/Thumb impression of the
Claimant/guardian

8. Two specimen signatures or left hand thumb* and finger impressions of the claimant/guardian duly attested.....

9. Attested by: -

Name	Full Address	Signature
(i).....
(ii).....

10. Witnesses:

(i).....	.....	.....
(ii).....	.....	.....

*To be furnished in case the applicant is not literate enough to sign his name.

ANNEXURE-I

Form for Sanction of Gratuity in case of Death

A Remarks by the receiving authority

1. As to character and past conduct of applicant.....
2. Explanation of any suspension or Degradation.....
3. Regarding any gratuity or pension already received by the applicant (See Chapter VII).....
4. Any other remarks.....
5. Opinion of receiving authority whether the service claimed is established and should be admitted or not (See rule 9.7 and 9.12 (a) (ii)).....

Signature.....

Authority.....

B Order of the sanctioning authority

(a) The undersigned having satisfied himself that the service of Late Shri/Smt./Kumari..... is thoroughly satisfactory hereby orders the grant of DCRG/residual gratuity which may be accepted by the Accountant General as admissible under the rules to the persons mentioned in clause (c) below.

OR

(b) The undersigned having satisfied himself that the service of late Shri/Smt./Kumari..... has not been thoroughly satisfactory hereby orders that the DCRG which may be accepted by the Accountant Gen. admissible under the rules to the persons mentioned in clauses (c) below, shall be reduced by the specified amount of percentage indicated below. A sum of Rs..... on account..... is to be held over from the DCRG till the outstanding dues are assessed and adjusted.

(c)

Name of person	Address	Relationship with the deceased officer	Amount of share of DCRG
1	2	3	4

This order is subject to the condition that should the amount of gratuity as authorized by the Accountant General if afterwards found to be in excess of amount to which the person

concerned is entitled under the rules he/she will be called upon to refund such excess. A declaration from the person accepting this condition has been obtained and enclosed/declaration from the person accepting to condition will be obtained and submitted separately.

2. The DCRG/residual gratuity payable at.....treasury and is chargeable.

Dated

Signature & Designation of
Sanctioning Authority

Report regarding verification of Qualifying Service

Certified that Sh./Smt./Kum.....
Designation..... has completed a qualifying service
of.....years.....months.....days as
on.....(date). The service has been verified on the basis of his service
documents and in accordance with the rules regarding qualifying service in force at
present. The verification of service shall be treated as final and shall not be reopened
except when necessitated by a subsequent change in the rules and order governing the
conditions under which the service qualifies for pension.

DETAILS OF QUALIFYING SERVICE

S.No.	Period		Page No. of Service Book	No. or part of page of Service Book
	From	To		

(Signature of Head of Office)

Table: Details of Qualifying Service

Name.....Designation.....

Name of Govt. under with employed (in order of employment)	Name of Establishment	From	To	Total Period	Less Non-Qualifying Service (see table-II)	Qualifying service
1	2	3	4	5	6	7

Calculation Sheet for Family Pension/Death-Cum-Retirement Gratuity & History Sheet of Service

1. Name :
2. Post held at the time of death :
3. Date of Birth :
4. Date of Death :
5. Date of joining Govt. Service :
6. Total Period of ServiceYearsMonthsDays
7. Less period of E.O.L. etc. notYearsMonthsDays
qualifying service
8. Net qualifying serviceYearsMonthsDays
9. Pay drawn at the time of death Rs.
10. Amount of Family pension Rs.
(30% of pay last drawn)
subject to minimum of Rs. 1275/-
11. Amount of pension to be drawn for first seven Rs.
years or till the deceased would have
completed 65 years of age (which ever is earlier)
12. Calculation of gratuity (D.C.R.G) at the following rates :-
 - (i) For less than one year service : 2 months emoluments
 - (ii) One year service but less then Five years service : 6 months emoluments
 - (iii) With Five years or more service : $\frac{1}{4}$ of the emoluments for
each half year subject to minimum of twelve years emoluments and maximum of $16\frac{1}{2}$
times in case of Class I, II and III employees and $17\frac{1}{2}$ times in case of class IV employee.

Emoluments means Pay as defined in rule 2.44(a)(1) of C.S.R. Vol. I Part I. Plus Dearness allowance admissible on such pay on the date of death.

Pay Rs. _____
 D.A. Rs. _____
 Total Rs. _____ X _____ = Rs. _____

Head of Office

Descriptive Roll/Signature or Left hand thumb impression

Claimant

Name of deceased

Relationship with deceased

{widow/widower/ guardian of minor child (ren)}

- (i) Date of Birth
- (ii) Height
- (iii) Personal marks of identification
(on hand or face)
- (iv) Specimen Signature /Left-hand thumb impression :
 - 1.
 - 2.

Attested by :

Name	Full Address	Signature
(i).....
(ii).....

Note :- The descriptive roll and signature of left hand thumb impression accompanying the application for family pension should be in duplicate in two separate sheets and attested by two gazetted officers or persons of respectability in town, village or pargana in which the applicant resides.

Descriptive Roll/ Signature or Left hand thumb impression

Claimant

Name of deceased

Relationship with deceased

{widow/widower/ guardian of minor child (ren)}

- (i) Date of Birth
- (ii) Height
- (iii) Personal marks of identification
(on hand or face)
- (iv) Specimen Signature /Left-hand thumb impression:
 - 1.
 - 2.

Attested by :

Name	Full Address	Signature
(i).....
(ii).....

Note: - The descriptive roll and signature of left hand thumb impression accompanying the application for family pension should be in duplicate in two separate sheets and attested by two gazetted officers or persons of respectability in town, village or pargana in which the applicant resides.

DETAILS OF MEMBERS OF FAMILY

Of Late Shri/Smt.....Designation

S.No.	Name and Postal Address	Relation	Date of Birth

No Demand Certificate (N.D.C)

Certified that there are no long term advances and other advances outstanding/pending against

Late Shri/ Smt.....
Designation
Date of Death
Date of Birth

(Signature of Head Office)

NO JUDICIAL / DEPARTMENTAL PROCEEDINGS CERTIFICATE

Certified that no Judicial / Departmental proceedings have been instituted/ are pending against

Late Shri/ Smt.....
Designation
Date of Death
Date of Birth

(Signature of Head Office)

PRESENT POSTAL ADDRESS OF THE CLAIMANT

Name of the DeceasedDesignation

.....

Claimant

Relationship with the Deceased.

[Widow/widower/ guardian of the minor child (ren)]

Address.....

.....

.....Pin.....

LAST PAY CERTIFICATE (L.P.C)

Office of the

NO.....

Office case..... (Provincial)

LAST PAY CERTIFICATE OF

of theproceeding

on to

2. He has been paid upto

at the following rate :-

Particulars	Rate
	Rs. P.
Substantive Pay	

Officiating Pay

Exchange Compensation Allowance

.....

DEDUCTIONS

.....

He had made over charge of the office of

On the Noon of the19.....

Recoveries are to be made from the pay of the Government servant as detailed on the reverse. He has been paid leave salary as detailed below. Deductions have been made as noted on the reverse:

	Period		Rate		Amount
From	to	at	Rs.		a month
From	to	at	Rs.		a month
From	to	at	Rs.		a month

He is entitled to draw the following scale of pay

.....increment accrues onevery year.

He is also entitled to joining time fordays.

The details of the income tax recovered from him up to the date from the beginning of the current years are noted on the reverse.

Dated.....

Head of Office/Deptt.

Last Pay Certificate (Contd...)

DETAILS OF RECOVERIES

Name of recovery.....
 Amount : Rupees.....
 To be recovered inInstallments

SALARY DEDUCATIONS MADE FROM LEAVE SALARY

From.....to.....on account of.....Rs.....
 From.....to.....on account of.....Rs.....
 From.....to.....on account of.....Rs.....

Head of Office/Deptt.
 Signature with Stamp

Name of months	Pay	Gratuity Fee	Funds and Other Deductions	Amount of Income-tax recovered	Remarks
April					
May					
June					
July					
August					
September					
October					
November					
December					
January					
February					
March					

He took over/assumed charge of the Office of
on thenoon of.....

(Signature)
(Designation)

