SOUTH CENTRAL RAILWAY

Headquarters Office Personnel Branch/SC Date: 29 .11.2018

No. P[R]500/XXVI ALL CONCERNED

PERSONNEL BRANCH SERIAL CIRCULAR No. 198 /2018

Copy of Board's letter No.2016/F[E]III/1[1]/8 dated 12.11.2018 together with its enclosures is sent herewith for information, guidance and necessary action. Board's letter dated 17.02.2016 quoted therein was circulated under SC No.62/16.

[K.RAVI KUMAR] Secy. to PCPO

For Principal Chief Personnel Officer

Copy of Board's letter No.2016/F[E]III/1[1]/8 dated 12.11.2018 [RBE No. 173/2018]

Sub: Settlement Forms to be filled by the retiring Railway servant.

During the interaction of Board (MS) with the pensioners, the issue of simplification of the settlement forms was raised.

- 2. The said issue has been examined by Board(MS & FC) in the light of the various forms contained in the Railway Services(Pension) Rules, 1993, which were amended with the approval of the Ministry of Law & Justice vide Board's letter No.2015/F(E)III/1(1)/4 dated 17.06.2016, on the basis of corresponding amendments made by the Department of Pension & Pensioners' Welfare (DOP&PW) in the CCS(Pension) Rules, 1972 and also the other forms being used in some Railways and Railway Board.
- 3. It has been felt by the Board that simplified forms should be uniformly used across all the Railways/PUs.
- 4. Accordingly, simplified settlement forms required to be filled by the retiring railway employees are enclosed herewith for compliance. Other forms required to be filled by the Head of Office and the Accounts Officer will remain the same as contained in the updated Railway Services(Pension) Rules, 1993 available on the website of the Ministry of Railways.
- 5. PCPO & PFA of the Zonal Railways/PUs would be directly responsible to ensure compliance of the aforesaid instructions.
- 6. Non-compliance of the said instruction would be viewed seriously by the Board.

sd/-[G. Priya Sudarsani]/D/F[E]

INDEX No. 1058 PENSION RULES	S.C.No.
Board have circulated the settlement forms to be filled by	198/2018
retiring Railway servants.	

Application Form for payment of Pension & other Retirement Benefits to the Railway employees.

(Note : Application Form to be filled up in all respect by the employee and submitted in triplicate)

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	% (percel					*
1,	Full Name (in Block Letters)		gir unvers is alone to see		10 - 10 COMMANDER SM 201 1 - 2 1991	
2.	Father's/Husband's Name		parametrian e decimana a communicación		E security and the contract of	C CONTRACTOR
3.	Date of Birth	:		4.	Date of Appointment	
5.	Designation	:		6.	RUID Number	:
7 .	Basic Pay	i		8.	Pay Level	
9.	SRPF No.	i		10.	PAN No.	1:
11.	Mobile Number	٠		12.	E-mail Id ·	1
13.	Aadhaar No.	:		14.	Mark of Identification	:
15.	Religion		et.		e .	Tr.
16.	Present/Correspondence Address with PIN Code	:				PIN
17.	Permanent Address with PIN Code	i.				PIN
18.	Details of Railway/ Directorate of Estate Quarter, if allotted	c				PIN
19.	Date of Retirement	i			400	i
21.	Class of Pension	:	Superannuation/Volunta	ry etc.		
22	Details of Public Sector Bank	fro	m where pension will be d	rawn :		e
(a)	Savings Bank Account No.	:	www	(b)	Name of Bank	:
(c)	Branch	:		(d)	City	
(e)	District	:		(f)	IFSC	:
23.	Medical facility being availed at present (CGHS/RMA)	;		24.	Medical Card(s) No.	1
25.	Details of Military / Other Set	rvic	e, if any	•	79	
(b)	Total Period of Military Serv Amount of gratuity received for PPO No & Date of Issue (at the PPO)	or t	he Military Service	ppy of	***************************************	to
Not	e : Please attach : (i) a cand	:el	ed cheque, issued for I	Bank .	Account mentioned ab	ove at S.No.21,
*9			sted photocopies of PA			
26/10/20		92.40 #				Employee's Signature
Place	i l	Jal	te:			

DECLARATION FOR NON ACCEPTING COMMERCIAL EMPLOYMENT

I note that I cannot accept any commercial employment before the expiry of one year from the date of retirement, or any employment under a government outside India at any time without prior sanction of the President of India. I cannot seek employment as contractor for or in connection with the execution of public works (Whether on the Railways, or under P.W.D. or Defence Forces) or employment of such contractors, within one year of my retirement, without the prior permission of the President of India.

I hereby declare that I have neither applied for nor received any ordinary Gratuity/Pension/Death-cum-

DECLARATION FOR NON RECEIPT OF PENSIONARY BENEFITS

which orginary G	Fatulty/Pe	ension/Death-cur	n-Gratuity is c	laimed heréin na	is application and or shall I submit which may be pas	an application
I am in occup	oation of	Railway / Direc	torate of Estat	es' (DOE) Ho	use Notirement from Railwa	
agree to withhold Quarter/DOE acc	l Death-cu	ım-Retirement gı	ratuity as per e	extant orders till s	such time, I vacat	e the Railway
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				at at	Employe	e's Signature
1 st Witness Signatu	re:		,			
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Designation	:		····			SI .
RUID No.		•••••••••			16.0	
	200					
2 nd Witness Signatu	ıre :	****************				
Name		1111222222222222222				
Designation	:				g 14	
RUID No.					,	
					2	

Note: After vacating the government accommodation, employee may apply for refund of withheld gratuity in prescribed performa, along with all required documents. In case of Directorate of Estates' accommodation, the retiring employee has to apply online for obtaining the "No Demand Certificate".

DETAILS OF FAMILY MEMBERS

A65-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
A65 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Affix Joint Photo Affix (to be duly signed across Employee's by self and spouse) Photo	p

3. Details of all family members :-

S. No.	Name (in Block Letters)	Relationship with Railway Servant	Date of Birth (attach a photocopy of valid document as proof)	Aadhaar No. (attach a photocopy of Aadhaar Card)
1	2	3	4	5
(i)				
(ii)	:			
(iii)		,		
(iv)				
(v)				
(vi)	,			

S, No.	Date of marriage in case of married children	Name of spouse of married child	Indicate the nature of handicap (mental/physical), if any, of the child and whether it is permanent or temporary	Remarks/Any other information
	6	7	8	9
(i)				** to
(ii)				
(iii)				
(iv)				
(v)				
(vi)				4

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(c) Fingers' Impre	(ii)ssion of Left Hand	;-	T. F	
(c) Fingers' Impre	(ii)ssion of Left Hand	;-	T. F	
(c) Fingers' Impre	(ii)ssion of Left Hand	;-	T. F	
(c) Fingers' Impre Thumb	ssion of Left Hand Index Finger	 Middle Finger	Ring Finger	
(c) Fingers' Impre Thumb	ssion of Left Hand Index Finger	;-	Ring Finger	
(c) Fingers' Impre	ssion of Left Hand Index Finger	:- Middle Finger	Ring Finger	Little Finge
(c) Fingers' Impre: Thumb	ssion of Left Hand Index Finger Da	Middle Finger te:	Ring Finger	Little Finge
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of certifying authority.

PAYEE'S LETTER OF AUTHORITY

I request that my Provident Fund and Death-cum-Retirement Gratuity/Compassionate gratuity/Leave Encashment/SRPF/CGEGIS/Pension Commutation amount may be remitted to me through ECS/RTGS/NEFT.

I agree that the remittance made in the aforesaid manner shall be at my sole risk and shall be a complete discharge of Government from all liability on the amount being remitted by ECS/NEFT/RTGS/Money order/Cheque/Bank Draft forwarded by registered post, as the case may be.

PRE-RECEIPT

	Revenue Stamp (to be duly signed across by the employee) Signate	ure of Employee
Ciemad before	·	5,
Signed before	me.	b.
•	ne. tness:	
•	¥	
Signature of W	tness:	
Signature of W	tness:	
Signature of Windows Name Designation	tness:	
Signature of Windows Name Designation RUID No.	tness:	
Signature of Windows Name Designation RUID No.	tness:	

^{*} Head of Office, means a gazetted officer whom the appointing authority may, by order declare as Head of office and includes such other authority or person whom the appointing authority may specify in the like manner.

LETTER OF AUTHORITY UNDERTAKING FOR DRAWAL OF PENSION THROUGH PUBLIC SECTOR BANK WITH PERMANENT ADDRESS & MODE OF PAYMENT

1.	to receive my	orize Manager,	he same to my saving t	Dank account (pension) on the
	Amount of per	nsion per month at the time of	retirement :	
	Rs	(Rupees)
2.	l agree to und savings bank public sector b	account may be recovered or	ss/wrong payment of pe withdrawn from the said	ension if credited to my above d savings bank account by the
3 .	The authority s	shall remain in force until due r	notice in writing is given l	by me.
•				
1 st W	/itness Signatui	re:	Employee's Signature	· · · · · · · · · · · · · · · · · · ·
Nam	е	1	Name	1
Desig	gnation	1	Designation	1
RUID	No.	5 5 ; **********************************	RUID No.	1
		9	Mobile No	:
	2		E-mail id	<i>5</i>
2 nd .V	Vitness Signatu	re:	Permanent Address a	fter Retirement:
Name	9	:		
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