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 <u>www.finhry.gov.in</u>.

The receipt of these instructions may be acknowledged.

Yours faithfully,

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.
- All the Principal/Administrative Secretaries to Govt. Haryana.

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

To

- 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.

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.

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

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:-

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

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 the In-charge, Computer Cell, Finance Department for placing it on the official website of Finance Department.

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

3 of 3

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			
Gover	nment of Haryana		
Depar	tment / Office		
Dated	the		
То	The Accountant General(A&E) Haryana.		
Subje	ct: - Pension Papers of Shri / Shrimati/Kumari for authorization of pension.		
Sir,	I am directed to forward herewith the pension papers of Shri / S of this department / office for		
2.	The details of Government dues which will remain outstanding o		•
the G	overnment employee and which need to be recovered out of the		
	ment 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 deductable at source under the ITA, 1961 (43 of 1961)		Rs.
(d)	Arrears of licence fee for occupation of Govt. accommodation		Rs.
	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.
	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.
- 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: -

Form PEN 1 and Form PEN 9* duly completed.

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)
Service book (date of retirement to be indicated in the service book).

4.

- 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.
 - 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.
- 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 Year Months Days							
	rendered in order of employment							
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.							
accon	nmodation 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 g	ratuity					
18.	Average emoluments						
	Emoluments drawn during th	e last ten months of ser	vice				
Post he	eld From	To Pay_					
Person	al pay or special pay	Average emolu	uments				
i)		noluments an equal pe	some period not to be rockoned for eriod backward has to be taken for				
ii)	The calculation of avera contained in each month	•	be based on actual number of days				
19.	Date on which form PEN 9 h	as been obtained from the	he				
	Government employee (to be	e obtained one year					
	Before the date of retirement	t of Government employe	ee				
20.	i) Proposed pension						
	ii) Proposed graded relief						
21.	Proposed death-cum-retirem	ent gratuity					
22.	Date from which pension is t	o commence	,				
23.	Proposed amount of provision						
	departmental or judicial proceedings are instituted						
	against the Government employee before retirement.						
	agament and	,					
24.	Details of Government dues	recoverable out of gratu	ity:-				
	i) Licence fee for the allotme	nt of Government accom	nmodation				
	(See sub-rule(2),(3) and (4) of rule 9.18)					
	ii)Dues referred to in rule 9.19						
25.	Whether nomination made for	or death-cum-retirement					
	gratuity.						
26.	i) The amount of the family p	ension becoming payab	le to the family of the				
	Government employee, if		•				
	a) Before attaining the age o	·	Rs				
	b) After attaining the age of	•	Rs				
	ii) Complete and up to date of	•					
Sr.	Name of the member of t	he Date of birt	h Relations with the				
No.	family		Government employee				
1	2	3	4				
27.	Height		 				
28.	Identification marks		 				
29.	Place of payment of pension		·····				
	(Treasury, Sub-Treasury or I	Branch of Public Sector F	Bank)				
30.	Head of Account to which pe	ension and gratuity					
	are debitable						

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/he 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].

History of Service (Showing Interruptions)

Name Designation

Establish ment Appointment as Substantive pay Officiating Pay Date of beginning service Date of ending of service Period Reckone as service	Period Reason of Non-reckoned as service Remarks Qualifying Verified Accounts Officer
Y-M-D Y-M-D	
1 2 3 4 5 6 7	8 9 10 11

Calculation Sheet of Pension

m which retired
rvice
annuation
nary benefits were settled
ervice
ce
ast ten months
hich Pension fixed
sion
atuity
onthly pension commuted
e of pension authorised
(Signature of Head of office)
Designation(with Stamp)

Chart Indicating the Service Verification

NameDesignation

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

Table -I: Details of Qualifying Service

Shri / Smt. Designation

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

Table - II Details of Non-Qualifying Service

Name Designation

Name of	Nome of	Гиона	То	Daviad	of inton		ال الله الله الله الله ا		olon.	Total non
Name of Govt. under	Name of Establishment	From	<u>To</u>	Extra-or	dinary	ruption not Susper	<u>ı qualliyi</u> nsion	Any o	ther	Total non qualifying
which	Lotabilorimont			leave	not	period	not	period	l not	<u>period</u>
employed				qualifyii	na for	qualifyii	na for	treate	d as	<u> </u>
				pens	ion	pens	ion	qualif	ying	
1	<u>2</u>	3	4	5	<u> </u>	6	<u> </u>	7	<u></u> _	8
	=			From	<u>To</u>	From	<u>To</u>	From	<u>To</u>	

Average Emoluments Calculation Sheet

Average Emolu	verage Emoluments in respect of Sh. / Smt					
Designation	gnation Office					
During the last	During the last ten months from to					
S. No.		RIOD	Month	Pay @ Per	Total Pay	
	From	То		Month (Rs.)	(Rs.)	

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. Attested Signature of witness _____ Occupation___ 2. (Head of Office) Signature of witness _____ Occupation___ Designation Address___ (with Stamp) The declaration should be witnessed by two persons, of responsibity 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 discripancy in found recoverable from me at any stage from my pension. Attested Signature _____ Designation _____ (Head of Office) **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

anticipa pension to revis revision may be	"Whereas the (here state the designation of the completion of the enquiries need, I hereby acknowledge that in accepting sion on the completion of necessary form on the grounds that the provisional pensite eventually found entitled. I further promine to which I may be eventually found entitled.	ally to advance cessary to enal the advance, I mal enquiries sion now to be hise to repay an	e me the sum ble the Govern fully understa an promise to paid to me ex	of Rsment to fix the nd that my per o raise no objected he pens	amoun a ansion is jection to sion to s	month at of my subject to such which I		
Attested	d		Sig	Signature				
(Head o	of Office)		Des	signation		•••••		
	Certificate Rega	J	•		n or gra	utuity.		
pension	Certified that I have rendered mil	litary service,	and have	received				
1.	Total period of military service Date of Commencement and end of each period of military service.							
2.	Amount and nature of any pension/grature received for the military service.	ity						
Attested	d	S	ignature					
(Head o	of Office)	D	esignation					

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.
Designationhas completed a qualifying service ofyears
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		Designa	ntion		
S.No.	Name	Age	Marital	Relation	Date of Birth
			Status		
1	2	3	4	5	6

Particulars of Height/Identification Marks

Name	Designation
Particulars of Height	
Personal Marks of Identification	Attested
	(0:
	Designation with Stamp
Particulars of Hei	ght/Identification Marks
Name	Designation
Particulars of Height	
Personal Marks of Identification	Attested
	Designation with Stamp
Address for	r Correspondence
Present Address	
Address after Retirement	
Address for	r Correspondence
Present Address	
Address after Retirement	

Specimen Signatures/left hand thumb and finger impressions

Name		Designation		
Specimen Signa	tures			
1		2		
Left hand thum	b and finger impres	OR ssions (In case the pension	ner is illiterate):	
(Little Finger)	(Ring Finger)	(Middle Finger)	(Index Finger)	(Thumb)
			Attested	
		Signature		
	_	Designation(with Stamp)		
_	_		and finger impression	
Specimen Signa	tures			
1		2		
Left hand thum	b and finger impres	OR ssions (In case the pension	ner is illiterate):	
(Little Finger)	(Ring Finger)	(Middle Finger)	(Index Finger)	(Thumb)
			Attested	
		Signature		

Last Pay Certificate L.P.C

Office of the				
No				
Office case_				(Provincial)
Last Pay Cert	tificate of			
of the				proceeding on
to				
2. He has bee	n paid upto			
at the follow				
	PAI	RTICULARS		RATE
				Rs. P.
Substantive P	Pay			
Officiating Pa	•			
Exchange Co	mpensation Allowa	nce		
Deductions				
3. He has ma	de over charge of the	ne office of		
on the		noon of the		19
4. Recoveries	are to be made from	m the pay of the Gove	rnment servant as de	etailed on the reverse.
5. He has bee	n paid leave salary	as detailed below. De	ductions have been i	made as noted on the reverse
	Period		Rate	Amount
From	to	at	Rs.	a mont
From	to	at	Rs.	a mont
From	to	at	Rs.	a mont
From	to	at	Rs.	a mont
		owing scale of pay _		
				every year.
7. He is also	entitled to joining ti	me for	days.	
8. The details	s of the income tax	recovered from him	upto the date from	the beginning of the current
are noted on	the reverse.			
Dated	19			Head of Office/Dep

DETAILS OF RECOVERIES

Name of recovery _					
Amount: Rupees					
To be recovered in				installmen	ts
	SALARY	DEDUCTIONS M	IADE FROM I	LEAVE SALAR	Y
From	to	On a	ccount of		Rs.
From	to	On a	ccount of		Rs.
From	to	On a	ccount of		Rs.
Name of months	Pay	Gratuity Fee	Funds and	Amount of	Head of Office/De Signature with Star
Name of months	Pay	Gratuity Fee	Other Deductions	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					

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

То	
The	
	Here indicate the designation and
Subject:- Commutatio	n of pension without medical examination
Sir,	
	the relevant particulars and request that I may be permitted to cummute a part of
my pension as indicated	below: -
1. Name (in Block letter	rs)
	case of female Govt. employee)
3. Designation at the tin	ne of retirement
	rtment in which employed
5. Date of Birth (by Chr	istian era)
	which retired
	uthorized
(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 A	accounts Officer
who authorized the pens	sion and No. and date of Pension Payment Order, if issed
11. Disbursing authority	for payment of pension
** a) Treasury/Sub treas	sury
(name and Complete	address
of the treasury/Sub tr	reasury
to be indicated)	
**b)i) Branch of the Na	tionalised
Bank with compl	ete
Postal address	
ii) Bank Account No	D
to which monthly	pension is being credited each month.
Place	Signature
Date	

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 Of	ficer, (here indicate the address & Designation)
with the remarks that:-	
i) the particulars furnished by the app	licant in PART-I have been verified and are correct,
ii) the applicant is eligible to get a frac	ction of his pension commuted without medical examination,
iii) The commuted value of pension de	termined with reference to the Table applicable at present comes to
Rs(Rupees)
	nsion after commutation will be Rs (Rupees
	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
(I	Detach from here)
	PART II
	Acknowledgement
Received from Shri/Smt	(Name & former
designation) Application in Part I of I	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
Та	Dated, the
То	Accountant General, Haryana.
Subje	et: - Grant of Family pension and death-cum-retirement gratuity.
Sir,	
	I am directed to say that Shri/Smt
_	ationdied onHis
	has become eligible for the grant of family pension and death-cum-retirement
_	ry. 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-cumretirement 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

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
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)/Ren
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 fromto
(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 DEN 17 (Contd.)

FORM PEN 17 (Contd....)

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

	(a)	Enhanced rated (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				
(ii)		od of tenability of family pension 1964. From				
		Enhanced rates.				
		Ordinary rates				
		whom family pension is payable.				
		ip with the deceased Government employee.				
		ostal Address:				
		Government dues recoverable out of gratuity:				
(i)		ense fee for occupation of Government accon 7)	nmodation (See rule			
(ii)		ount of death-cum-retirement gratuity to be harmation from the Accounts Officer	eld over pending receipt of			
····		nt) Rent Assessing Authority. (See rule 9.27				
(iii)		es referred to in rule 9.27(2)				
		nich claim received from the claimants				
		uardian who will receive payment of death-cu				
		in the case of minors				
Bank)		syment (Treasury, Sub-Treasury or branch of	Public Sector			
,		ccount to which death-cum-retirement gratuit				
debitable		ecount to which death-cum-rethement gratuit	y and family pension are			
uconable	•					
Place:						
Dated, the	e		Signature of Head of Office			
Dated, til	C		Signature of freda of Office			
SECTIO	N II					
		visional family pension and gratuity to be san	ctioned by Pension sanction			
		ecordance with rule. 9.25	,			
-		mily pension	Rs			
		mount mentioned in item 18 (b) of Part (1)				
Less						
(a) Licen	ce fee	e recoverable from gratuity for occupation of	Government			
accommo	odatio	on (as in item 21 (i) of Part (1)	Rs			
(b) Amou	ınt of	Gratuity to be held over pending receipt of in	nformation from the Accounts			
		Rent Assessing Authority (as in item 21 (ii)				
			Rs			
(c) Other	r Gov	ernment dues as mentioned in item 21 (iii) of	f Part I.			
			Rs			
(d) Total	of (a)), (b) & (c),	Rs			
Place:	. /					
Dated, the	e		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
То	·····
Subject: - Payment of Family Pension Shri/Smt	Scheme, 1964 in respect of Late
Sir/Madam,	
Volume II, a family pension is payable	· ·
Shri/Smt(Designation	
of) 2. You are advised that a claim for the enclosed Annexure II.	or the grant of family pension may be submitted in
3. The family pension will be pay	rable till your death or re-marriage, whichever our death or re-marriage, the family pension shall ny, 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.

Name of the applicant

(i) (ii)		widowern, if the deceased		
2.	Name and	age of surviving wid	low/widower and child	ren of the deceased
Gover	nment emplo	yee/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.		th of the Government en		
4.		artment in which the	deceased Government	t employee/pensioner
	last			
5.		cant is guardian, his date		
5A may be	If the applice in receipt or	p with the Govt. employed cant is widow/widower on the date of death of the s of the applicant	the amount of service husband/wife	pension which she/he
7. (Treas 8.	ury, Sub-Trea Enclosures: (i) Two	specimen signatures of	atuityhk Branch). The applicant duly attes	
	(ii) Two (iii) Two	mants) (To be furnished to copies of passport size to slips each bearing lefticant, duly attested (in contract)	photograph of the applic t hand thumb and fing	er impressions of the
	(iv) Desc (b) 1	criptive Roll of the appl personal marks, if any, licate).	licant, duly attested, ind	icating (a) height and
	(v) Cert date: Mun recognishou	ifficate(s) of age (in oris of birth of the child nicipal Authorities or from gnized school if the child be furnished in respective dates of birth are n	dren. The certificate om the Local Panchayat d is studying in such scheet of such child or child	should be from the or from the head of a ool. (This information dren the particulars of
9.	(vi) Deat	th Certificate. r left-hand thumb impres	ssion of the applicant	

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

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) FR	AI/64/9691, dated 16 th 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/Sr	nt			
Hereby	orders the grant of a family pension of Rs			
to Shri				
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.

То	No
Subject: - Payment of death-cum-retirement Shri/Smt	= = = = = = = = = = = = = = = = = = = =
Sir/Madam,	
I am directed to state that in terms of Shri/Smt	<u> </u>
(Designation	
gratuity is payable to his/her nominee(s). A coherewith. 2. I am to request that a claim for the grant of in the enclosed FORM PEN 1B. 3. Should any contingency have happened si so as to render the nomination invalid, in who contingency may kindly be stated.	opy of the said nomination is enclosed of the gratuity may be submitted by you ince the date of making the nomination,
	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
То		,
•	•	irement gratuity in respect of the late
Sir/Madam	1,	
cum-retirer Sh./Smt Office/Dep (i) (ii)	ment gratuity is payable partment of Wife/Husband	terms of rule 6.16-A of Punjab CSR Vol.II, a deather to the following members of the family of late
	will be payable to the fo Widowed daughters Father	o surviving member of the family as indicated above, llowing members of the family in equal share: -
(iv) (v) (vi)	(Including adoptive permit adoption) Brother below the a sisters (including step Married daughter, and	

It is requested that a claim for the payment of gratuity may be submitted in the

3.

enclosed Form PEN 1B as soon as possible.

Yours faithfully,

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.

	shou	ld be filled in by th	ne guardian o	claimant and in the case claim n his/her behalf. Where there uity in one Form on their beho	are more than	
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. being	peing claimed					
	(ii) Date of death of Government employee.(iii) Office/Department in which the deceased served last.					
4. emplo		_	-	guardian with the deceas		
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						
3						
4						
(ii) Re	latio	nship of the guard	ian with mino	r		
7.	Plac	ce of payment of p	ension and gr	ratuity		

(Treasury/Sub-Treasury/Public Sector Bank Branch)

Signature/Thumb impression of the Claimant/guardian

8.	Two specimen signatur	es or left hand thumb* and finger im	pressions of the
claima	nt/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 1.		he receiving authority rand past conduct of ap			
2.	Explanation of any suspension or Degradation.				
3. VII)	Regarding any gratuity or pension already received by the applicant (See Chapter				
4.	Any other rem	arks			
5. should	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)				
	SignatureAuthority				
В	Order of the sanctioning authority				
(a) The undersigned having satisfied himself that the service of Late Shri/Smt./Kumari					
(c) Nar	me 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

ofyears	days as
on(date). The service	ce has been verified on the basis of his service
documents and in accordance with the	he rules regarding qualifying service in force at
	shall be treated as final and shall not be reopened
1 3	quent change in the rules and order governing the
conditions under which the service of	qualifies for pension.
DETAILS (OF OHALIFYING SERVICE

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

(Signature of Head of Office)

Table: 1	Details	of C	Dualify	ving	Service
----------	---------	------	---------	------	---------

NameDesignation	
-----------------	--

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

Table-II: Details of Non-Qualifying Service

			Period of interruption not qualifying for pension							
Name of Govt. under which employed	Name of Establishment	From	То	Extra-ordi leave not of for pensio	qualifying	Suspen period treated qualify	not as	Any of period treated qualify	not as	Total non- qualifying period
1	2	3	4		5		6	,	7	8
				From	То	From	То	From	То	

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

1.	Name :		
2.	Post held at the time of death:		
2. 3.			
4.			
5.	Date of joining Govt. Service:		
6.		YearsMo	
7.	Less period of E.O.L. etc. not qualifying service	YearsM	onthsDays
8.	Net qualifying service	YearsMonth	ısDavs
9.	Pay drawn at the time of death		
10.	Amount of Family pension		
	(30% of pay last drawn)		
	subject to minimum of Rs. 127	5/-	
11.	Amount of pension to be drawn		
	years or till the deceased would		
	completed 65 years of age (whi		
		,	
12.	Calculation of gratuity (D.C.R.	G) at the following rates:-	
	(i) For less than one year service		
	(ii) One year service but less th	en Five years service:	6 months emoluments
	(iii) With Five years or more se	ervice : 1	/4 of the emoluments for
each h	nalf year subject to minimum or	twelve years emoluments	s and maximum of 161/2
times i	in case of Class I, II and III empl	oyees and 171/2 times in ca	se of class IV employee.
<u>Emolu</u>	<u>iments</u> means Pay as defined	in rule $2.44(a)(1)$ of C.S.	S.R. Vol. I Part I. Plus
Dearne	ess allowance admissible on sucl	n pay on the date of death.	
Pay Rs	S	<u></u>	
D.A. R	Rs	<u></u>	
Total	Rs	X	= Rs.

Head of Office

	Descriptive Roll/Signatur	e or Left hand thumb imp	ression
Claimant			
Ciuiiiuiii			
Name of o	deceased		
Relations	hip with deceased		
{widow/v	vidower/ guardian of minor chi	ld (ren)]	
(i)	Date of Birth		
	Height		
(iii)	Personal marks of identificati	on	
	(on hand or face)		
(iv)	Specimen Signature /Left-har	nd thumb impression:	
1.			
2.			
Attested b	by:		
Name	Ful	ll Address	Signature
(i)			
(ii)			
	y two gazetted officers or pers the applicant resides.		
	Descriptive Roll/ Signatur	re or Left hand thumb imp	pression
Claimant			
Name of o	deceased		
Relationel	hip with deceased		
	vidower/ guardian of minor chi	ld (ren)]	
(i)	Date of Birth	id (ieii)]	
	Height		
	Personal marks of identificati	on	
(111)	(on hand or face)	Oli	
(iv)	· ·	ad thumb impraggion:	
(iv)	Specimen Signature /Left-har		
l.			
2. Attested b			
Name	•	ll Address	Signature
		.1 / MUIUSS	Signature
(1) (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.

Of Late Shri/SmtDesi	gnation
----------------------	---------

•••••

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 Deceased	Designation
Claimant	
Relationship with the Deceased.	
[Widow/widower/ guardian of the minor child (ren)]	
Address	
Pin	

T . /	TZA	PΛ	\mathbf{V}	CER	$\Gamma \Gamma \Gamma \Gamma$	[CA]	$\Gamma \mathbf{F}$	ΠF	\boldsymbol{C}
	101	\mathbf{I}	L	CER	T TT, 1	\mathbf{L}		(L/·L	••

				••	(Provincial)
	case				(Provincial)
					proceeding
	at the following ra	-			
	Particulars			Rate	
	Substantive Pay			Rs.	P.
	Officiating Pay				
	Exchange Compe	nsation All	owance		
DEDU	CTIONS				
			••••		
He had	made over charge	of the offi	ce of		
				on of the	
				overnment servant as	
	-	d leave sal	ary as detailed b	elow. Deductions hav	ve been made as
noted o	on the reverse:		_		
Б	Period		Rate	Amount	.1
From	to	at	Rs.	a mon	
From	to	at	Rs.	a mon	
From	to	at	Rs.	a mon	
He is e	nutied to draw the				
Heisa	lso entitled to joini			daye	every year.
	•	_		to the date from the	heginning of the
	years are noted or		-	to the date from the	ocgiming of the
Current	years are mored or	i dio iovolo	···		

Dated	
	Head of Office/Deptt.

DETAILS OF RECOVERIES

	•		
To be reco	overed in		Installment
		ONS MADE FROM LEAVE	
From	to	on account of	Rs
From	to	on account of	Rs
From	to	on account of	Rs
			Head of Office/Dep

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 the	noon of	f	
		(Signature) (Designation)	