



**FORMAT - 1**

**Option Form to be filled in by the employees who are in service of the Bank  
 (To be submitted In quadruplicate through their present Branch / Office)**

FOR BRANCH/RO USE ONLY		FOR HO USE ONLY
Date of receipt of application at Branch / Office		<b>OPTION NOTED IN SERVICE RECORD</b>
Forwarded to RO on		
Forwarded to HO on		
<b>Forwarded by</b>	<b>Forwarded by</b>	
<b>Signature with Seal of BM</b>	<b>Signature with Seal of RM</b>	<b>General Manager - Admin</b>

The Chairman  
 Pandyan Grama Bank  
 Administrative Office, Virudhunagar - 626002

Date: \_\_\_\_\_

I hereby declare that I have read and understood the Pandyan Grama Bank (Employees) Pension Regulations, 2018 and I hereby opt to become a member of the Bank's Pension Scheme and irrevocably authorise the Bank / EPF Trustees / EPFO / RPFC to transfer the entire contribution of the Bank along with the interest thereon to the credit of Pension Fund to be created for this purpose. I understand that I am required to contribute to the Provident Fund Account at the rates determined by the Bank from time to time. I further understand that with effect from \_\_\_\_\_ (the date of implementation of Pension Scheme), the Bank shall not make any contribution to my Provident Fund Account. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time up to the date of refund.

1. Signature :
2. Name in Full (in Block letters) :
3. Designation :
4. E P F No :
5. Present Residential Address :
6. Date of Birth :
7. Date of joining in the Bank' service :
8. Present place of posting :

**Signature**

**Signature Attested**

**Branch Manager/Regional Manager/Chief Manager with Official Seal**





**FORMAT - 2**

**Option Form to be filled in by the employees who joined the service of the Bank Between 01 April 2010 and 31 March 2018**

**(In terms of Pandyan Grama (Employees') Pension Regulations, 2018 (Refer Chapter II, Regulation 3(3) (To be submitted in quadruplicate through their present Branch / Office))**

FOR BRANCH/RO USE ONLY		FOR HO USE ONLY
Date of receipt of application at Branch / Office		OPTION NOTED IN SERVICE RECORD
Forwarded to RO on		
Forwarded to HO on		
Forwarded by	Forwarded by	
Signature with Seal of BM	Signature with Seal of RM	General Manager - Admin

The Chairman  
Pandyan Grama Bank  
Administrative Office, Virudhunagar - 626002

Date: \_\_\_\_\_

I hereby declare that I have read and understood the Pandyan Bank (Employees') Pension Regulations, 2018.

\*I am presently covered under EPF Scheme 1995 and hereby irrevocably undertake and opt remain covered under EPF Scheme 1995 only

**OR**

\*I hereby opt to become a member of the National Pension System (NPS) and irrevocably authorise the Bank / EPF Trustees / EPFO / RPF to transfer the entire contribution of Myself and the Bank along with the interest thereon to the credit of Fund Manager to be appointed for this purpose. I understand that I am required to contribute to the NPS at the rates determined by the Bank/PFRDA from time to time. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time up to the date of refund.

1. Signature:
2. Name in Full (in Block letters):
3. Designation:
4. E P F No:
5. Present Residential Address:
6. Date of Birth:
7. Date of joining in the Bank' service:
8. Present place of posting:

**Signature**

**Signature Attested**

**Branch Manager/Regional Manager/Chief Manager with Official Seal**





**FORMAT - 3**

**Option Form to be filled in by the Retired Employees of the Bank**  
**(To be submitted in quadruplicate through the Branch / Office from where retired)**

FOR BRANCH/RO USE ONLY		FOR HO USE ONLY
Date of receipt of application at Branch / Office		<b>OPTION NOTED IN SERVICE RECORD</b>
Forwarded to RO on		
Forwarded to HO on		
<b>Forwarded by</b>	<b>Forwarded by</b>	
<b>Signature with Seal of BM</b>	<b>Signature with Seal of RM</b>	<b>General Manager - Admin</b>

The Chairman  
 Pandyan Grama Bank  
 Administrative Office, Virudhunagar - 626002

Date: \_\_\_\_\_

I hereby declare that I have read and understood the Pandyan Grama Bank (Employees) Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorise the EPFO / RPFC to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to me on my retirement. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time.

1. Signature :
2. Name in Full (in Block letters) :
3. Designation :
4. E P F No :
5. Present Residential Address :
6. Date of Birth :
7. Date of joining in the Bank' service :
8. Date of retiring from the Bank :
9. Branch/Office from where retired :
10. Branch from where pension to be drawn :

**Signature**

**Signature Attested**

**Branch Manager/Regional Manager/Chief Manager with Official Seal**



**Pandyan Grama Bank**  
 Administrative Office  
 Personnel Administration Department  
 2-70-1, Collectorate Complex  
 Virudhunagar -626002



Service with Smile

Phone : 04562-253128  
 Fax : 04562-252858  
 E-mail : pad@pgbnet.in

**FORMAT - 4**

**Option Form to be filled in by the family of those employees of the Bank who are eligible for family pension (To be submitted in quadruplicate through the Branch / Office from where retired/posted at the time of death)**

FOR BRANCH/RO USE ONLY			FOR HO USE ONLY
Date of receipt of application at Branch / Office			<b>Recent Photograph of the applicant to be pasted here and then to be attested by the Branch/Office head</b>
Forwarded to RO on			
Forwarded to HO on			
<b>Forwarded by</b>	<b>Forwarded by</b>		
<b>Signature with Seal of BM</b>	<b>Signature with Seal of RM</b>		<b>General Manager - Admin</b>

The Chairman  
 Pandyan Grama Bank  
 Administrative Office, Virudhunagar - 626002

Date: \_\_\_\_\_

I hereby declare that I have read and understood the Pandyan Grama Bank (Employees) Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorize the EPFO / RPFC to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to my husband/wife/father/mother/son/daughter (delete whichever is not applicable) on his/her death while in service/after retirement from Bank's service. I also undertake to refund the non-refundable withdrawal from EPF balance (Bank's contribution component) availed by my husband/wife/father/mother/son/daughter (delete whichever is not applicable), if any, together with interest at EPF rate from time to time up to the date of retirement / death.

1. Name of the applicant/dependent of deceased employee in Full (in Block letters):
2. Name of the deceased employee in Full (in block letter):
3. EPF No of the deceased employee:
4. Relationship with the deceased employee:
5. Name of guardian if applicant is minor:
6. Present Residential Address (in block letter):
7. Date of death of the deceased employee (Documentary evidence to be attached):
8. Date of retirement from Bank's service:
9. Branch /Office last served and post held
10. Branch from where pension to be drawn:



11. List of documents / evidences to be attached:

- a) Copy of Superannuation / retirement order of the deceased employee (If applicable)
- b) Copy of Death Certificate of the Employee
- c) Copy of Birth certificate of child eligible for pension
- d) Copy of AADHAAR CARD/ KYC document in the name of applicant
- e) Any document in support of the stated relation of the applicant  
(Mention the name / nature of document)

I hereby declare that what are stated in the application and documents submitted are true, correct and genuine.

Enclosures: As stated in point 11 above.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(Signature of the Applicant)

**Signature Attested**

**Branch Manager/Regional Manager/Chief Manager with official Seal**



**FORMAT -5**

**Acceptance/ Non-acceptance of Commercial Employment**

I declare that I have not accepted commercial employment in India.

OR

I declare that I have accepted commercial employment in India w.e.f..... after obtaining previous sanction of the Bank and none of the conditions, if any, attached thereto by the bank has been violated.

OR

I declare that I have accepted commercial employment in India w.e.f..... without obtaining the sanction of the Bank

Date: .....

Signature of the Pensioner

**Name of the pensioner: ..... PPO No:**

**SB (Pension) Account No ..... Mobile :.....**

**Note: This declaration is required to be submitted for a period of two years from the date of retirement.**



FORMAT - 6

CERTIFICATE OF NON- REMARRIAGE / NON-MARRIAGE  
(APPLICABLE FOR FAMILY PENSIONERS ONLY)

\* I hereby declare that I have not got re-married and I undertake to report the same promptly in the event of my re-marriage. (Applicable for widow / widower Family Pensioner)

\* I hereby declare that I am not married and I undertake to report the same promptly in the event of my marriage. (Applicable for un-married daughter Family Pensioner)

**(\*Please delete which is not applicable)**

Signature of the Family Pensioner:

Name of the pensioner: .....

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

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

(Signature of the Bank's Officer or respectable /well known person)

Place : .....


Date : .....

Name : .....

Designation: .....

Address: .....



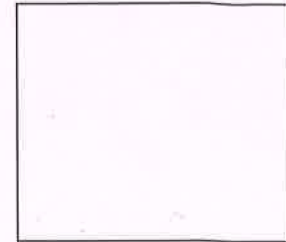
	<b>PANDYAN GRAMA BANK</b>
	_____ Branch/Office
Ref No. :	Date:

**FORMAT 7**

**Application for grant of Family Pension in the event of death of Employee / Pensioner**

To

The Chairman  
Pandyan Grama Bank  
Administrative Office, Virudhunagar



Date:

Dear Sir,

I hereby declare that as an eligible family member to receive Family Pension in terms of Pandyan Grama Bank (Employees') Pension Regulations, 2018, I am submitting below the requisite particulars for kind favour of sanction of Family Pension to me.

1. Name of the applicant (in block letters) :

i) Relation with the deceased employee/pensioner:

ii) Date of Birth :

iii) Name of the Guardian if the deceased Person is survived by minor child/children

iv) . Religion and Caste :

02. Present residential address of the applicant (in block letters) :

Contact No:

03. Name & age of surviving parent/widow/widower/children of the deceased employee / pensioner:

Sl No	Name	Relationship with the deceased employee/pensioner	Date of Birth ( by Christian era)

04. Name of the deceased employee/pensioner

05. EPF No of the deceased employee :

06. Date of death of the employee /pensioner:

(Documentary evidence to be attached) Contd. PAGE - 2

07. Date of retirement (in case of Pensioner):





08. a) Branch/Office in which the deceased employee/  
Pensioner served last and post held by him/her  
b) PPO No of the deceased, if any, with the nature  
of pension & Disbursing Authority. :

09. If the applicant is guardian, date of birth of minor  
& relationship with the deceased employee/pensioner

10. a) Is the applicant (other than guardian) a pensioner ?

YES / NO

if so, indicate the amount of monthly pension :

b) Is the applicant employed? If so, particulars  
in details with last pay drawn certificate from employer :

YES / NO

11. Description of the applicant including

(a) Height: cm

(b) Personal Identification marks, if any, on hand, face etc.

12. Signature/LTI \*\* of the applicant (Duly Attested by the Branch head with seal)

**SIGNATURE / LTI OF THE APPLICANT**

**SIGNATURE IS ATTESTED**

**(Branch/Regional/Chief Manager with Official Seal)**

13. a) Name of the Branch of the Bank through which  
Family Pension is to be drawn

: \_\_\_\_\_

b) SB Account No

: \_\_\_\_\_

14. List of Documents / evidence attached :

- a) Three copies of passport size recent photograph of the applicant , duly attested in front side
- b) Attested copy of the Death Certificate of the deceased Employee/ Pensioner
- c) Birth Certificate of the children eligible for pension.
- d) Any other document(s) indicating that the applicant is a genuine claimant e.g. AADHAAR Card, Voter Card etc.


15. I hereby declare that what are stated in this application and documents submitted herewith are true, correct and genuine.

Yours faithfully,

Signature/LTI of the applicant

**\*\* To be furnished in case the applicant is not literate enough to sign his/her name or unable to sign due to poor health condition which also needs submission of Medical Certificate.**



	<b>PANDYAN GRAMA BANK</b>	
	_____ Branch/Office	
Ref No. :	_____	Date: _____

**FORMAT 8**

To

The Chief Manager  
 Personnel Administration Department  
 Pandyan Grama Bank  
 Administrative Office  
 Virudhunagar

**Dear Sir,**

**Sub: Ten months (prior to death/retirement) average pay & allowances of  
 Shri/Smt. \_\_\_\_\_  
 EPF No \_\_\_\_\_**

We are furnishing below the 10 months (prior to death/retirement) average pay & allowances of Shri/Smt. \_\_\_\_\_ Designation (Last) \_\_\_\_\_, EPF No \_\_\_\_\_ who retired / died on \_\_\_\_\_ for calculation of pension under Pandyan Grama Bank (Employees') Pension Regulations, 2018.

1	Basic Pay	
2	Stagnation Increment	
3	Pay and Allowances rank for DA	
	a) Special Allowance	
	b) Professional Qualification Pay (PQP)	
	c) Special Pay (Key/Daftry/Driving Allowance)	
4	Period of Extra Ordinary Leave on Loss of Pay sanctioned by the Competent Authority and enjoyed during the Service Period	
5	Leave Without Pay during Service Period	



Details of Last Ten Months Salary						
Month wise Breakup Year & Month	Basic Pay	Stagnation Increment	Pay and Allowances Rank for DA			Total
			a	b	c	
			SA	PQP	SP	
<b>Average</b>						

Yours Faithfully,


Branch/Regional Manager (with seal)

\_\_\_\_\_ Branch/Office

**Note:**

1. Delete which is not applicable
2. No columns should be left blank
3. Basic Pay & Stagnation Increment to be reported separately in the columns specified
4. For arriving at the ten months' average please refer to Regulation 36 read with Regulations 2 (c) & 2 (f) of Pandyan Grama Bank (Employees') Pension Regulations, 2018



	<b>PANDYAN GRAMA BANK</b>	
	_____ Branch/Office	
Ref No. :		Date:

**FORMAT 9**

To

The Chief Manager  
 Personnel Administration Department  
 Pandyan Grama Bank  
 Administrative Office  
 Virudhunagar

Dear Sir,

**Sub: Particulars of Outstanding Liabilities of Shri./Smt. \_\_\_\_\_**  
**EPF No \_\_\_\_\_**

We are furnishing below the Particulars of Outstanding Liabilities of Shri / Smt  
 \_\_\_\_\_ Last Designation \_\_\_\_\_  
 EPF No \_\_\_\_\_ Retired / died on \_\_\_\_\_:

S No	Particulars of Outstanding Loan	Account No	Balance
1	House Building Loan		
2	Housing Loan (Commercial Scheme)		
3	Staff Over Draft		
4	Festival Advance		
5	Education Loan		
6	Conveyance Loan		
7	Others, if any (Mention details)		
	<b>TOTAL LOAN BALANCE</b>		

Yours Faithfully,

Branch Manager (with seal)

\_\_\_\_\_ Branch

**Note: Please submit this certificate preferably after closure of all staff loan accounts. If Housing Loan (Commercial Scheme) and / or Education Loan continue(s) in terms of sanction please furnish the status of the account(s) including compliance of all terms and conditions of sanction. Please provide "N I L" Certificate in case of no outstanding liability.**

