दामोदर घाटी निगमDAMODAR VALLEY CORPORATION केद्रीय लेखा विभागCENTRAL ACCOUNTS DEPARTMENT

पॅशन अनुभाग/Pension Section

डी वो सी टावर्स : वी आई पी रोडDVC TOWERS: VIP ROAD कोलकाता /KOLKATA-54.

| ਦ./No. | ψΨ/AP/ | | दिनांक/Dated : | |
|-----------|---|--------------------------------------|--|---------------|
| संवा/T | 0, | | | |
| | ****************** | | | |
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| | *************************************** | | | 7. |
| | 6 | | | |
| | ावषय :प | शनभागा का मृत्यु क कार | ण परिवार पॅशन की व्यवस्था । | |
| | Sub : Settteme | nt of Family Pension | on due to death of a Pensioner. | |
| | | | | |
| क्षोदय/मह | tee/Dear Madam/Sir, | | | |
| | | | | |
| | | | | |
| | R | | | रेबार पॅशन की |
| anima to | र् । चन-।।लाखाद । संस्ट्या आध्रक्षपक ह | | | |
| | the following particulars a | Ex. | eent of Family Pension in respect of Late | ************* |
| (1) | डीवीसी पेन-18 (फार्म दो प्रतियाँ | में) परी तरह से विधिवत भग गव | (फार्न संलग्निन) । DVC Pen-18 (form in dupli | |
| | compresed in all respects (| rorms enclosed). | | |
| (2) | आपके हस्तक्षर/बाएँ अगृहे केनिशा | न को विधियन् ऑपशान व साक्ष्याँव | आ तीन (3) प्रतियों । Three(3) copies of your Signs | sture Slins |
| | L. i.i., Guly arrested and idea | HITICO. | | |
| (3) | आपक फाटाग्राफ का विधिवन् साक्ष | ग्रीकत तथा अभिज्ञात चार प्रतियो । | Six(6) copies of photographs, duly attested and | identified |
| (4) | आपको विवरण पंजी, तीन अन्तर र | कों में विक्रीयन सामाजित्य और जार | से प्रतिविनिहर, जिसमें दर्शाया जाए । Yours Descriptive | |
| 1277 | separate sheets duly atteste | and identified by name s | त अत्याचान्त्रः, जसम दशाया जाए । Yours Descriptive | Rolls in 3 |
| | (i) जन्म तिथि | (ii) उच्चता | (iii) व्यक्तिगत पहचान शिह्न | |
| | Date of Birth | Height | Personal mark of identification | |
| | | | | |
| (5) | अविकारिक व्याणावन तथा नेपोनल | T Tremes (mail simfles) | | |
| | enclosed). | र असारवस्य (अग्रस संस्थानात) । | Non- marriage and Non- employment certific | ate (Form |
| | | वेक से आहरण किया जाता है, विव | रण्दिया नाए । PPO Book to be returned. If d | C |
| | Dank, octans may be given | | | |
| (7) | वैक माध्यम परिवार पैशन आहरण ह | । लिए विधिवत् भरे हुए (दो प्रतियों म | i) वैंक कामें (फार्म संलन्तित)। Bank Form (in dup) | icate)duly |
| | completed in all respects to | e drawat of family pension | from Bank (Forms enclosed) | |
| (9) | मृत्यु प्रमाणका की साक्ष्याकित प्रति । यस प्रमाणका करना प्रमाणका (अक्ट | Attested copy of Death (| ertificate. | |
| | Pension to children). | का वास्त्रार पश्च के मामले में) | Certificate in support of proof of age (in ca | sc Family |

(10) आएको, आपके पूर्ज, पूजियों से उनके रव. फिना के अनाहरित पैरान के उनके हिस्से के भूगतान हेतु विधिवत् सक्यांकित घोषणा पत्र, सक्यांकित घोषणा पत्र, विद ऐसा अपेक्षित हो । Declaration from your sons/ daughters for payment of their share of their Late

भक्ति Yours faithfully,

अनुनानक Enclosed : प्रवोधन /As above

IMPORTANT

fathers/mothers undrawn pension to you, if so desire, duly attested.

Following Information are URGENTLY required :-

- 1. PPO No .::
- 2. Date of Birth ::

(DD/MM/YYYY) Documents to be attached.)

- 3. Phone No. ::
- Xerox copy of Bank Pass Book containing Name, CBS A/c. No., Branch Code & Address
- 5. Recent Photograph of the Applicant 6 Copies.
- 6. Address of the Applicant with PIN.

लेखा अधिकारी: Accounts Officer



दामोदर घाटी निगम Damodar Valley Corporation

आवेदन प्रपत्र (पारिवारिक पेंशन योजना 1964) FORM OF APPLICATION (FAMILY PENSION SCHEME 1964)

| हार्यालय | ों / श्रीमती | | के परिवार के लिए | ए पारिवारिक पेंशन हेत् आवेद |
|----------|--|---------------------------|---------------------------|------------------------------------|
| pplicat | ion for a family pension for the family | of late Shri / Smt | B. W. 2002 ALVES | |
| | | | | |
| the of | fice / Department of | | | |
| | | | | |
| | ावेदक का नाम / Name of the Applican | | | |
| | ह / a) विधवा/विधुर/पूत्र/पुत्री/Widow/W | | | |
| | a/b) মূলক के বজ্ব/ৰক্ষা কা সমিপাৰৰ | | | |
| | तक कर्मचारी / पेंशनभोगी से संबंध | | | |
| | elationship to the deceased employee | | | |
| | वानिवृत्ति दिनांक यदि मृतक पेंजनभोगी था, | | | |
| | ate of retirement, if the deceased was | | | |
| | ह/a) कर्मचारी/पेशनभौगी की मृत्यु का वि | | 4 | |
| | व/b) पी. पी. ओ. सं. (यदि वे पेंशनभोग | | | |
| . H | तक के जीवित सम्बंधियों के नाम तथा आयु | / Names and age of su | rviving kindred of the o | deceased : |
| म सं० | तलाकशुदा पूत्री यदि कोई तथा | मृतक से संबंध | ईस्वी सन में जन्म तिथि | उम्र प्रमाणित् करनेवाले |
| il. No. | आविवार्रिता को शामिल करते हुए नाम Name (including unmarried and | Relationship with the | Date of Birth by | दस्ताचेज Documents in support o |
| | divorced daughter if any) | deceased | Christian era | proof of age |
| | + | | no. | |
| | | | | 2 |
| | | | | |
| | | | | |
| | | | | |
| | 2 | | 7 | |
| | | | | |
| स्या | ान का नाम जहाँ भुगतान अपेक्षित है / Na | me of place where pays | ment is desired | |
| | नेदक का पूरा पता / Full address of the | | | |
| | अन्य स्वीकार्य पेंशन स्रोत, यदि कोई / Sou | | | |
| | क / a) पी.पी. ओ. सं. /P.P.O. No | | | |
| | ग / c) स्थापना/Establishment | | | |
| | (बेंक / मनीअर्डर या अन्य का विवरण दें) | | | |
| 10 | यदि आवेदक विधवा /विधुर है, पति/पली | | | पेंगल की जानि |
| | are south teach trade of anythis | त्या पृत्यू का स्थाप का द | e and environ dura | नराय का साहा |
| | If the applicant is a widow / widower, t | he amount of service no | oneinn which cha / ho m | av he in receipt on the des |
| | of the husband / Wife | | | ay or arrecopt en me doo |
| संल | দৰ্ভ / Enclosures : | | | 200 |
| 1) | आवेदक के विधिवत साक्ष्यंकित दो नमूना | हस्ताक्षर (दो अलग पन्नों | में दिये जाएँ) | |
| | Two specimen signature of the applic | ant, duly attested (To b | e furnished in two sepa | rate sheets); |
| ii) | आवेदक के दो पासपोर्ट साईज फोटो, विशि | वित साध्यंकित | | |
| | Two copies of passport size photogra | | uly attested. | |
| iii) | आवेदक के बाएँ हाथ के अंगुठे और उंगति | | | |
| | Two slips each bearing left hand thur | | | allested : |
| | ind sigs each bearing left hand thur | no and imger impressio | in or the applicant, duly | anested; |

| | | वेवरण स्पीरा विधिवत् साध्या | | and and at anti-in | पहचान । पह्न (समय ६ ता |
|-------|--|---|---|--|--------------------------|
| | | री सुसपष्ट चिद्ध प्रतिचिद्धित व | | inht and (h) normani m | arka Marrian the board |
| | face etc. (S | Roll of the applicant, duly pecify a few conspicuous i प्रस्तुत किया जाए / To be f | marks not less than two, | | arks, a any on me nano |
| | | त्र अस्तुत । क्या जार / 10 be / व (मूल सहित दो साक्ष्यंकित) | "이번 내용하다 이 경험 보이면 하셨다면서 하다 나 나다. | र दर्शाते हर । प्रशासका स | ररपालिका प्राधिकारी अपन |
| | , 4 | र (मूल साकत दा ताक्याकत) स्त अथवा मान्यता प्राप्त विद्यात | | | |
| | | संबंध में प्रस्तुत की जाए जिन | | | o i fan gan on a |
| | | s) of age (in original with th | | 100 | children The certificate |
| | should be fr child is stud | s) or age (in original with the rom the Municipal Authority dying in such school. (This of whose date of birth are | or from the local Panchay information should be fu | rat or from the Head of a mished in respect of su | recognised school if the |
| 10. | ख | — की विधवा | / तिधूर / अवयस्क बच्चों वे | স্মিমাৰক | का विवरण |
| | Descriptive Ro | | | | |
| | guardian of the | minor child of late | | | |
| | i) जन्म तिथि (ई | (स्वी सन में) / Date of Birt | h (by Christian era). | | ¥00 |
| | ii) उच्चता / Hei | ight | | 15.0 | |
| | iii) हाथ या चेहरे | पर पड़चान चिह्न बदि कोई | Personal marks if any, of | on hand or face. | Kar T |
| | | अंगूठे की छाप / Left hand t | | | |
| _ | ক নিন্তা | अनामिका | मध्यमा | तर्जंगी | अंगुठा |
| 1 | Small Finger | Ring Finger | Middle Finger | Index Finger | Thumb |
| T | | - | | | : - |
| 1 | | A 200 MARCH | teration to the | and the second second of | nout in the |
| | | L T 125 A. | gendala tetan | | |
| L | | | | | |
| 11. | हरताक्षर या कार्ण | अंगूठे की छाप (नाम हस्ताक्ष | र करने की साधरता के अभा | ब में। चार लंदाी - | *, > 21 |
| | | thumb impression (in the | | | |
| are r | | to sign their names) | 14.304275 | | 47.14 |
| | | | | | -1 1 |
| 12. | | साध्यंकित / Attested by : | V- 1 | | |
| | नाम | 7 / Name | पूरा पता / Full A | ddress | हस्ताक्षर/ Signature |
| | | | | | |
| | 8 | | | | |
| | 0 | | | | |
| | i) | | | | |
| 13. | | es: | | | |
| 13. | i) ———————————————————————————————————— | es: | 1 1 1 1 | | |
| 13. | साधी / Witness | es: | पूरा पता / Full Ar | ddress | इस्ताक्षर/ Signature |
| 13. | साधी / Witness | | पूरा पता / Full Ar | ddress | इस्ताक्षर/ Signature |
| 13. | साधी / Witness | | पूरा पता / Full Ad | ddress | इस्ताकर/ Signature |
| 13. | साधी / Witness | | पूरा पता / Full A | ddress | इस्ताकर/ Signature |

निवासी हो उस शहर, गाँव या परगना के प्रतिष्ठित व्यक्ति द्वारा साक्ष्यंकित होना भाहिए।

The descriptive roll (column 10) and signature or left hand thumb and finger impressions accompanying application for family pension should be in duplicate (in two separate sheets) and attested by two gazetted officers/ DVC officers or persons of respectability in the town, village or Pargana in which the applicant resides.

 वो राजपत्रित सरकारी संबकों या आवेदक के निवास के शहर, गाँव या परगना के दो या अधिक प्रतिष्ठित व्यक्तियों द्वारा साक्ष्यंकन किया जाना पाहिए।

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

PART I
(Applicable for WIDOW/WIDOWER of the deceased employee/pensioner)

NON-MARRIAGE CERTIFICATE

| 1 | the widow /w | idower of | | |
|---|-------------------------------------|--|--|-------------|
| Late | | PPO No | | |
| ex | de | | lare that I am not re-marrie | |
| and undertake that I shall discontinu information to Pension Section, DV | e to draw pension fr | | | |
| Attested | | | Signature of applicant with date | |
| (C | | - | | |
| (Gazetted Govt. Servant/DVC G | NAME AND ADDRESS OF THE OWNER, WHEN | RTIFICATE | | |
| Certified that I have seen the | 40 0000 | | | |
| and that She/He is alive on (date) | - - | | | |
| | | | | |
| * 1 | | (Gazetted Govt. | Servant/DVC Group 'A' er | nolovee) |
| I undertake to submit the ab or continuation of my family pension | | nnually, i.e.on lat Jan | uary of each year, which is | |
| | | | (Signature of application with date | nt) |
| | PAR | TII | | |
| (Applicable for eligible fami | | | deceased employee/pension | ner) |
| | NON-MARRIAG | E CERTIFICATE | | |
| 7 | the Son/Daughter of | Date | PPO | No |
| ndertake to submit a six monthly cer hich is required for continuation of a Attested | mificate i.e. on !" Ja | nuary and 1st July ea | | rital statu |
| | 200 | | With date | |
| Comment Court Co | 1.8.1 amolesses | | | |
| Sazetted Govt. Servant/DVC Group | | RTIFICATE | | - |
| Certified that my earning is onth from employment in Govt., Pri I undertake to submit the ub entinuation of my family pension till Attested | vate sector, Self emp | ployment or any other ally i.e.on 1" Januar | r source during the past only y of each year which is re (Signature of applicant) | year. |
| | | | with date | |
| sazetted Govt. Servant/DVC Group | 'A' employee) | | | |
| | LIFE CERT | IFICATE | | |
| Certified that I have seen the | applicant Smt/Sri _ | | | |
| d that She/He is alive on (date) | | | | |
| | _ 66°08 | | and the same of th | |
| | 9 2 | (Gazetted Govt. S | ervant/DVC Group 'A' em | ployee) |
| I undertake to submit the abor continuation of my family pension | | | | quired |
| | | 4 . | (Signature of applicant |) |

घोषण/DECLARATION

| स्वर्गय | | | | | |
|---|------------------------|-------------------------|---------------------|-------------|-------|
| | के पुत्र/पृत्रियाँ एतद | द्धारा घोषणा करते है वि | ह मैं/हम/मेरे/हमारे | पिता को देव | सभी |
| शन/उपदान के दावे मेरी/हमारी माता/पिता | श्रीमती/श्री | | | | |
| · | | | | | |
| ons/daughters of Late | | | | | |
| | | | | | .00-5 |
| creby declare that I/We relinquish | h my/our claims over | all pension/Gratu | ity due to my/ | our father | in . |
| | | | | our father | in . |
| creby declare that I/We relinquist | | | | our father | in . |
| | | | | our father | in . |
| STANKE OF STANKS AND STANKS OF THE STANKS AND | | | | | _ |
| | | | | | _ |
| | it/Shri | | | | _ |
| wour of my/our mother/father Sm | nt/Shri | | | | _ |
| wour of my/our mother/father Sm | 1. 2. | | | | _ |
| | 1. 2. | | | | |

विवरणी पंजी/ Descriptive roll

| 1 | की विवरणी पंजी | |
|---------|--|----|
| | | |
| Descrip | ptive roll of | |
| | | |
| 2 1 | | |
| | | |
| (i) | जन्म रिथि (ईस्वी सन् में) | |
| | Date of birth (by Christian era) | K. |
| | | |
| | | |
| (ii) | उँचाई Height | |
| | пеци | |
| 7) | | |
| (iii) | (व्यक्ति पहचान चिह्न., — अगर कोई हाथ या चेहरे पर हो | 54 |
| 1, | (Personal marks, if any on hand or face | |

सक्यांकित : Attested by :

विवरणी पंजी/ Descriptive roll

| | | | | _ की विवरणी पंजी |
|-------|--|------|---|----------------------|
| Descr | iptive roll of | | | |
| | | | | |
| | | | | |
| | | | | |
| (i) | जन्म तिथि (ईस्वी सन् में) Date of birth (by Christian era) | | - | |
| | 100 | | | |
| | | | - | |
| (ii) | उँचाई Height | | - | |
| /IIIA | conflict manager from | | | |
| (iii) | (व्यक्ति पहचान चिहनः, अगर कोई हाथ या चेहरे पर हो (Personal marks, if any | | _ | |
| | on hand or face | | | |

संस्यांकित : Attested by :

DAMODAR VALLEY CORPORATION

Application for drawal of pension through Public Sector bank.

To The Accounts Officer (Pension), DVC, DVC Towers, VIP Road, Kolkata-700054

Subject: Drawal of Pension through Public Sector Bank.

Latest Passport size attested photograph of Pensioner, with/without spouse (as the case may be)

| SIL | | | - | |
|-----|----|------|---|--|
| | ۰. | . 11 | • | |

Lopt to draw my pension through Public Sector Bank approved by DVC and give at (2) below necessary particulars to enable you to make arrangements in this regard:

| 1) Particul | lars of Pensioner :- | |
|---|---|----------------------------------|
| a) | Name of Pensioner | |
| b) | P.P.O No | no |
| | | |
| 2) Particul | lars of Public Sector Bank (Opted to draw Pension in Future |) |
| a) | Name of the Bank | |
| b) | Branch where payment desired | Branch Code |
| c) | | |
| 3) Pensio | ner's Bank A/c No. to which pension is to be credit | |
| 4) Particul | lars of Public Sector Bank, drawing Pension at Present (| To be filled up if applicable) : |
| a) | Name of Bank and Branch : | |
| b) | Pensioner's S.B A/c No | |
| Place:- | | Yours faithfully, |
| Dated | | |
| | (Pensioners Specimen Signature to be attes | (Signature of Pensioner sted) |
| Note:- To | be submitted in duplicate. | |
| 000000000000000000000000000000000000000 | | |
| For use in | Central Accounts Office , Pension Section, DVC, Kolkata | 1 |
| | | |
| Forwarded | to the Manager | |
| A | (Link Branches of | of PSB approved by DVC) |
| PPO No | of Shrif Smt | |
| | is sent herewith duly completed for arranging pension payme | ent as detailed below :- |
| Name | of Bank Branch | Code |
| Donnier er | til orte | |

It may kindly be noted that DVC pension is to be paid strictly as per the respective bill sent from this end in respect of the pensioner(s)

DAMODAR VALLEY CORPORATION DVC TOWERS:: VIP ROAD KOLKATA-700054

Phone Nos. (033)2355-1184/2333-2431/2432/2439/2440

No.AO/Pen/Joint Account

Dated 20th September 2007

Dear Pensioners/Family Pensioners,

Following facilities, as extended by the Corporation, are given below for your kind information. You are requested to comply necessary formalities for availing such benefits/facilities.

1. Credit of Pension to a JOINT ACCOUNT operated by DVC Pensioner with

his/her Spouse:-

The Corporation, vide its OM No. GL/Admn/2003/4427 Dt 14th August 2007 is pleased to extend the facility for Pensioners to receive pension by getting it credited to Pensioners' Bank operated jointly with their spouses.

Existing pensioners and retiring employees, desiring to get their pension credited to a joint account, are required to submit a Form of Application for joint Account (Printed below), duly filled in, to the paying Branch/Bank.

2. Pension Payment_through Bank.

The Corporation vide its OM No. GL/Admn./2003/4012 Dt. 17.05.07, has extended the facility of Monthly Pension Disbursement on the Last day of each month except for the month of March (payable on 1* working day of April) through all branches of following Banks:-

(1)United Bank of India (ii) U Co Bank (iii) Union Bank (iv) Canara Bank (v) Central Bank of India (vi) Corporation Bank (vii) Vijaya Bank (viii) Bank of India (ix)State Bank of India and (x) PNB (under finalisation)

The existing DVC Pensioners may exercise option to change the "Place of Payment" according to their convenience. The "Form of Application" is printed overleaf, which may be submitted in duplicate to the above mentioned addressee.

(S.K.Chattopadhyay)
Addl Chief Accounts Officer (S A)

| Form for application for joint account | |
|---|---|
| To | |
| The Branch Manager | |
| (Bank) | 44 |
| Sub- Payment of pension under PPO | No |
| Cob. 1 dymon, or purious 110 | arrough you gain granten |
| Dear Sir/Madam, | |
| no which is operated jointly | in your branch by me and my spouse, Mr./Mrsin whose favour an eligibility for family pension exists in the Pension |
| Payment Order (PPO). | , |
| Valley Corporation (DVC) regarding operation of joint | e OM No.GL/Admn/2003/4427 dt 14th August 2007 of the Damodar account, which contains the following terms and conditions, er's bank account, the liability of the DVC /Bank ceases. No further |
| liability arises, even if the amount is wrongly drawn by the spo | |
| at the earliest and in any case within one month pension for crediting the same to the joint account any amount has been wrongly credited to the joint other account held by the pensioner/spouse eith | of a pensioner, his/her death shall be intimated to the bank and DVC of the demise, so that DVC does not continue to send the monthly bunt with the spouse after the death of the pensioner. If, however, intracoount, it shall be recoverable from the joint account and/or any ner individually or jointly. The legal heirs, successors, executors etc. |
| Payment of Arrears of Pensions(Nominati with pensioner's spouse. Thus, if there is an 'ac arrears mentioned in the Rules will be payable to | ant, which has been wrongly credited to the joint account, ion) Rules, 1983 would continue to be applicable to the joint account coepted nomination in accordance with Rule 5 and 6 of these Rules, to the nominee. Ty spouse too, in token of having accepted those terms and conditions, |
| has put his/her signature below. | ly special section in swell or having accepted those terms and conditions, |
| Signature of Pensioner | Signature of Spouse |
| Date | Signature of epicone |
| Full postal address with telephone no. | |
| | |
| | |

Copy to: The Accounts Officer, Pension Section, Damodar Valley Corporation, DVC Tower, V.I.P Road Kolkata-700054 for information and necessary action.

DAMODAR VALLEY CORPORATION

Application for drawal of pension through Public Sector bank.

To
The Accounts Officer (Pension).
DVC, DVC Towers, VIP Road,
Kolkata-700054 but they be seed they are an interest and the house.

Latest Passport size attested photograph of Pensioner, with without spouse (as the case may be)

| | | Subject : Drawal of Pension through Public Sector B | Bank, | spouse (as the case |
|--------|--------|--|-------------------|--|
| | | AND REPRESENTATION OF PRINTING AND MALES | 4.452 2.7 | may be) |
| | 10 | pt to draw my pension through Public Sector Bank ap | proved by Di | /C and give at (2) below |
| neces | sary | particulars to enable you to make arrangements in this | | and the s |
| 1) Pa | rticul | ars of Pensioner: | to the line | Committee of the Commit |
| | a) | Name of Pensioner | | |
| | b) | | | |
| 10-47 | 1,1 | 446.00 | | |
| 2) Pa | rticul | ars of Public Sector Bank (Opted to draw Pension in F | uture) | edan estan |
| 119 | a) | Name of the Bank | | |
| 100 | b) | Branch where payment desired | Bran | ch Code |
| | c) | Postal address of (b) above | .50 . | |
| | | 17 | | |
| 3) Po | ensio | ner's Bank A/c No. to which pension is to be | -1 | |
| | | 1994 1 1 1 1 2 | | |
| 4) Pa | rticul | lars of Public Sector Bank, drawing Pension at Pres | ent (To be f | illed up if applicable); |
| | | . V | | |
| | e) | Name of Bank and Branch : | | |
| | b) | Pensioner's S.B A/c No | | |
| Place | | | ellario cara | Yours faithfully, |
| . 1000 | * | * 4 | 1 | round running, |
| Dated | l | | | |
| | | (Pensioners Specimen Signature to be | | ignature of Pensioner |
| | | | | 0.50 |
| Note: | · To | be submitted in duplicate. | and the second | 7 G 7 Jiles |
| | | | | 18/2-5-1 5 7 |
| | - | | | |
| For u | se in | Central Accounts Office , Pension Section, DVC, Ke | olkata. | 7.0 |
| | | | NO. 10 | 137年,自己的第三人 |
| | | The second of th | A SHIP TO SECUL | to the second of |
| Forwa | irded | to the Manager | | |
| | | | ches of PSB a | ipproved by DVC) |
| PPO | No | of Shrif Smt | | |
| | | is sent herewith duly completed for arranging pension | payment as d | ctailed below :- |
| | | ments and map made accome and the | mar i de de est | (A) 7 (A) (C) (A) (A) (A) |
| | lame | of Bank Branch | remove mengani, k | Code |
| | | 9 ₄ dia | with Assistant | |
| Pensi | on pa | id upto due w.e.f. | | |

It may kindly be noted that DVC pension is to be paid strictly as per the respective bill sent from this end in respect of the pensioner(s)

Authorized Signatory (with Seal) DVC Pension Section Kolkata.

DAMODAR VALLEY CORPORATION DVC TOWERS:: VIP ROAD KOLKATA-700054

Phone Nos. (033)2355-1184/2333-2431/2432/2439/2440

No.AO/Pen/Joint Account.

Dated 20th September 2007

Dear Pensioners/Family Pensioners,

Following facilities, as extended by the Corporation, are given below for your kind information. You are requested to comply necessary formalities for availing such benefits/facilities.

1. Credit of Pension to a JOINT ACCOUNT operated by DVC Pensioner with

his/her Spouse:-

The Corporation, vide its OM No. GL/Admn/2003/4427 Dt 14th August 2007 is pleased to extend the facility for Pensioners to receive pension by getting it credited to Pensioners' Bank operated jointly with their spouses.

Existing pensioners and retiring employees, desiring to get their pension credited to a joint account, are required to submit a Form of Application for joint Account (Printed below), duly filled in, to the paying Branch/Bank.

2. Pension Payment through Bank.

The Corporation vide its OM No. GL/Admn./2003/4012 Dt. 17.05.07, has extended the facility of Monthly Pension Disbursement on the Last day of each month except for the month of March (payable on 1" working day of April) through all branches of following Banks:-

(1)United Bank of India (ii) U Co Bank (iii) Union Bank (iv) Canara Bank (v) Central Bank of India (vi) Corporation Bank (vii) Vijaya Bank (viii) Bank of India (ix)State Bank of India and (x) PNB (under finalisation)

The existing DVC Pensioners may exercise option to change the "Place of Payment" according to their convenience. The "Form of Application" is printed overleaf, which may be submitted in duplicate to the above mentioned addressee.

(S.K.Chattopadhyay)
Addl Chief Accounts Officer (S.A.)

Yours Faithfully.

| Form for application for joint account | |
|--|---|
| То | |
| The Branch Manager | |
| (Bank) | |
| (Branch and | |
| Sub: Payment of pension under PP | O No through your bank branch. |
| Dear Sir/Madam, | |
| I wish to receive my pension under PPO No | by getting it credited to the saving/current bank account |
| | ly in your branch by me and my spouse, Mr./Mrs |
| | in whose favour an eligibility for family pension exists in the Pension |
| Payment Order (PPO). | |
| I have read and understood the contents of | the OM No.GL/Admn/2003/4427 dt 14th August 2007 of the Damoda |
| Valley Corporation (DVC) regarding operation of join | at account, which contains the following terms and conditions |
| Once pension has been credited to a pension | oner's bank account, the liability of the DVC /Bank ceases. No further |
| liability arises, even if the amount is wrongly drawn by the s | |
| | fe of a pensioner, his/her death shall be intimated to the bank and DV(|
| | ith of the demise, so that DVC does not continue to send the month? |
| | count with the spouse after the death of the pensioner. If, however |
| any amount has been wrongly credited to the | joint account, it shall be recoverable from the joint account and/or an |
| other account held by the pensioner/spouse of | ither individually or jointly. The legal heirs, successors, executors etc |
| shall also be liable to refund any am | ount, which has been wrongly credited to the joint account |
| Payment of Arrears of Pensions (Nomin | ation) Rules, 1983 would continue to be applicable to the joint account |
| | accepted nomination' in accordance with Rule 5 and 6 of these Rules |
| arrears mentioned in the Rules will be payable | |
| | My spouse too, in token of having accepted those terms and conditions |
| has put his/her signature below. | |
| Signature of Pensioner | Signature of Spouse |
| Date | |
| Full postal address with telephone no. | |

Copy to: - The Accounts Officer, Pension Section, Damodar Valley Corporation, DVC Tower, V.I.P Read, Kelkata-700054 for information and necessary action.

नमूना हस्ताक्षर/बाँए अंगूठे की छाप Specimen Signature/III

1)

Z)

3)

Attested ---

नमूना हस्ताक्षर/बाँए अंगूठे की छाप Specimen Signature/LTS

| क्षी/श्रीमती | ********** | | | | |
|---------------|------------|----|-------|---------|--|
| | 0.7 | 36 | 93.93 | (a) (b) | |
| of Shri / Smt | | | | | |

1)

2)

3)

Attested — साक्यांकित—