

FORM 5

[See rules 59 (I) (c) & 61(1)]

[Also see rules 5 (2),12,13 (3),14 (I) and 15 (3) of Central Civil Services

(Commutation of Pension) Rules. 1981]

Particulars to be obtained by the Head of Office from the retiring Government servant eight months before the date of his retirement

1. Name :
2. (a) Permanent Account Number for Income Tax (PAN) :
(b) Aadhaar No., if available :
3. Specify a few marks of identification, not less than two, if possible -
(i)
(ii)
4. Height –
5. Address after retirement/ permanent address for future correspondence :
6. Bank Account No. to which pension is to be credited:
7. (Joint account, either or survivor, with the spouse)
(In case the Head of Office is satisfied that it is not possible for the retiring Government servant to open a joint account for reasons beyond his/her control, this requirement may be relaxed).
8. Name of the Branch of Bank/Treasury through which pension is to be drawn -
(a) BSR code of the branch
(b) IFSC code of the branch
(c) Treasury :
9. Indicate whether family pension is also admissible from any other source - Military or State Government and/or a Public Sector Undertaking/Autonomous body/Local Fund under the Central or a State Government :
10. I desire to commute 40 % (up to 40%) of my superannuation pension in accordance with the provisions of the Central Civil Services (Commutation of Pension) Rules, 1981.

I am aware that future good conduct of the pensioner/family pensioner shall be an implied condition for every grant of pension/family pension and its continuance.

Enclosures as per check-list are enclosed.

Place: _____ Signature : _____
Date: _____ Ministry/Department/Office : _____
Mobile No. : _____
Email ID : _____

Note I: Commutation of pension is optional. Item 9 may be struck off if the retiring Government servant does not desire to commute a percentage of pension.

Note 2: A separate application for commutation of superannuation pension in Form I-A of Central Civil Services (Commutation of Pension) Rules, 1981 is required to be submitted in case the retiring Government servant desires to apply for Commutation of Pension after submission of this form but three months before retirement.

Note 3: It is in the interest of the Government servant to provide E-mail ID and Mobile number, which facilitates future correspondence.

FORM 1-A
FORM OF APPLICATION FOR COMMUTATION OF A PERCENTAGE OF
SUPERANNUATION PENSION WITHOUT MEDICAL EXAMINATION WHEN APPLICANT
DESIRES THAT THE PAYMENT OF THE COMMUTED VALUE OF PENSION SHOULD BE
AUTHORISED THROUGH THE PENSION PAYMENT ORDER

[see Rules 5(2), 12, 13 (30), 14 (i) and 15 (3)]

(To be submitted in duplicate at least three months before the date of retirement)

PART I

To

The Deputy Secretary to the Government of Meghalaya,
Personnel & Administrative Reforms (A) Department,
Shillong.

(Designation and full address of the Head of Office)

Sub :- Commutation of pension without Medical examination.

Sir,

I desire to commute a percentage of my pension as accordance with the provisions of the Central Civil Service (Commutation of Pension) Rules, 1981. The necessary particulars are furnished below –

The necessary particulars are furnished below:-

1. Name (in Block letters) :
2. Father's name (also husband's name :
In the case of a female Government).
3. Designation :
4. Name of Office/Department in which :
Employed.
5. Date of birth (by Christian era) :
6. Date of retirement on superannuation or :
on the expiry of extension in service
granted under FR 56 (d)
7. Percentage of superannuation pension :
Proposed to be commuted (The applicant
Should indicate the percentage of the
Amount of monthly pension subject
To be maximum of forty percent thereof
which he/she desires to commute and
not the amount in Rupees)
8. Disbursing authority from which :
Pension is to be drawn after retirement
(score out which is not applicable)
 - (a) Treasury/Sub-Treasury (name and :
Complete address of the Treasury/
Sub-Treasury to be indicated)
 - (b) (i) Branch of the nominated :
nationalized bank with complete
postal address

(ii) Bank Account No. to which :
monthly pension is being credited
each month
 - (c) Account Office of the Ministry/ :
Department/ Office

Signature
Present Postal Address

Postal Address after
Retirement:

Place :

Date :

Footnote: 1. The applicant should indicate the percentage of the amount of monthly pension (Subject to a maximum of forty percent thereof) which he/she desires to commute and not the amount in rupees.

2. Score out which is not applicable.

PART II
(ACKNOWLEDGEMENT)

Received from _____
application in Part I of Form 1-A for commutation of percentage of pension without medical
examination.

Place :

Date :

Signature
Head of Office

Note:- If the application has been received by the Head of Office before the expiry of date of retirement on superannuation, this acknowledgement should be detached from the Form and handed over to the applicant. If the form has been received by post, it has to be acknowledged on the same day and the acknowledgement sent under registered cover of the applicant. In case it is received after the specified date, it should be accepted only if it has been put into the post on or before that date subject to the production of evidence that effect by the applicant.

PART III

1. Forwarded to Accounts Office.

(here indicate the address and designation) _____ with the remarks that –

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

2. The pension papers of the applicant completed in all respects were forwarded under this Ministry/Department/ Office letter No. _____ dated _____. It is requested that the payment of commuted value of pension may be authorized through the Pension Payment Order which may be issued one month before the retirement of the applicant.

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

4. The commuted value of pension is debit to Head of Account _____.

Place :

Date :

Signature
Head of Office