

**Form to be submitted by Retiring official one month before
the date of his retirement**

Name:-

Code No:-

Date of Birth:-

Religion:-

Permanent Address:-
.....
.....
.....

Present Address:-
.....
.....
.....

**Address after retirement (any subsequent change of address should be notified to
the head of office):-**
.....
.....
.....

Present / Last place of appointment

Designation at the time of retirement:-

Date of beginning of appointment:-

Date of retirement:-

**Name of the B/U through which
Pension is to be drawn with a/c No:**

PAN No:

Signature

Name:-

Tel. / Mob. No:-

E-mail Id:

DETAILS OF FAMILY**Name of the Employee:-****Designation:-****Date of Birth:-****Date of Appointment:-****Details of the members of my family as on -----**

S.No	Name of the family member	Relationship	D.O.B

Signature

Address:

Contact No:

Dated:-

**Application for Commutation of Pension without Medical Examination
(to be submitted within one year from the date of retirement)**

To

The Executive Manager,
Terminal benefits Department
The Jammu & Kashmir Bank Ltd
Corporate Headquarters, Srinagar.

SPACE FOR AFFIXING
ATTESTED PASSPORT
SIZE JOINT
PHOTOGRAPH WITH
SPOUSE

Dear Sir,

I retire / will retire from the Bank's service with effect from and have opted for Bank's Pension Scheme. I desire to commute a fraction of my pension in accordance with the J&K Bank (Employees') Pension Regulations, 1995.

The necessary particulars are furnished below :

1. Name in full (in block letters):-
2. Designation at the time of retirement:
3. Name of Office/Department from which retired:
4. Date of Birth (as per Bank's Service Record):-
5. Date of Retirement:-
6. Class of Pension:-
7. Fraction of Pension proposed to be commuted
not exceeding 1/3rd thereof:-
8. Address after Retirement
(any subsequent change of address should
be notified to T.B.D)
9. Name of the Branch Unit through
which pension is to be drawn

(Signature)

Place:

Name :

Dated:

Address:

.....

.....

LETTER OF UNDERTAKING

To

The Trustees,

The Jammu & Kashmir Bank Employees Pension Fund Trust

Corporate Headquarters, M.A.Road, Srinagar.

Dear Sir,

Payment of Pension/ Family Pension (PPO No. _____ through your office)

In consideration of your bank having agreed at my request to make payment of Pension/Family Pension due to me every month along with the arrears of pension/ Commutation amount to which I am entitled, I the undersigned agree and undertake to refund or make good any amount to which I am not entitled or pay any amount which may be credited either by mistake or for want of any information to my account in excess of the amount to which I am or would be entitled.

I further, hereby undertake and agree to bind myself and my heirs, successors, executors and administrators to indemnify the bank from and against any loss suffered or incurred by the bank in so crediting my Pension/ Family Pension to my account under the J & K Bank Employees Pension Regulation Act, 1995 and to forthwith pay the same to the bank and also irrevocably authorize the bank to recover the amount due, by debit to my said account or any other account/deposits belonging to me in the possession of bank.

This declaration is made by me today the day of at Srinagar.

Witnesses:-

Signature

1. Name

Date

R/O

2.

.....

.....

Yours faithfully,

Signature

Name.....

Code No.....

The Trustees,
The Jammu & Kashmir Bank Employees Pension Fund Trust
Corporate Headquarters, M.A.Road, Srinagar.

Subject: - Authority Letter

Dear Sir,

Having already exercised my option for Bank’s Pension Scheme, I hereby authorise you to calculate the pension dues under rules.

Further, it is requested that after calculation of my pension dues and effecting recovery if any, my pension dues may be transferred to my nearest Bank’s Branch Office at _____ to enable me to receive my monthly pension from the said branch by credit to my account No. _____ with them.

Yours faithfully

(A)
.....
Attested Signature of
Mr.....

Signature
Name
Code No.....
Post held

Branch Head

Note: Retired Workmen/ Sub-Staff may get their signatures attested by any officer in service with stamp at Mark (A)

Specimen letter of undertaking by the Pensioner.

To
The Branch Manager,
The Jammu & Kashmir Bank Ltd,
 _____(Branch & Address)

Dear Sir,

Payment of Pension (PPO No. _____ through your office)

In consideration of your bank having agreed at my request to make payment of Pension due to me every month by credit to my account with you, I, the undersigned agree and undertake to refund or make good any amount to which I am not entitled or pay the amount which may be credited by mistake or for want of any information to my account in excess of the amount to which I am or would be entitled. I further, hereby undertake and agree to bind myself and my heirs, successors, executors and administrators to indemnify the bank from and against any loss suffered or incurred by the bank in so crediting my Pension to my account under the J & K Bank Employees Pension Regulation Act, 1995 and to forthwith pay the same to the bank and also irrevocably authorize the bank to recover the amount due, by debit to my said account or any other account/ deposits belonging to me in the possession of bank.

I hereby declare to the best of my knowledge that

I. I was not suspended any time during my entire service of the bank.

I was under suspension from _____(date) to _____

I was under suspension approximately for _____ during my entire service.

II. I was not on leave without pay during my entire service in the bank.

I was on leave without pay for _____(month) during my entire service.

III. I was not charge sheeted during my entire service in the bank.

I was charge sheeted as under and I was punished as per the details given below:-

Date of C/S

Order of the disciplinary / review appellate authority

IV. No judicial proceedings are pending against me.

The following judicial proceedings are pending against me: -

Details of pending judicial proceedings

Date on which Initiated	Reference No. (if any)	Reasons	Present Pension
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I also agree that in case any of the above information as furnished by me happen to be untrue then the bank can take such actions as it deems fit including recovering the amount paid to me on account of the above declaration which subsequently turns to be untrue.

Yours faithfully,

Signature

Name

PPO No.

Note : Strike out the inapplicable.
(To be rited on stamp paper as applicable &sworn before competent authority)

To
The Trustees
J & K Bank Employees Pension Fund Trust

Dear Sir,

In consideration of your agreeing to grant pension including the arrears and commutation thereof to me under the J & K Bank (Employees) Pension regulations,1995, at my request without obtaining the necessary clarifications under the Income Tax Rules,

I the undersigned, do hereby unconditionally and irrevocably agree and undertake as follows:

- I. You shall be entitled to and duly authorized to recover from the monthly pension including the arrears thereof payable to me under the aforesaid pension regulations any amount of income tax assessed and/or demanded by the income-tax authority from time to time till the said pension is payable to me.
- II. In the event if authority/ies directs you to recover any tax shortfall on tax as assessed by IT authority on my pension amount / commutation of pension, you shall be entitled to and duly authorized to recover such shortfall from the monthly pension/s payable to me without any further reference and without prejudice to your rights to recover it in any other manner.
- III. To indemnify and agree at all times to keep you indemnified from and against all claims that may be preferred against you and against all actions, proceedings, claim and demand which may be brought or made against you by any person or persons whosoever in respect of the said pension including the arrears thereof or any portion thereof and against all losses, damages, coats, charges and expenses that you may incur or pay in consequence of your paying the said pension including the arrears thereof to me or otherwise whosoever.

Yours faithfully

Signature
Name :

Non-Employment / Re-Employment Certificate.

(to be given by Pensioner who retired as Officer, once a year in November, for a period of two years from retirement).

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

OR

I declare that I have accepted commercial employment in India after obtaining previous sanction of the Bank and none of the conditions, if any attached.

OR

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

Note: As one time measure all those officers who retired after 01.01.86 till now, should give this declaration before drawing Pension.

Signature

Name of the pensioner.....

Code No.

Place:

Date:

DECLARATION

I _____

S/O: _____

R/O: _____ do hereby solemnly affirm and make the following declaration:

1. That I am working in J & K Bank as _____ and going to attain the age of superannuation on _____.
2. That after attaining the age of superannuation I am entitled to terminal benefits, which include gratuity and pension.
3. That I have drawn following credit facilities from the bank during my service career and are still outstanding:
 - a. _____
 - b. _____
 - c. _____

OR

4. That I hereby state and declare I do not owe anything to the bank as on date and there is nothing outstanding against me in the books of J & K Bank Ltd.
5. That in case my statement is found to be incorrect and any amount is shown to be outstanding against me in the books of the bank, then I shall be responsible for the consequences of making false statement on oath and legally bound to pay the outstanding amount/s together with interest thereon on ruling rate. I authorize the bank to recover such sums from my terminal benefits and pension.
6. That I shall pay the bank the amount/s as aforementioned with interest without any murmur and without having recourse to any legal action.
7. That I am submitting this declaration to the bank out of free will and consent and without any coercion or undue influence having been practiced on me by any quarter whatsoever.

Executant

Witness:

1.
 Signature _____
 Name: _____
 S/O: _____
 R/O: _____

2.
 Signature _____
 Name: _____
 S/O: _____
 R/O: _____

(to be printed on stamp paper as applicable & sworn before competent authority)