प्रपन्न-चार अर्जाचा नमुना (सुधारित कुटुंब निवृत्ती वेतन योजना १९६५)

या कार्यालयामधील-खात्यामधील के. श्री/श्र	थ्रीमतो	
यांच्या कुटुंबाचा; कुटुंब निवृत्ती-वेतनासाठी अर्ज.	The state of the s	
(१) अर्जदाराचे नांव :		
(आडनांव प्रथम देऊन ठळक अक्षर	ਸ਼ਹੀ <u>ਅੰ</u> ਨਿਆਨ ਨੂੰ ਜ਼ਿਲ੍ਹਾ ਸੰਤ੍ਰੇ	
(२) मयत महानगरपालिका कर्मचारी-निवृत्ती वेतनधारक यांच्याशी नाते		
(३) विवाहाचा दिनांक		······
(४) मयत कर्मचाऱ्याच्या हयात असलेल्या नातलगांची नांवे आणि वय		
नांव	जन्मतारीख (इसवीसना प्रमाणे)	
विधवा-विधूर		
मुलगा (१)		
(3)		
(३)		
अविवाहित		
मुलगी (१)		
(5)		
(३)		
	201 1 A B B	•
(4) 南.		
पालक श्री-श्रीमती	यांचा नामील यांचा नामील	लाच
(अ) जन्म तारीख (इसवी सनाप्रमाणे)		
(क) हातावर किंवा चेहऱ्यावर असल्यास वैयक्तिक खूणा	(এ) কথা	
The first of the control of the cont	In the second second	
(ड) डाव्या हाताचा अंगठा आणि बोटांचे ठसे		
करांगुली अनामिका मध्यमा ^{करा}	तर्जनी अंगठा	
अर्जदाराचा संपूर्ण पत्ता	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7511
साक्षीदार	y to yt	
(8)		
(5)	3-1	
	अर्जदाराची सही किंवा डाळ	ग
	हाताच्या अंगठ्याचा ठसा	

टीप : निवृत्ती वैतनाकरिता पाठवावयाच्या अर्जासोबत द्यावयाचा (स्तंभ ५) तपशील आणि सही किंवा डाव्या हाताचा अंगठा आणि बोटांचे ठसे हे (दोन स्वतंत्र तक्त्यामध्ये) दान प्रतींमध्ये पाठविले पाहिजेत व दोन राजपित्रत अधिकारी किंवा ज्या शहरांत, खेड्यात व परगण्यांमध्ये अर्जदार रहात असेल त्यामधील जवाबदार व्यक्ती यांनी त्या प्रमाणीत केल्या असल्या पाहिजेत.

२२-१०-१९७४-च्या क्रमांकं एम्डीडी-८६६१ या महानगरपालिका आयुक्तांच्या आदेशानुसार डॉक्टर, ॲडव्होकेट किंवा नगरसेवक यांनी जर वरील गोष्टी प्रमाणीत केल्या असतील तर त्याही स्वीकारण्यात याव्यात.

	कायालयान भरावयाचा माहिता	
(१)	महानगरपालिका कर्मचाऱ्याचे नांव	
(२)	विडलांचे नांव (किंवा विवाहित महिला कर्मचाऱ्याच्या बाबतीत पतिचे नांव)	*>
(3)	पदनाम	. 3 ₆ °
(8)	जन्मतारीख इसवी सनाप्रमाणे (सेवा पुस्तकांत नोंद झाल्याप्रमाणे)	
	नोकरीवर रुजू झाल्याचा दिनांक	
(ξ)	महानगरपालिकेच्या सेवेमध्ये प्रथमतः कायम झाल्याचा दिनांक	
	सेवा समाप्तीचा दिनांक	
	सेवेमधील रजेशिवाय अनुपस्थितीचा कालावधी	
	मागील वेळची रजा (अर्जित रजा-विनावेतनी रजा वगैरे)	
	निवृत्ती वेतन नियमावली (१९५३) च्या नियम ८८ मध्ये व्याख्या दिल्याप्रमाणे वेतन	
(११)	उपदान याकरिता वेतन	
(१२)) अनुज्ञेय असलेल्या कुटुंब निवृत्ती वेतनाची रक्कम	
(१३)) ज्या तारखेपासून कुटुंब निवृत्ती वेतन लागू होईल तो दिनांक	
	खाली सही करणाऱ्याचे कै. श्री/श्रीमती	यांच्यावरील तपशीलासंबंधी
समा	धान झालेले आहे. दरमहा रु कुटुंब निवृत्ती वेतन दिनांक	पासून पर्यंत
आपि	ण दिनांक पासून रु. आणि रु.	()
मृत्यॄ	-िन-सेवानिवृत्ती उपदान, ते देण्यासंबंधीच्या प्रमुख लेखापालांच्या प्रमाणपत्रासापेक्ष, देण्यास	गठी मी यान्वये शिफारस करतो.
	my some water yet and take	
	Personal State	खाते प्रमुख-विभाग अधिकारी
	निवृत्ती वेतन नियमावली, नियम ८८ यान्वये या प्रकरणामध्ये अनुज्ञेय असलेले कुटुं	ब निवृत्ती वेतन दरमहा रु.
दिन	ंक पासून पर्यंत आणि दरमहा रु.	दिनांक
पासृ	ून आणि मृत्यू-नि-सेवानिवृत्ती उपदान रु(रु.	अनुज्ञेय असल्याचे प्रमाणीत
करा	ण्यात येते.	MI WAY DELINE A
		प्रमुख लेखापाल यांच्याकरिता

मंजूर करणारा प्राधिकारी

प्रमुख लेखापाल यांनी शिफारस केल्याप्रमाणे मंजूर केले.

मृत्यू व वारस प्रमाणपत्र

(दंडाधिकारी, मामलेदार, महालकरी अथवा अन्य कोणीही मान्य शासकीय अधिका-याने अथवा पालिका आयुक्त यांनी प्राधिकार दिलेल्या महापालिका अधिका-याने सही करावयाचे).

				गावी दिनांक	
	माहितीप्रमाणे त्यांच्यामागे त्यांचे खाल			क्री क्रमांक	हे अज्ञान
्न त्यांचे अज्ञान	-पालक		····· हे आहेत.		
मांक	संपूर्ण नांव	वय	मयताशी असलेले नाते	चरितार्थासाठी मयतावर अवलंबून आहेत किंवा कसे	अभिप्राय असल्या
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ग			स्वाक्षरी "		

ANNEXURE-I

APPLICATION FOR DRAWAL OF PENSION THROUGH BANK (To be submitted in duplicate)

-	•				Silvery Control	Photo of Pensioner
Mui Mui	Chief nicipal nicipal	Accountant Corporation of Gre Old Building, 1 st flo 00 001	eater Mu oor,	ımbai,		
Sir,	•	•				· · · · · · · · · · · · · · · · · · ·
	l opt	t to draw my pensi	on throu	igh		
	me of	the Bank) and give ent in this regard.			articulars to enab	le you to mak
1.	Part	iculars of Pensione	er			
	(a)	Name in full	:	,		
	(b)	P.P.O. No.	:			
	(c)	Present Address	:			
				•	•	•
2	.Parti	culars of Bank	, v.			
	(a) (b)	Name of Bank Name of Bank Br where payment o pension is desired Branch Code No.	f	-		
	- 19 ; 5 - 27 ; 0 :	Pensioner's S.B.A At the Bank Brand			Yours í	aithfully,
Place Date	name ::	g Bank A/c must b of Pensioner & no	e single t a joint -	in the account.		ioner)
o:		hief Accountant, ay Municipal Corpo	ration.		Pensioner's Signatu	
	The Co	olumn No.2(c) and	3 speci	men signatur		
					* , , , , , , , , , , , , , , , , , , ,	

Agent / Manager of the Bank / Branch

MUNICIPAL CORPORATION OF GREATER MUMBAI
. No of
(FOR OFFICE USE ONLY)
Forwarded to the Manager / Agent The (Link Branch of P.S.)
pension payment book under Pension Registration / Family Pension Registration
Nobearing P.P.O. No
is sent herewith.
The pensioner has been paid pension for the period
the month of pension due from the month of
is to be arranged by the Bank.
Section:
Date:
For Chief Accountant Municipal Corporation of Greater Mumbai
(DECLARATION FROM FAMILY PENSIONER)
To,
The Chief Accountant Municipal Corporation of Greater Mumbal Mumbai 400 001.
I, the undersigned Shri / Smtwidow /
widower / daughter of Shri / Smtfamily
pensioner of Municipal Corporation of Greater Mumbai (P.R.No) hereby
declare that I have not re-married / married till this day. If I will re-marry / marry
subsequently I will not claim family pension from the date of remarriage /
marriage and I hereby undertake to inform the Chief Accountant, Municipal
Corporation of Greater Mumbai immediately.
Place:
Date :

Signature of Family Pensioner Left /Right Thumb Impression Family Pensioner.

FORM NO.E-5

Electronic Clearing Service (Credit Clearing)

Model Mandate Form
(Investor/Customer's option to receive payment through Credit Clearing Mechanism)
Name of the Scheme and the periodicity of payment

,	No			
1) Investor / Customer's Name		, '		,
		1.1.1		
		,		··. · ·
2) Particulars of Bank Account	,			
A) Name of the Bank:	· . '			<u>, · · · · </u>
B) Name of the Branch:				· · ·
	. ;	<u> </u>	1.1.1	
Address:		• • • •		•, ••••
		·.· .·	, ,	
Telephone No.		·		· .
	. ,		•	
C; 9-Digit Code number of the band	and branch	appearing on	the MICR che	:que
issued by the Bank:-		111		
D) Type of the account (S.B., Curre	nt or Cash	Credit) with o	ode.	
(10/11/13)		•		
E) Ledger and Ledger Folio Number	;'`		•	
or the first term of the first of the	• • • • •			
F) Account number (as appearing on	the cheque !	b>0k)		<u> </u>
(In lieu of the bank certificate t	to be obtain	red as under	please attach	a blank
cancelled cheque of pilotocopy of a	cheque or	front page	of your arving	g's band
passbook issued by your bank of veri	fication of the	he above part	iculars.)	
3) Date of Effect:	· · · ·			
I hereby declare that the particulars, or	ven above	are correct a	ind complete.	If the
transaction is delayed, or not effected	at all for re	casons of me	complete or a	ucoucci
information, I would not hold the user in	nstitution is	sponsible. I	have read the	pition
invitation letter and agree to discharge the	responsibil	"Ity expected	of me as a par	ticipant
under the scheme.				: ` `
alton allo solicitio.		, ,		
		• •	1.	
Date:	(Signature	of the Invest	or / Customei) :
Certified that the particulars	furnished a	bave are corr	oct an per our	record.
Commed that the particulars	,		•	•
		. /		
Danleta Ctamin		•	·	
Bank's Stamp	and a brane of the	a suthaciand	official of the	hank)
Date: (Sig	Ritatines of A	10 MILLIOTINGS	· OLLIOTHA OF CHE	
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MUNICIPAL CORPORATION OF GREATER MUMBAI
. No of
(FOR OFFICE USE ONLY)
Forwarded to the Manager / Agent The (Link Branch of P.S.)
pension payment book under Pension Registration / Family Pension Registration
Nobearing P.P.O. No
is sent herewith.
The pensioner has been paid pension for the period
the month of pension due from the month of
is to be arranged by the Bank.
Continue
Section:
Date:
For Chief Accountant Municipal Corporation of Greater Mumbai
(DECLARATION FROM FAMILY PENSIONER)
To,
The Chief Accountant Municipal Corporation of Greater Mumbai Mumbai 400 001.
I, the understaned Shri / Smt
I, the undersigned Shri / Smtwidow / widower / daughter of Shri / Smtfamily
pensioner of Municipal Corporation of Creater Municipal Corporatio
pensioner of Municipal Corporation of Greater Mumbai (P.R.No) hereby
declare that I have not re-married / married till this day. If I will re-marry / marry
subsequently I will not claim family pension from the date of remarriage /
marriage and I hereby undertake to inform the Chief Accountant, Municipal
Corporation of Greater Mumbai immediately.
Place :
Pate:

Signature of Family Pensioner Left /Right Thumb Impression Family Pensioner.

ANNEXURE-I

APPLICATION FOR DRAWAL OF PENSION THROUGH BANK (To be submitted in duplicate)

Photo of Pensioner To. The Chief Accountant Municipal Corporation of Greater Mumbal, Municipal Old Building, 1st floor, Mumbai 400 001 Sir. I opt to draw my pension through (Name of the Bank) and give below necessary particulars to enable you to make arrangement in this regard. 1. Particulars of Pensioner (a) Name in full (b) P.P.O. No. (c) Present Address: 2. Particulars of Bank (a) Name of Bank Name of Bank Branch (b) where payment of pension is desired. Branch Code No. (c) Pensioner's S.B.A/ç No. At the Bank Branch, Yours faithfully, Saving Bank A/c must be single in the name of Pensioner & not a joint account. (Pensioner) Place: Date: To: The Chief Accountant, Pensioner's specimen Bombay Municipal Corporation. Signature. The Column No.2(c) and 3 specimen signature.

Agent / Manager of the Bank / Branch

		Name:
		Address:
		Date :
To,		2 400 1
The Chief Accountant, Municipal Corporation of		
Greater Mumbai,	3, 100	*
Mumbai.	• • • • • • • • • • • • • • • • • • • •	
Sir,	and the second of the second o	
	· Recoveries towards Ba	ank/Society Municipal etc. dues to b
540		Pension/Gratuity Claim of
		·
	Shri/Smt	
		Department
I/We, the undersign	ned Shri/Smt	authorize you t
recover any amount, if ren	nained to be recovered i	n Bank/Society, Rent etc. Municipa
dues through the above P.	F./N.C.P.F./Pension/Far	nily Pension/Gratuity Claim amoun
payable to me/us.		
Attested by me.		
Attested by Me.		
		`
Signature		.Signature
		-
Designation	The state of the s	*
	•	

APPENDIX - IX

(Declaration Form under rule 26 & 31)

Whereas the	
(here state the authority sanctioning the pension/family	
pension/dealth-cum-retirement gratuity/arrears of pension	*
or gratuity etc.) has consented to grant me/us the sum of	
Rs a month as the amount of pension/family e	
pension/or the sum of Rs. as the amount of gra-	•
tuity/Death-cum-Retirement gratuity/arrears of pension of	
gratuity due to Shri/Smt	
(here give the name and designation	m
of the municipal servant), I/We hereby acknowledge that in	
accenting this amount, I/We fully understand that the Pensi	i.ort/
Family Pension/Gratuity/Death-cum-Retirement Gratuity arrea	ars
of pension of gratuity due to Shri/Smt.	,
as subject to revision as it	ţs'
being found to be in excess of that to which I am/ We are	
entitled under these rules, I/We further promise to repay a	my.
amount advanced to me/us in excess of that to which I/We	
nay be eventually found entitled.	
	•

Signature/s.

(Strike off which is not applicable).

Address

SSD.26042001;