

Annexure-I**FORM OF APPLICATION**

[Vide G.O.Ms.No.313, Finance (Pay Cell) Department, Dated: 25-10-2017]

To

Sir/Madam,

Sub: Application for revision of Pension / Family Pension notionally with effect from 1st January, 2016 and with monetary benefit from 1st October, 2017 - Request - Regarding.

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Kindly revise my pension / family pension in terms of para-5(2) of G.O.Ms.No.313, Finance (PC) Department, Dated: 25-10-2017.

Requisite particulars are given below:

1. Name of the Applicant :
(in **BLOCK** letters)
2. Postal Address :
(in **BLOCK** Letters)
(Duly furnish the District)
PIN Code
3. (a) Name of the Pensioner / Deceased :
Government employee (Pensioner)
in case of Family Pensioner.
(in **BLOCK** letters)
- (b) Relationship in case of Family :
Pensioner.
4. (a) Designation / Post held :
(Selection Grade / Special Grade, if
applicable prior to 31.5.2009)
- (b) Office / Department from which
retired.
5. (a) Date of Retirement :
- (b) Date of Death of Government
employee in case of Family
Pensioner.
6. **Pension Payment Order (PPO) :**
No.(Pensioners getting pension outside the
State shall give their respective No.)

[Copy of relevant pages containing pensioner / family pensioner details to be enclosed]

7. Scale of Pay/ Pay Band + G.P. at the :
time of retirement.
8. (a) Original Pension at the time of :
Retirement or Family Pension in
case of Death of Govt. employees
while in service.
- (b) Amount of pension commuted (if :
any)
- (c) Date from which it was commuted. :
9. Pension Disbursing Authority [i.e. in :
respect of Pilot Scheme - Name of the
PPO, Chennai / Treasury / STO and in respect
of PSB Scheme - Name of Bank, Branch
Address from which pension / family pension
is being drawn.]
10. Name of the Bank, Branch with :
Account No. to which the pension /
family pension is credited by the
Pension Disbursing Authority.
- (a) Name of the Bank.
- (b) Branch Name.
- (c) Account No. with IFSC Code.
11. Documentary evidence, if any, in :
support of the claim.

Place :

Signature of the Pensioner /
Family Pensioner

Date :

Name :

PPO No. 

Note: The requisite particulars shall be filled up by the applicant from the data available in the
Authorization for Pension copy approved by the Principal Accountant General (A&E),
Tamil Nadu, Chennai at the time of retirement / death.

[To be filled by the Pension Sanctioning Authority and sent to the concerned
Pension Disbursing Authority]

Particulars verified :

1. Level in the Pay Matrix :
corresponding to the pre-revised
pay scale / pay band and grade
pay from which the pensioner had
retired.
- (a) Minimum of the Pay (or the first :
cell) in the prescribed Level in
the Pay Matrix.
- (b) 50 percent of the minimum of :
the pay.
- (c) 30 percent of the minimum of :
the pay.

2. (a) Net Qualifying Service. :
- (b) Minimum required Qualifying Service for full pension at the time retirement.
3. Authorisation for Payment on or after 1-1-2016. :
- (a) Original Pension. : Rs.
- (b) Amount Commuted, if any and Date from which it was commuted. : Rs.
- (c) Reduced Pension. : Rs.
- (d) Additional Pension, if any. : Rs.
- (e) Enhanced Family Pension [50% of the Minimum of the Pay - Restricted to Original Pension] (if needed). : Rs.
- (f) Normal Family Pension. : Rs.
- (g) Additional Family Pension, if any. : Rs.

The revision of pension, family pension and additional pension shall take notional effect from 1-1-2016 or date of entitlement to pension / family pension / enhanced family pension / additional pension / family pension, whichever is later, and shall have monetary effect only from 1-10-2017.

**Signature of the
Pension Sanctioning Authority.**

Name:

Designation :

Office Seal :