

From :

To

The Accountant General, Assam
Maidam Gaon,
Beltola,
Guwahati - 781 028

(**Through the** _____)

Subject : Application for sanction of Pension/ Gratuity.

Sir,

I beg to say that I am to retire from service with effect from _____.
My date of birth being _____. I therefore, request that steps may kindly be taken with a view to pension and gratuity as admissible to me being sanctioned by the date of my retirement.
I desire to draw my pension from _____ Treasury from the date _____.

2. I hereby declare that I have neither applied for, nor received, any pension or gratuity in respect of any portion of the service qualifying for the pension and in respect of which pension or gratuity is claimed here in nor shall I submit an application and the orders which may be passed hereon.

3. I enclose herewith :

(i) FORM 1 - duly filled in.

(ii) FORM 1 A - duly filled in.

(iii) *Two slips containing two specimen signatures each duly attested by a Gazetted Officer.

*Two slips each bearing the left hand thumb and fingers impressions duly attested by a Gazetted Officer.

*Strike out which is not applicable

(iv) Two slips each showing particulars of height and personal identification mark duly attested by a Gazetted Officer.

(v) *Three copies of passport size joint photographs with wife duly attested by Head of Office.

*Three copies of passport size joint photographs with husband duly attested by Head of Office.

*Three copies of PP size photograph of mine duly attested by Head of Office.

*Strike out which is not applicable

My present address is:

Village/Town : _____

Street/Lane : _____

Police Station : _____

District : _____

State : _____ PIN :

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Countersignature
Head of Office

Signature : _____

Designation : _____

Department/Office : _____

Place : _____

Date : _____

FORM 1
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. Date of Birth : _____
 3. Date of Retirement : _____

4. Two * slips containing two specimen signatures each duly attested by a Gazetted Officer. : **Enclosed**
 5. Three copies of passport size joint photograph with wife/husband duly attested by Head of office (Photograph - of self only, in case the Government servant is un-married or a widow or a widower. : **Enclosed**
 6. Two ** slips each showing particulars of height and personal identification mark duly attested by a Gazetted Government servant. : **Enclosed**

7. Present Address :
 Village/Town : _____
 Street/Lane : _____
 Police Station : _____
 District : _____
 State : _____ PIN :

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8. Address after retirement :
 (any subsequent change of address should be notified to the Head of Office)
 Village/Town : _____
 Street/Lane : _____
 Police Station : _____
 District : _____
 State : _____ PIN :

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9. Details of the family members as in Form No. 1A

Sl. No.	Name of the members of the family (in CAPITAL letters)	Date of Birth	Relationship with the Applicant	Initials of the Head of Office	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

10. Name of the Treasury/Bank/Bank Branch through which pension is to be drawn :

 Countersignature
 Head of Office

Signature : _____
 Designation : _____
 Department/Office : _____

Place : _____
 Date : _____

Note :
 * Two slips each bearing the left hand thumb and fingers impressions duly attested may be furnished by a person who is not literate enough to sign his name. If such a Government servant on account of physical disability is unable to give left hand thumb and finger impression he may give thumb and finger impression of the right hand where a Government servant has lost both the hands he may give his toe impression. Impression should be duly attested by a Gazetted Government servant.
 ** Specify a few conspicuous marks, not less than two if possible.

FORM 1 A

Details of Family

1. Name of the Government Servant : _____

2. Designation : _____

3. Date of Birth : _____

4. Date of Appointment : _____

5. Details of family members as-on-date :-

Sl. No.	Name of the members of the family (in CAPITAL letters)	Date of Birth	Relationship with the Applicant	Initials of the Head of Office	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office any addition or alteration.

Countersignature
Head of Office

Signature : _____
Designation : _____
Department/Office : _____
Place : _____
Date : _____

Note : Family for this purpose means family as defined in Rule 143(1) of A.S.(P) Rules,1969

Enclosures to Form No. 1

Three copies of passport size joint photograph with wife/husband duly attested by Head of office (Photograph - of self only, in case the Government servant is un-married or a widow or a widower

**Enclose photographs as mentioned above inside an envelope
- staple the closed envelope with Form No. 1.**

Two * slips containing two specimen signatures each duly attested by a Gazetted Officer

----- Do not detach before submission -----

Slip No. 1 containing specimen signature of :-

Name : _____
Designation : _____
Department/Office : _____
Specimen Signatures :

1.	
----	--

2.	
----	--

Attested

(Signature with date)

Name : _____
Designation : _____
Office : _____
Office Seal :

----- Do not detach before submission -----

Slip No. 2 containing specimen signature of :-

Name : _____
Designation : _____
Department/Office : _____
Specimen Signatures :

1.	
----	--

2.	
----	--

Attested

(Signature with date)

Name : _____
Designation : _____
Office : _____
Office Seal :

Enclosures to Form No. 1

Two ** slips each showing particulars of height and personal identification mark
duly attested by a Gazetted Government servant

Slip No. 1 showing particulars of height and personal identification of :-

Name : _____
Designation : _____
Department/Office : _____
Height (in cms) :
Personal Identification :

Specify a few conspicuous marks, not less than two if possible

Attested

(Signature with date)

Name : _____
Designation : _____
Office : _____
Office Seal :

----- Do not detach before submission -----

Slip No. 2 showing particulars of height and personal identification of :-

Name : _____
Designation : _____
Department/Office : _____
Height (in cms) :
Personal Identification :

Specify a few conspicuous marks, not less than two if possible

Attested

(Signature with date)

Name : _____
Designation : _____
Office : _____
Office Seal :

Enclosures to Form No. 1

Note :

* Two slips each bearing the left hand thumb and fingers impressions duly attested may be furnished by a person who is not literate enough to sign his name. If such a Government servant on account of physical disability is unable to give left hand thumb and finger impression he may give thumb and finger impression of the right hand where a Government servant has lost both the hands he may give his toe impression. Impression should be duly attested by a Gazetted Government servant.

Slip No. 1 containing the left hand thumb and fingers impressions of :-

Name : _____

Designation : _____

Department/Office : _____

* Left Hand Thumb Impression	* Fingers impression

Attested

(Signature with date)

Name : _____

Designation : _____

Office : _____

Office Seal :

----- Do not detach before submission -----

Slip No. 2 containing the left hand thumb and fingers impressions of :-

Name : _____

Designation : _____

Department/Office : _____

* Left Hand Thumb Impression	* Fingers impression

Attested

(Signature with date)

Name : _____

Designation : _____

Office : _____

Office Seal :