

राजस्थान स्टेट इण्डस्ट्रियल डवलपमेन्ट एण्ड इन्वेस्टमेन्ट कॉर्पोरेशन लिमिटेड

(राजस्थान सरकार का उपक्रम) उद्योग भवन, तिलक मार्ग, सी—स्कीम, जयपुर—302 005 CIN - U13100RJ1969SGC001263

SET OF FAMILY PENSION FORMS पारिवारिक पेंशन प्रपन्नों का कुलक

1.	Name of Applicant	:	
	आवेदक का नाम	:	
2.	Name of the deceased employee/Pensioner	:	
	मृतक कर्मचारी / पेंशनर का का नाम	;	
3.	Date of Ending of Service of the deceased employee/Pensioner	, . : ,	
	मृतक कर्मचारी / पेंशनर की सेवा समाप्ति की दिनांक	•	
4.	Designation of the deceased employee/Pensioner	:	
	मृतक कर्मचारी / पेंशनर का	:	

आवेदन पत्र का प्रपत्र

(पारिबारिक पेंशन)

आवेदन विभाग.	स पत्र 	परिवार के पारि	वारिक पेंशन	हेतु स्व	र्गीय श्री	/श्रीमती		
1. कार	र्गालय	/विभाग						
2. प्रार्थ	र्ग का	नाम		•••••				
3. मृतव	के क	मेचारी / पेंशनर वे	ने साथ संबंध	T				
4. यदि	मृतव	क पेंशनर था तो	सेवानिवृति व	की दिनां	क			
5. कर्म	वारी /	/ पेशनर की मृत्यू	की दिनांक					
6. मृतव 7 आते	० क टिन ट	जीवित बच्चों के	नाम व उम्र					
7. जाप	411	मा पूरा पता			•••••			
						•••••		
8.		i Brita i ar						
क्र.स.	नाम	। (अंग्रेजी में)	जन्म वि	देनांक	सम्बन्ध		विवाहित/	अविवाहित
- N		g		4) (4)				
,				•				- 5,5
		F 1					,	. 14
1.	(अ)	भुगतान का स्था	ान राज इन्दे	स्थान स्टमेंट क	स्टेट इ जॅरपोरेश	इण्डस्ट्रिय न लिमिटे	ल डवलपर ड	नेंट एण्ड
2.	(ब)	बैंक खाता संख्य	ग व बैंक की	ो ब्रांच व	ज नाम ^र	जहां से १	भुगतान चाहा	ा गया है
						_		

परिशिष्ट

1.	निगम कर्मचारी का नाम	
2.	पिता का नाम/पति का नाम	
3.	अंतिम नियुक्ति का नाम	
	संस्थापन के नाम सहित	
4.	सेवा प्रारंभ करने की तिथि	
	THE PROPERTY OF THE PROPERTY O	
5.	सेवा समाप्ति की तिथि	
6.	मृत्यु से पूर्व निरन्तर योग्यांत्मक	
	सेवा अवधि	
7.	राजस्थान सेवा नियमों के	
	नियम 268 (सी) के अंतर्गत	
	परिभाषित वेतन	
8.	देय पारिवारिक पेंशन की राशि	
9.	पेंशन आरम्भ होने की तिथि	

10. बैंक, ब्राच का नाम			 	
			40	
				*
		*		
11. खाता संख्या				
II. GIUI VIGAI			 	
12. आई एफ एस सी कोड			 	
मैं निम्न हस्ताक्षरकर्ता स्व.श्री / श्रीमती			 	क
उपरोक्त दिये गये विवरणों से संतुष्ट	हाकर	रूपय	 	प्रातमाह
श्री / श्रीमती			-	A
ત્રા/ત્રામલા			 എ	ानयमानुसार
पारिवारिक पेंशन स्वीकृत करने का आदे	श देत	ा हूँ।		

पेंशन स्वीकृतकर्ता अधिकार के हस्ताक्षर एवं पद

[See Rules 95 (3) and 107 (2)]

Form of application for the grant of Family Pension on the death of an employee/pensioner

1.	Name of the applicant	
	(i) Widow/Widower	
	(ii) Guardian if the deceased person is survived by child or	children
2.	Name and age of surviving Widow/Widower and children of employee/pensioner	of the deceased
Serial No.	Name Relationship with the deceased person	Date of Birth by Christian era
1.		11
2.		
3.		
4.		
5.		
6.		
3.	Name and No. of the P.P.O. of the deceased pensioner	
4.	Date of death of the employee/pensioner	
5.	Head Office/Unit Office in which the deceased employ last	ee/pensioner served
6.	If the applicant is guardian, his date of birth and rela employee/pensioner	tionship with the deceased
6.A	If the applicant is a widow/widower the amount of service pensereceipt on the date of death of the husband/wife	
7.	Full address of the applicant	
8.	Pension Disbursing Authority (Incharge of Bill Section)	
9.	Enclosures:	
	(i) Details of Particulars Form 14A in triplicate	

	(11)	Certificate(s) of ag of birth of the children	e (in original with	h two attested	copies) showing the d	date
	(iii)	Death certificate				
	(iv)	Guardianship certific	ate in case of m	inor.		
Centra fund u		licate whether family State Government a Central or a State G			any other source Militan ing/autonomous body/	ry o loca
	11. Sig	nature of left hand the	umb-impression*	of the ap	plicant	
	12. Atte	ested by :				
		Name	Full Address		Signature	
		(i)	-	<i>y</i>	- g. a.a.	
		(ii)				
	13. Wit	nesses:				
		(i)				
		(ii)				

Note:- Attestation should be done by two Gazetted Employees/ Corporation officers not blow the rank of Assistant General Manager or two or more persons of respectability in the town, village or Pargana in which the applicantresides.

To be furnished in case the applicant is not literate enough to sign his name. In the case of re-marriage of the widow while applying for family pension on behalf of the minor child, the widow should furnish(i) the date of her re-marriage (ii) Detail of Bank a/c Name of Bank ,Branch SBa/c no., IFSC code (iii) her full address in the application for family pension. It is not necessary to furnish a fresh application nor the documents as they are already available with the pension papers on which family pension was originally admitted to her.

FORM 14 A

(Annexure to Form 14in triplicate)

FORM OF DETAILS OF PARTICULARS FOR FAMILY PENSION

1.	Name of the applicant:	
2.	Name of the deceased employee/Pensioner:	
3.	Relationship: widow/widower/ son/daughter/ guardian of minor:	
4.	Date of birth :	
5.	Height:	
6.	Signatures :	
	1	
	2	
	3	
	Left hand thumb and finger impressions in case not literate to sign:	Thumb Index Middle Ring Little
7.	Personal identification mark:	mack whale King Little
8.	Present Address :	
9. De	etail of the Bank a/c Name of Bank ,Branch SB a	/c No.IFSC code
	Attested photograph:	
	Attested photograph	
		Signature of the applicant.
		Attested by : Signature, Name and designation
Dated :		with seal of the attesting officer.
List of	enclosures:-	

- Three specimen signatures or left hand thumb and finger impressions of the claimant 1. or guardian duly attested.
- Three copies of passport size photographs of the claimant or guardian duly attested. 2.
- Three copies of descriptive roll of the claimant or guardian duly attested indicating 3. height and personal marks.

[See Rules 96 (1), 98 (1),(3) and (5) and 100 (1) and (5)]

Form for assessing and authorising the payment of family pension and death gratuity when an employee dies while in service.

PART I

Section I Name of the deceased employee..... 1. Father's name (and also husband's name in the 2. case of female employee) Date of Birth (by Christian era) 3. Date of death (by Christian era) 4. Religion 5. Office in which last employed 6. Appointment held last 7. (i) Substantive (ii) Officiating Date of beginning of service 8. (i) Date of ending of service (ii) 9. **Military Service** A. Period of service for which pension (i) or gratuity was sanctioned..... (ii) Amount and nature of any pension/gratuity received for the same B. Period of service for which no Years Months Days pension has been earned but which counts as service under Corporation 10. **Civil Service** A. Amount and nature of any pension/

Gratuity received for previous
Civil Service

Period of previous Civil Service

which counts as qualifying service under Rule......

B.

	Serv	nce under Governments									
	GOR,	ce rendered under GOI/ others state Governments ingfor pension:-									
	Name	of Government	Years	Months	Days						
12.	Servi	ce under Corporation			Days						
		e Rendered under	Years	Months	Days						
13.		rnment under which pyment	service has	been rende	red in	order	of				
14.	The d	ate on which intimation re or (A&M) / Unit Head	egarding the dea	th of employee	was rece	eived by	the				
15.	The d	The date on which action initiated to -									
	(i)	obtain claim or claims fi in the appropriate form and family pension as pr	rom the claiman	tv							
	(ii)	obtain the 'No demand the GAD Cell/Concerned provided inRule 101 (1);	certificate' from								
	(iii)	assess the Corporation dues pertaining to occup accommodation as prov 101 (2), and;	ation of Corpora	the							
	(iv)	assess the service and e for death gratuity and fan as provided in Rules (96) a	nily pension	fying							
16.	Wheth	ner nomination made for d	leath gratuity, if s	so, attach a cop	y						
17.	Lengt	h of service qualifying for o	death gratuity/per	nsion							
18.	Period	ds of non-qualifying service	9-								
	(i)	Interruption in service co	ndoned under		From		То				
	(ii)	Extraordinary leave not or gratuity	qualifying for								
	(iii)	Period of suspension tre	ated as non qual	lifying							
	(iv)	Any other service not tre	ated as qualifyin	g service							
		Total period of non quali	fying service			4	_				

pension contribution is to be paidby the employee [Explanation below Rule 88 and 81 (1)(b) (vii)] Name of Organisation Pay scale of From To the employee (a) (b) (a) (ii) Details of Pension Contribution realised. 20. Details of deposit of employer's share with interest of C.P.F. 21. Emoluments reckoning for death gratuity (see rule 45) (i) Substantive pay (officiating pay also to be reckoned other than appointment in leave Vacancyor additional charge) (ii) Personal pay 22. Amount of death gratuity (Calculation sheet) 23. Proposed Family Pension at Annexure II enhanced rate [if service rendered at the time of death is more than seven years as in Rule 62 (ii) (iii)] ordinary rates-[as in Rule 62(i)] (b) From To Period of tenability of Family Pension (ii) (a) enhanced rates (b) ordinary rates Persons to whom family pension is payable 24. Relationship with the deceased employee..... Full postal address

19.

(i)

Period of foreign service where

25.	Amount of Corporation dues recoverable out of gratuity							
	(i)	Rent for occupation of Corporation accommodation [See Rule 101]						
	(ii)	Amount of death Gratuity to be held over pending receipt of information from the Incharge of Bill Section/GAD Cell/Unit Head Concerned [See Rule 101 (i) (v)						
	(iii)	Dues referred to in Rule 101 (2) (Attach details in Annexure I)						
26.	Date or	n which claims received from the claimants						
27.	Name of	of guardian who will receive payment of gratuity and family pension in the case ors.						
28.	Pensio Section	n Disbursing Authority(Incharge of Bill						
Place			Signature of					
Dated t	ne		Advisor (A&M) / Unit Head					
		Section II						
	(A&M)/	of provisional family pension and gratuity to be Unit Head in accordance with Rule 99 provision fithe amount mentioned in item 22 of part I]	al family pension Rsp.m.					
Less								
	(a)	rent recoverable from gratuity for occupation of Corporation accommodation [As (i) of Part I]	in item 25 Rs					
	(b)	Amount of gratuity to be held over pendir Inchrge of Bill Section/GAD Cell/Unit Heapart I]	ng receipt of information from the ad Concerned [as in item 25 (ii) of Rs					
	(c)	Other Corporation dues as mentioned in item 25 (iii) of Part I	Rs					
	(d)	total of (a),(b) and (c)	Rs					
Place			Signature of					
Dated	the		Advisor (A&M) / Unit Head					
		Enclosures to Form 18	8					
1.		s of Amount of Corporation dues recoverablexure I S.No.25)	e from Gratuity					
2.	Calcul							

- Application for grant of family pension (Form 14) along with its enclosures.
 Details of particulars for Family Pension (Form 14 A) may be attached in triplicate.
- 4. Last Pay Certificate (Form 31).
- 5. Certificate for counting officiating pay (Form 32)
- 6. Nomination for Death Gratuity (Form 1 or 2)
- 7. Form of option.

PART II

Account Enfacement

Section I

1.	rotai	period of qualifying service which has been	accepted for :-	
	(i) (ii)	Death gratuity Family Pension	- 101 Doddoor	
2.	(i) (ii)	Amount of Gratuity Net amount of gratuity after adjusting Corporat	tion	
3.	Amou	nt and the period of tenability of family Pens	sion, if death too	k place —
			Amount	Period of tenability
			Rs.	From To
	(i) (ii)	Before seven years service . after seven years service		
4.	Death	from which Family Pension is admissible		
5.	Head of family p	of Account to which death gratuity and pension are chargeable		
		Section II		
1.	Name o	of the deceased employee		
2.		death of the employee		
3.	Date or Financi	n which pension papers received by the ial Advisor		
4.	Amoun	t of family pension authorised		
5.	Amoun	t of gratuity authorised		
6.	Date o	of commencement of family pension		
7.		on which payment of family pension and y authorised		
8.	Amour	nt recoverable from gratuity		
9.		nt of gratuity held over pending receipt demand certificate"		
Place			Financial Advi	sor

Dated, the

ANNEXURE I

(to S.No.25 of Form 18)

Details of amount of Corporation dues recoverable.

Name of the employee:Designation

Kind of		Amount Amount Balance							
Adv	ance	Outstan- ding	recovered	Principal	balanc	Interest	det rele doc	is i.e. Head ail of of credit evant umen & Date)	
_1	×	2	3	4		5	6	7	
ī.	Dues acco	of Corpor	ation					,	
II.	Long	g term adv	ances.						
	(i) (ii) (iii)	H.B.A. F H.B.A. Se Repairs A First Second Third Conveya First Second	cond						
(III) Othe	(IV) r Advar (i) (ii) (iii)	Third Term Loan							
IV.	Othe (i) (ii)	r recoverie	es						

(iii)

Copies of certificate of Incharge of Bill Section/GADCell/Unit Head(s)/PR Cell/LPC etc. are attached.

> Signature Seal (ADVISOR (A&M) / UNIT HEAD)

In case no amount of Corporation dues is recoverable, nil may be shown in theabove columns No.4 and 5, and following certificate recorded:

"Certified that no dues are outstanding against the above named employee/pensioner."

ANNEXURE II

(to S.No. 22 & 23 of Form 18)
Calculation Sheet.

I.	AMO	UNT O	DEATH GRATUITY.				
One less to Five less to	than one year or m than five years or n han twen ty years	year nore but year more but ty years or more	Emoluments x 2 = Rs Emoluments x 6 = Rs Emoluments x 12 = Rs Emoluments x Completed six = Rs monthly periods of service 2 not exceeding 33 times of emoluments.				
	This a	mount sh	ould not be more than Rs. 20.00 lacs.				
II.	AMOUNT OF FAMILY PENSION Emoluments at the						
HI.	ENHA	NCED	FAMILY PENSION AT RATES (if service years or more). Fifty percent of Emoluments i.e. Emoluments				
		(2)	Double the amount of pension determined in S.No. II Above. Rs				
	(b)	Where (1)	Workmen's Compensation Act is applicable: Fifty percent of Emoluments i.e. Emoluments				
		(2)	One and half times the amount				

of pension determined in

S.No. II above. Rs.....x 1.5 =Rs.....per mensem.

[See Rule 107 (2)]

Form of letter sanctioning Family Pension to the child or children of a retired Employee who dies after retirement but does leave behind a widow or widower

RAJASTHAN STATE INDUSTRIAL DEVELOPMENT AND INVESTMENT CORPORATION LIMITED

	<i>y</i>	H.O	/Unit office	
No				
To,				Dated the
	Subject:- Grant	of Family Pension to	the Child/Children.	
Sir,				
	I am directed to	say that Shri/Smt	***************************************	Formerly(Designation) in
the Co	orporation was aut	horised pension of I on his/her retirem	Rs ent from service.	(Designation) in with effect
2.	died on			Smt eft no widow/widower but was
S. No.	Name	Son / Daughter	Date of Birth by Christian era	Date from which family pension ceases to be payable
(1)			±	
(2)				
(3)				
(4)			* .	
3.	amount of Fa mentioned ab	amily Pension ha	s become payable Pension will be pay	ces (Pension) Rules, 1996, the to the children in the order yable on behalf of the minor to

- 4. Sanction for the grant of Family Pension of Rs......per month to the children mentioned above is hereby accorded. The Family pension will take effect fromand subject to the provisions of Rule 67 of the Rajasthan civil Services (Pension) Rules, 1996 will be tenable till
- 5. Attention is invited to the information furnished in the list of enclosures.
- 6. The receipt of this letter may kindly be acknowledged and this Office informed that instructions for the payment of Family Pension, to the guardian have been issued to the disbursing authority (Incharge of Bill Section).

Yours faithfully,

Advisor (A&M) / Unit Head

List of enclosures

- 1. Permanent address of the guardian .
- 2. Bank Account Detail
- 3. Specimen signature or **left hand thumb and finger impressions of the claimant or guardian duly attested.
- 4. Three attested copies of passport size photograph of the guardian.
- 5. Descriptive roll of the guardian, duly attested.
- Death Certificate.
- ** To be furnished in the case of the guardian who is not literate enough to sign his or her name.

[See rule 107 (2)]

Form of letter sanctioning Family Pension to the child or children on the death or remarriage of a widow/widower who was in receipt of Family Pension

RAJASTHAN STATE INDUSTRIAL DEVELOPMENT AND INVESTMENT CORPORATION LIMITED H.O....../Unit office......

No				Dated the			
To,				5 90			
	The Financ	ial Advisor RIICO	,Rajasthan, Jaipur.				
	Subject :- Grant of	Family pension to	the Child/children.				
Sir,							
of late S	I am directed to say Shri/Smt	that Shri/Smt	forme	widow/widower			
in this C	Office was authorised	d the payment of I	Family Pension of Rs	(Designation)			
2.	Intimation has been received in this Office that Shri/Smtdied/Re-married on						
3.	At the time of de following children*:-	ath /re-marriage	Shri/Smt	had			
S. No.	Name	Son / Daughter	Date of Birth by Christian era	Date from which family pension ceases to be payable			
(1)							
(2)							
(3)							
(4)		. 8 69	FI CONTRACTOR OF THE PROPERTY				
*	The names of chapter V c of th	nildren should b e Rajasthan civi	e mentioned in the I Services(pension)	order of eligibility mentioned in Rules, !996.			
4.	In terms of Chapter V c of the Rajasthan Civil Services (Pension) Rules, 1996 the amount of Family pension has become payable to the children in the orde mentioned above. The family Pension will be payable on behalf of the minors to Shri/Smt						

- 6. Attention is invited to the information furnished in the list of enclosures.
- 7. The Receipt of this letter may kindly be acknowledged and this Office informed that necessary instructions for the payment of Family Pension to issued to the disbursing officer concerned.

yours faithfully

Advisor (A&M) / Unit Head

List of enclosures

- Permanent address of the guardian.
- 2. Detail of Bank Account.
- 3. Specimen Signature of left *hand thumb and finger impressions of the guardian duly attested.
- 4. Three Attested copies of passport size photograph of the guardian.
- 5. Descriptive roll of the guardian, dully attested.
- 6. Death Certificate.

^{*} To be furnished in the case of the guardian who is not literate enough to sign his or her name.

(See Rule 107 (2) (A))

Form of Intimation regarding death of a pensioner where payment of family pension has been authorised to the widow/widower

From :	ž =				
Incharge	of Bill Section(Pension Disbursing Au	uthority)		
To,					
	The Finance RIICO,Raja	cial Advisor , asthan, Jaipur.			
			Date	ed the :	20
	Subject:-	Intimation regarding Pension has been au	death of pensione	r where payment widower.	of Family
Sir,					
l am who was dra	to inform you t wing his/her pe	hat Shri/Smt ension from this this die	ho	lder of P.P.O. No.	
per month ha Before making death certifice from the clain	as been made ng the said pay cate, the applic	cation form and other pted after necessary s	for the period from	n to ribed therein have	e been obtained
				Yours faithfu	lly,
	9				
				Incharge of Bill	Secion

FORM No.30

(See Rule 104)

Form of application by a pensioner for endorsement of particulars of spouse for post retiral marriage.

(To be filled in triplicate and submitted to Advisor (A&M) / Unit Head which processedpension papers initially)

To.

The Financial adviser

Sir.

I also enclose (i) 3 copies of pass port size joint photograph with my spouse duly attested (ii) an attested copy of marriage certificate from Registrar/Gram Panchayat/ District Magistrate for necessary action.

- 1. Name of the Pensioner (as recorded in PPO)
- Full present Address.
- 3. Date of retirement.
- 4. P.P.O. No. & Date
- 5. Name of Pension Disbursing Authority
- 6. (a) Details of family as given in the application for the grant of pension.
 - (b) Date of death/divorce of the previous spouse(Attested copies of death certificate/divorce decree to be enclosed).
- 7. Particulars of spouse from post-retiral marriage
 - (I) Name
 - (II) Date of marriage with the pensioner (please attach attested copy of marriage certificate)
 - (III) Joint photograph of the pensioner and the spouse referred to at item (a) above duly attested.

Encl: 3 copies of Joint photographs, marriage certificate

I certify that the particulars furnished above are correct.

Atteste	ed by			Signature	of Pensione	r
(with no	ame in block letters (dress)					
1.	Signature Name : Address :			Place :		
2.	Signature Name : Address :					
	9 × *					
Note :-	Attestation the tank of town/village	 nicial Mana	act at hy iw	mployee/Co	orporation off ole persons in	icer not blow