

**GOVERNMENT OF ODISHA  
FINANCE DEPARTMENT**

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**N O T I F I C A T I O N**

**Bhubaneswar, dated the 04.09.2015**

No. Pen-162/2015-**24142** In exercise of the powers conferred by the proviso to the article 309 of the Constitution of India, the Governor of Odisha is pleased to make the following rules further to amend the Odisha Civil Services (Pension) Rules, 1992, namely:-

**1. (1)** These rules may be called the Odisha Civil Services (Pension) Amendment Rules, 2015.

**(2)** They shall be deemed to have come into force on the date indicated against each of the amended rule and where no such indication has been made, the relevant amendments shall be effective from the date of their publication in the Odisha Gazette.

**2.** In the Odisha Civil Services (Pension) Rules, 1992 (hereinafter referred to as the said rules), in sub-rule (1) of rule (2) for clause (e) the following clause shall be substituted namely:-

"(e) "Emoluments" means the basic pay as defined in rule-33(a)(i) of the Odisha Service Code and under the Odisha Revised Scale of Pay Rules, issued time to time by the Government including the grade pay wherever applicable, which the Government Servant has received actually or fixed notionally immediately before retirement or on the date of death and includes-

**(a)** Personal pay, and additional pay granted under rule 37 (a) and rule 96 respectively of the Odisha Service Code, and

**(b)** any other recurring emoluments which may be specially classed as 'Pay' by the Government under rule 33 (a) (iii) of the Odisha Service Code;

**Explanation:** In calculating "emoluments", the amount received actually or fixed notionally before retirement on the basis of time scale of pay shall be taken into account irrespective of the fact whether the employee has received the emoluments for a total period of 30 days or for a portion thereof."

**3.** In the said rules, after clause (iii) of sub rule (4) of rule 3 the following proviso shall be added, namely:-

"Provided that above provisions shall not apply to the persons who are appointed under job-contract and work charged establishment prior to 01.01.2005 and brought over to the regular establishment on or after 01.01.2005"

**4.** In the said rules, in rule 32 for sub-rule (1), the following sub-rule shall be deemed to be substituted with effect from 01.12.2008, namely:-

"(1) The State Government may add to the service of a District Judge, recruited directly to the Superior Judicial Service to which candidates of more than thirty two years of age are recruited in accordance with the provisions of rule 9 of the OSJS and OJS Rules, 2007, for qualifying superannuation pension only, a period not exceeding one fourth of the length of his service or the actual period by which his age at the time of recruitment exceeds thirty-two years or a period of five years whichever is least:

Provided that this concession shall not be admissible to a District Judge unless his actual qualifying service at the time he quits Government service is not less than ten years:

Provided further that notwithstanding such substitution, the provisions before such substitutions shall deemed to be applied to the Judicial Officers other than such District Judges till 21.09.2010.

**5.** In the said rules, after sub-rule (2) of rule 34 the following proviso shall be added namely:-

"Provided that the employees, who have joined pensionable establishment under the State Government Service and accordingly, governed under the said rules, on their subsequent appointment in any other post in pensionable establishment under the State Government on or after 01.01.2005 by dint of technical resignation/proper permission from the authority shall continue to be governed under the provisions of this rule.

Provided that the employees covered under the Contributed Provident Fund etc. scheme prior to 01.01.2005, shall, however, not to be entitled to this benefit w.e.f. dtd.01.01.2005.

**6.** In the said rules, in rule 39 :

**(i)** in Note 3 of sub-rule (2) for the word and figure "Form-2," the word and letter "Form B" shall be substituted.

**(ii)** after Note 5 in sub-rule (2) the following Note shall be inserted, namely :-

**Note 6** - Acceptance of notice from a Government Servant for retirement and issue of retirement order on invalidation ground are not same as grant of leave by the competent authority prescribed to do so under Note to rule-18(2)(b) of Appendix-13 of Odisha Service Code. The appointing authority being the same in terms of the pension sanctioning authority as per rule-2(q) of the Odisha Civil Services (Pension) Rules, 1992, is competent to accept notice from a Government Servant for retirement on invalidation without requiring prior permission of any higher authority.

**7.** In the said rules, in sub-rule (5) of rule 42 for the words "thirty three years" the words "twenty five years" shall be substituted w.e.f. 01.12.2008.

**8.** In the said rules, in rule 44

**(i)** after clause (i) of sub rule(1) the following proviso shall be inserted, namely:-

"Provided that the employees of State Government who were appointed in their services prior to dtd.01.01.2005 and who were governed under the old non-contributory pension rules or scheme as the case may be of State Government, on their permanent absorption or further appointment to the services under the State Autonomous Bodies or Central Autonomous Bodies on or after dtd. 01.01.2005 shall continue to be covered under the provisions of these rules subject to fulfilment of other terms and conditions as laid down therein w.e.f. dtd.01.01.2005".

**(ii)** after sub-rule (3) and before the explanation thereof the following proviso shall be inserted namely:-

"Provided that the employees of State Government or Autonomous Bodies or Central Autonomous bodies who were appointed in their services prior to dtd.01.01.2005 and governed under the old non-contributory pension rules or scheme of Autonomous Bodies, on their

permanent absorption or further appointment to the services under the State Government on or after dtd. 01.01.2005 shall continue to be covered under the provisions of these rules subject to fulfilment of other terms and conditions as laid down therein w.e.f. dtd.01.01.2005."

**(iii)** after sub-rule (6) the following sub-rules shall be added namely:-

"(7) Where an employee borne on pensionable establishment is allowed to be absorbed in an Autonomous Body or in the Government establishment with pension scheme in operation or vice versa having rendered less than five years of qualifying service with the parent authority, the pro-rata charges for retirement Gratuity or Pension is to be calculated proportionately basing on the length of service rendered irrespective of the fact that he is not entitled to any terminal benefits on the date of his permanent absorption in the Autonomous Body or Government or vice-versa w.e.f. dtd.18.04.1996.

(8) Where an employee of an Autonomous Body with CPF benefits is absorbed permanently in the State Government, the Autonomous Body shall pay to the Government the employers contribution together with interest for the period of service rendered by him or her in the said body irrespective of the fact whether the employee is actually entitled or not to receive such benefits at the time of his absorption w.e.f. dtd.18.04.1996.

(9) The employee of the State Government moving to Central Autonomous Body and employees of the State Autonomous Bodies to the Central Government and their Autonomous Bodies and vice-versa shall be governed as per sub-rule (7) of rule 44 or sub-rule (8) of rule 44 whichever is applicable w.e.f. dtd. 18.04.1996.

**9.** In the said rules, in rule 47 -

**(i)** for clause (a) of sub-rule (2) the following clause shall be substituted namely:-

"(a)" In the case of a Government servant retiring in accordance with the provisions of these rules after completing qualifying service of twenty five years shall be entitled for pension at the rate of 50% of the last emoluments drawn by him on the date of his retirement w.e.f. dtd.01.12.2008.



Provided that in case of Judicial Officers of the State retiring in accordance with the provisions of these rules after completing qualifying service of twenty years will be entitled for pension at the rate of 50% of the last emoluments drawn by him on the date of his retirement w.e.f. dtd.01.01.2006.

**Explanation** - The pay notionally fixed in any case in favour of an employee after his retirement shall be taken into consideration for the purpose of retirement benefit.

**Note 1**- Provided that while determining pension in voluntary retirement cases, full pension is to be allowed for maximum twenty five years of qualifying service instead of thirty three years w.e.f. dtd.01.12.2008. Where the total qualifying service reckons to less than twenty five years the amount of pension shall be proportionate to the amount of pension admissible under clause (a) of this rule.

**(ii)** for clause (b) of sub-rule (2) the following clause shall be substituted, namely:-

**(b)** In case of a Government Servant retiring before completion of twenty five years of qualifying service, but after completion of ten years of service, the amount of pension shall be proportionate to the amount of pension admissible under clause(a) of sub-rule (2) and in no case the amount of pension shall be less than the minimum amount of pension of Rs.3500/- or as shall be fixed by Government from time to time and maximum up to 50% of the highest Pay and Grade Pay admissible to the Government employee w.e.f. dtd.01.12.2008.

Provided that in case of Judicial Officers of the State retiring before completion of twenty years of qualifying service, but after completion of ten years of service, the amount of pension shall be proportionate to the amount of pension admissible under clause(a) of sub-rule (2) and in no case the amount of pension shall be less than the minimum amount of pension of Rs.3500/- or as shall be fixed by the Government from time to time and maximum up to 50% of the highest pay admissible to the State Judicial Officer w.e.f. dtd. 01.01.2006.

**(iii)** after clause (b) of sub-rule (4) following clauses shall be inserted, namely:-

"(c) In addition to the pension calculated above, the quantum of pension payable to the old pensioners shall be increased w.e.f. dtd.01.12.2008 in case of State Government employees and w.e.f dtd.01.01.2006 in case of

State Judicial Officers after completion of eighty years of age or above in the following manner :-

| <b><u>Age of pensioner</u></b>                       | <b><u>Additional quantum of pension</u></b> |
|------------------------------------------------------|---------------------------------------------|
| From 80 years (on completion) to less than 85 years  | - <b>20%</b> of the basic pension.          |
| From 85 years (on completion) to less than 90 years  | - <b>30%</b> of the basic pension.          |
| From 90 years (on completion) to less than 95 years  | - <b>40%</b> of the basic pension.          |
| From 95 years (on completion) to less than 100 years | - <b>50%</b> of the basic pension.          |
| 100 years (on completion) or more                    | - <b>100%</b> of the basic pension.         |

**(d)** The Pension sanctioning Authorities shall indicate the date of Birth and the age of the pensioner in the pension sanction form as prescribed under these rules to facilitate payment of additional pension by the pension disbursing authority as soon as it becomes due.

**(e)** The amount of additional pension shall be shown distinctly in the pension payment order indicating the Basic Pension + Additional Pension and date of commencement of the additional amount.

**(f)** For calculation of additional pension the age of the pensioner shall be reckoned from the first day of the month even if the date of birth of the pensioner falls in the middle of the month. (i.e., in case the pensioner completes 80 years of age on dtd.27.03.2014 his/her age shall be reckoned as 80 years w.e.f. dtd. 01.03.2014.

**(g)** In case of pensioners or family pensioners who are in receipt of more than one pension or family pension the minimum ceiling limit shall apply to the total of all pensions taken together and where the consolidated pension or family pension taken together is less than the minimum pension as is fixed by the Government, the same shall be stepped up to the level of the minimum pension. If the consolidated pension is inclusive of commuted value of pension, the commuted person shall be deducted for making payment of monthly pension".

**(iv)** for clause (i) of sub-rule (5) the following clause shall be substituted, namely:-

In the case of a Government Servant retiring in accordance with the provisions of these rules before completion of the minimum

qualifying service of ten years shall not be entitled for pension, but he shall be entitled to service gratuity to be paid at a uniform rate of half month's emoluments for every completed six monthly period of service."

**10.** In the said rules

**(i)** for rule 48 excluding the explanation and Notes thereto, the following rule shall be substituted, namely:-

Emoluments for calculation of pension shall be the emoluments as defined in clause (e) of sub-rule (1) of rule 2 which the Government servant has actually received or fixed notionally immediately before his retirement with effect from 01.01.2013."

**(ii)** in rule 48 after Note-7 the following notes shall be inserted namely :-

**"Note 8 :** Government servants retiring while on leave with allowances shall be granted pension on the basis of revised pay which he or she would have drawn had he/she not proceeded on leave. But the retirement gratuity will be calculated on the basis of pay which he/she was drawing immediately before retirement w.e.f. dtd.25.11.1994.

**(iii)** Note 9: Where the Government servant retired while on leave without allowances the pension and gratuity will be calculated on the basis of pay or leave salary which the Government servant has drawn last immediately before proceeding on leave w.e.f. dtd.25.11.1994.

**11.** In the said rules, in rule 49 for the proviso to sub-rule (1) the following provisions shall be substituted, namely:-

**(i)** Provided that the amount of retirement gratuity so payable shall be in no case, exceed Two Lakh and Fifty Thousand Rupees for the Government Servants retiring on or before dtd.31.12.2005 and Seven Lakh Fifty Thousand Rupees for Government servants retiring on or after dtd.01.01.2006.

**(ii)** Provided further that the maximum limit of retirement gratuity in respect of the Officers belonging to State Judicial Service and retiring on or after dtd.01.01.2006 shall be Rs.10.00 lakhs.

**(iii)** Provided also that while calculating gratuity in cases of voluntary retirement, the total qualifying service after addition of weightage of five years shall not exceed thirty three years and it should not take the employee beyond the date of superannuation.

**12.** In the said rules, in clause (iv) in sub-rule (2) of rule 49 for the words "Two Lakhs and Fifty Thousand Rupees" the following words and figures shall be substituted namely:

**"Seven Lakh Fifty Thousand Rupees" for the Government servants retiring on or after dtd.01.01.2006 and "Ten Lakh Rupees" for Judicial Officers retiring on or after dtd.01.01.2006."**

**13.** In the said rules, in sub-rule (1) of rule 53, for the words and figures "Form-3 or 4" the words and letter "Form-C" shall be substituted.

**14.** In the said rules, in rule 55,-

**(i)** In sub-rule (3) and Note thereof, for the words and figure "Form 18", the words and letter "Form P" shall be substituted.

**(ii)** after Note to sub-rule (3) the following "Note-2" shall be added namely:-

**"Note-2 :** The Guardianship certificate appearing in this rule above shall be issued by the District Collector of the concerned District in which the claimants are residing. The Collector can revoke or alter the certificate so issued either *suomoto* or on application by the rightful aggrieved claimant (s) on being satisfied that grounds exists for such revocation or alteration of the certificate.

**15.** In the said rules, in rule 56, -

**"(i)** for clause (c) of sub-rule (2) the following clause shall be substituted, namely: -

**(c)** after retirement from service and was on the date of death in receipt of pension, or compassionate allowance, referred to in Chapter IV other than the pension referred to in rules 43, 44 the family of the deceased shall be entitled to family pension, the amount of which shall be calculated at a uniform rate of 30% of emoluments in all cases and shall be subject to minimum of Rs.3500/- **having no maximum limit** w.e.f. 01.01.2006 or as may be notified by the Government from time to time.

**(ii)** for proviso to sub-rule (3) shall be omitted-

**(ii)** Sub-rule (3) shall be renumbered as clause (a) thereto and after clause (a) so renumbered the following clause shall be added, namely:-

**(b)** In addition to the family pension calculated above, the quantum of family pension payable to the old family pensioners shall be increased w.e.f 01.12.2008, but in case of family pension holders of State Judicial Service the effective date will be from dtd. 01.01.2006 after completion of 80 years of age or above in the following manner:-

**Age of pensioner**

**Additional quantum of pension**

|                                                      |                                     |
|------------------------------------------------------|-------------------------------------|
| From 80 years (on completion) to less than 85 years  | - <b>20%</b> of the basic pension.  |
| From 85 years (on completion) to less than 90 years  | - <b>30%</b> of the basic pension.  |
| From 90 years (on completion) to less than 95 years  | - <b>40%</b> of the basic pension.  |
| From 95 years (on completion) to less than 100 years | - <b>50%</b> of the basic pension.  |
| 100 years (on completion) or more                    | - <b>100%</b> of the basic pension. |

**(c)** The Pension sanctioning Authorities shall indicate the date of Birth and the age of family pensioner in the pension sanction Form as prescribed under these rules to facilitate payment of additional family pension by the pension disbursing authority as soon as it becomes due.

**(d)** The Pension sanctioning authority shall also consider the date of birth recorded in Vote-ID Card, Driving Licence, Ration Card, PAN Card and Adhar Card issued by the competent authority in the absence of recording of date of birth on Pension Payment Order for sanction of family pension.

**(e)** The amount of additional family pension shall be shown distinctly in the pension payment order indicating the Basic Family Pension + Additional Family Pension and date of commencement of the additional amount.

**(f)** For calculation of additional family pension the age of the family pensioner shall be reckoned from the first day of the month even if the date of birth of the family pensioner falls in the middle of the month. (i.e., in case the family pensioner completes 80 years of age on dtd.27.03.2014 his/her age will be reckoned as 80 years w.e.f. dtd.01.03.2014.

**(g)** In case of family pensioner, who is in receipt of more than one pension or family pension or both the minimum ceiling limit shall apply to the total of all pensions taken together and where the consolidated pension or family pension taken together is less than the minimum pension as is fixed by Government, the same shall be stepped up to the level of the minimum pension.

**(iii)** for sub-clause (i) of clause (a) of sub-rule (4), the following sub-clause shall be substituted, namely: -

“(i) Where a Government servant, who is not governed by the Workmen's Compensation Act, 1923 (8 of 1923), dies while in service after having rendered not less than seven years of continuous service, the rate of family pension payable to the family shall be equal to 50 per cent of the pay last drawn or twice the family pension admissible under sub-rule (2) whichever is less and the amount so admissible shall be payable from the date following the date of death of the Government servant for a period of Ten years without any upper age limit w.e.f. dtd.01.12.2008.”

Provided that the enhanced family pension under this rule shall be applicable w.e.f. dtd.01.01.2006 in case of family pension holders of State judicial Service.

**(iv)** after clause (e) of sub-rule (5) the following clauses shall be inserted namely:-

"(f) (i) The family pension shall be paid to such son or daughter through the guardian as if he or she were a minor except in case of the physically crippled son or daughter who has attained the age of majority.

**(ii)** before allowing the family pension for life to any such son or daughter, the sanctioning authority shall ensure that the disability or disorder handicap is of such a nature so as to prevent him or her from earning his or her livelihood, basing on the certificate obtained by the claimant from a medical officer not below the rank of Chief District Medical Officer setting out, as far as possible, the exact mental or physical condition of the child indicating the extent of disability suffered which is not less than 40%.

**(iii)** the person receiving the family pension as guardian of such son or daughter shall produce at every three years a certificate from a medical officer not below the rank of a Chief District Medical Officer to the effect that he or she (the disabled pensioner) continues to suffer from disorder or disability of mind or continues to be physically crippled or disabled.

**(iv)** Family pension payable under this sub-rule shall be stopped as and when (i) he or she has started earning his or her livelihood more than rupees four thousand four hundred forty per month (only in case of such daughter) (ii) in case of daughter that she has married (iii) if the family pensioner is cured of such disability in case of disabled and major as the case may be.

(v) after explanation to clause (e) of sub-rule (5) the following Note shall be inserted, namely:-

**Note** - "On fulfilment of all other conditions stipulated in the above rule the unmarried or widowed or divorced or disabled widowed or disabled divorced daughters of a deceased State Government employee or pensioner will be eligible for family pension w.e.f. dtd.12.08.2011, irrespective of the date of death of the Government Employee or Pensioner.

(vii) after sub-rule (9) the following "Note" shall be inserted namely:-

**Note** - The Guardianship certificate appearing in this rule *above* shall be issued by the District Collector of the concerned District in which the claimants are residing. The Collector can revoke or alter the certificate so issued either *suomoto* or on application by the rightful aggrieved claimant (s) on being satisfied that grounds exists for such revocation or alteration of the certificate.

(viii) in clause (a) in sub clause (I) and (II) of sub rule (15) for the word and figure "Form-5" and the word and letter "Form-D" shall be substituted.

(ix) in sub-clause (ii) of clause (b) of sub-rule (17) the following words shall be added, namely:-

"through a registered adoption deed"

(x) in sub clause (b) of clause (ii) of sub rule (19) and in sub clause (b) of clause (B) of sub rule (20) for the words and figures "Form 19" and "Form 20" respectively, the word and letter "Form-Q" shall be substituted.

(xi) in sub-rule (20) in clause (B) of sub clause (d) -(i) for Note 1, the following note shall be substituted namely:-

**"Note-1**- In both the cases covered under sub-rule(19) and (20) *ibid* the date of disappearance of the employee or pensioner shall be reckoned from the date of lodging of the First Information Report but the family pension shall be sanctioned after lapse of one year from the date of lodging of First Information Report (FIR) but the benefit of family pension shall accrue retrospectively from the date on which the FIR is lodged or after expiry of leave of the employee who has disappeared, whichever is later. The emoluments for the purpose are as specified in rule 48."

**(ii)** after Note-4 the following note shall be inserted, namely:-

"Note-5 - Cases of disappearance which occurred prior to the 30<sup>th</sup> November, 1987 and prior to the 14th March, 1990 shall be regulated under the Finance Department O.M.No.-56895/F., dt.30.11.1987 and No.6424/F., dt.14.03.1990 only where FIR has been lodged with the nearest police station."

**16.** In the said rules, in rule 57 -

**(i)** for sub-rule(1) the following sub-rule shall be substituted, namely:-

"(1) Every Head of Office shall have a list prepared every year, i.e., on the 1st day of July each year of all *Government* Servants working under him who are due to retire within the next 18 to 24 months."

**(ii)** for sub-rule(2) the following sub-rule shall be substituted, namely:-

"(2) A copy of every such list shall be supplied to the Accountant General, Odisha, Appointing Authority, Administrative Department Concerned, Director of Treasuries & Inspection, Odisha and the Estate Officer or the competent authority, as the case may be (if the Government Servant concerned is an allottee of Government accommodation), not later than the thirty first of July each year in "Form-A"."

**(iii)** after sub-rule (2) the following proviso shall be inserted, namely :-

"Provided that to avoid over stayal in service beyond the date of retirement, the Codal Provision and Rules above are to be scrupulously followed to ensure proper maintenance of Service Book. The Officers functioning as Drawing and Disbursing Officers, the Head Clerks (Head Ministerial Officers) working under him and the Clerks/Assistants entrusted with the responsibility of maintenance of the Service Book of the concerned employee shall be jointly and severally held responsible for over stayal of the concerned employee. The money received by such employee during the period of overstayal shall be recovered from the salary and retirement benefits of the persons responsible in equal proportions."



**17.** In the said rules, in rule 58 in sub rule (1) and (2) for the words and figures "Form-7" and "Form-6" the words and letters "Form-F" and "Form-E" shall be substituted respectively.

**18.** In the said rules in rule 59 after sub-rule (5) the following sub-rule shall be added, namely:-

"(6) The Head of Office shall prepare the pension papers on the basis of the qualifying service determined by him in accordance with the provisions indicated above and send the pension papers to the Accountant General, Odisha through the Pension Sanction Authority for authorisation of Pension Payment Order/Gratuity Payment Order four months in advance of the date of retirement."

**19.** In the said rules in rule 61, for the words and figures "Form-7" the word and letter "Form-F" shall be substituted.

**20.** In the said rules, in rule 62, -

**(i)** for sub-rule (1), the following sub-rule shall be substituted, namely :-

**"(1) Forwarding of Pension Papers to the Appointing Authority/Accounts**

**officer:-** After completing Part-I portion of Form F in triplicate, the Head of Office shall forward the same along with Form E to the Appointing Authority (where the Head of Office is not the appointing authority) with the service book or services roll of the government Servant duly completed up to date and any other documents relied upon for the verification of the service.

Provided that where the Original Service Book is completely damaged or destroyed or lost, duplicate copy of Service Book in an up to date form available with the Government Servant shall be relied upon for the verification of service without insisting upon the original service book."

**(ii)** for clause (i) of sub-rule (2), the following sub-rule shall be substituted, namely :-

"(i) The Appointing Authority shall sanction the pension in Part-II of "Form-F" and intimate the same to the Accountant General, Odisha in

"Form-G" not later than two months before the date of retirement of Government servant."

**(iii)** for clause (i) of sub-rule (3) shall be omitted.

**(iv)** for clause (ii) of sub rule (3) the following clause shall be substituted, namely:-

"(ii) The Accounts Officers, while issuing the pensionary authorisation, countersign the Part-III of the Form-F as a certified by the appointing authority, retain one copy (out of the three received by him from the appointing authority) and forward one copy as countersigned by him to the pensioner, alongwith the intimation of having sent the pension payment order to the Treasury. The other certified copy of the Part-III of the Form-F as countersigned by the Accounts Officer shall be returned to the appointing authority concerned who shall keep the same in a guard file with a proper index for future reference."

**21.** In the said rules, in rule 64 in sub-rule (1) and (2) for the words and figures "Form-7" the words and letters "Form-F" shall be substituted respectively.

**22.** In the said rules, in rule-65,

**(i)** after sub-rule (3) the following proviso shall be inserted namely :-

"Provided that in case of overstayal in service beyond the date of superannuation, the pension sanctioning authority shall determine and sanction the provisional pension and provisional gratuity of the retired employee as due basing on the qualifying service (excluding the period of overstayal) and emoluments upto the date of superannuation and steps should be taken immediately as per provisions of law for appropriate decisions on the period of overstayal."

**(ii)** in sub-rule (4) in clause (a), for the words and figure "Form-17" the word and letter "Form-N" shall be substituted.

**(iii)** for clause (a) of sub-rule (6) the following clause shall be substituted, namely:-

"(a) As soon as the amount of final pension and the amount of final gratuity are determined by the appointing authority, he shall *intimate* the same to the Accountant General, Odisha. While submitting final pension

papers to the Accountant General, Odisha the pension sanctioning authority shall send a detailed information showing sanction and drawal particulars of Provisional Pension, Commuted Value of Pension and Provisional Gratuity. Where no such sanction has been made the fact of non-sanction or non-drawal shall also be intimated to the Accountant General. On *receipt* of the report the Accountant General, Odisha shall,-

**(i)** issue the pension payment order and direct the Treasury Officer to draw and disburse the difference between the final amount of pension and the amount of provisional pension paid under sub-clause (i) of clause (b) of sub-rule (4) ,

**(ii)** Direct the Treasury Officer to draw and disburse the difference between the final amount of gratuity and the amount of provisional gratuity paid under sub-clause (ii) of clause (b) of sub-rule (4) after adjusting the Government dues, if any, which may have come to the *notice* after payment of provisional gratuity.

**23.** In the said rules, in sub-rule (3) of rule 68, after Note (b) the following Note shall be inserted, namely:-

**"Note-(c)-**Pension Sanctioning Authorities should take prompt action to procure and submit the requisite "No Demand Certificate". After proper assessment and adjustment of recoverable Government dues as per the provision referred to in Para (l) above and submit the same to the Accounts Officer, within a period of one month from the date of retirement of the concerned government servant, failing which it shall be deemed that no Government dues are outstanding against the retired Government servant and in that event authorisation of final Pension Payment Order or Gratuity Payment Order by the Accounts Officer shall be automatic without further reference to the Pension Sanctioning Authorities. Cases where it is noticed on subsequent occasion that Government dues still remain un assessed and unadjusted, the concerned erring officer, as the case may be, would be held responsible in future to make good the loss caused under Government Account."

**24.** In the said rules, in rule 69, -

**(i)** for sub-rule (6), the following sub-rule shall be substituted, namely:-

"(6) If in any particular case, it is not possible for the authority in charge of Government accommodation to determine the outstanding licence fee, then

the said authority shall inform the Head of office that ten per cent of the gratuity may be withheld pending receipt of further information."

**(ii)** after sub-rule (7), the following sub-rule shall be inserted, namely:-

"(8) If no report about the quantum of arrear licence fee is received from the authority in-charge of Government accommodation within a period of 2 months from the date of retirement and 3 months from the date of death of concerned Government employee, it shall be deemed that no arrear licence fee is outstanding against the retired or deceased employees and in that event the amount of gratuity so withheld shall be released by Accountant General, Odisha on receipt of intimation from Head of Office or Pension Sanctioning Authority where the latter is the Head of Office."

**25.** In the said rules, in rule-70,

**(i)** after sub-rule (3) the following sub-rules shall be inserted, namely:-

"(4) Where the audit report or para as the case may be indicates drawal of cash advances which remains to be repaid, money drawn but not utilized or balance after utilization is not deposited and cash embezzlement by interpolation of figures etc., the recovery should be made from Gratuity of the Government employee concerned after giving him or her an opportunity of being heard by the Head of Office.

**(5)** Where the loss of Government money either by misappropriation or otherwise as pointed out by the audit is of a nature where no direct responsibility can be fixed without resorting to a fact finding enquiry, in such cases Departmental proceedings should be instituted under the Odisha Civil Services (CC&A) Rules, 1962/ The Odisha Civil Services (Pension) Rules, 1992 on the basis of the audit para/report. Head of Office should furnish their views on the report alongwith the action taken for recovery of Government dues within two months from the date of receipt of the same and forward it to Govt. for appropriate orders. On receipt of the same, the Administrative Department should take a view within a month.

**(6)** If the dues assessed as payable by the Government servant is more than the Gratuity amount, then the balance recoverable amount is to be realised from the Temporary Increase or Dearness Relief on pension/family pension. For effecting recovery from Temporary Increase

or Dearness Relief, the Pension Sanctioning Authority/Accountant General shall, by order in writing, direct the Treasury Officer to adjust it by short payment of Temporary increase or Dearness Relief and credit the recovered amount by transfer credit to the proper Head of Account of recovery, to be intimated by the Pension Sanctioning Authority. Whenever recovery from Temporary Increase or Dearness Relief is not feasible for whatever reasons the Pension Sanctioning Authority/ Head of Office will take appropriate action under law for recovery of the dues.

**26.** In the said rules, in rule 72,-

**(i)** for clause (b), of sub-rule(2), the following clause shall be substituted, namely:-

"(b) The Head of office shall, then address the person concerned in Form-H for making a claim in Form-J, while submitting the claim in Form-K proof of date of Birth of the claimant or claimants as the case may be is to be attached."

**(ii)** in clause (a) of sub-rule(3) the words and figures "Form-13" and "Form-14" the words and letters "Form-H" and "Form-K" shall respectively be substituted.

**(iii)** for clause (b), of sub-rule(3), the following clause shall be substituted, namely: -

"(b) Where the deceased Government servant is survived only by a child or children, the guardian of such child or children may submit a claim in "Form-K" to the Head of Office. While submitting the claim in "Form-K" proof of date of Birth of the claimant or claimants as the case may be is to be attached. Provided that the guardian shall not be required to submit a claim in the said form on behalf of a child if the said child has attained the age of 18 years and such child may himself or herself submit a claim in the said form.

**(iv)** in clause (c) of sub-rule(3) for the words and figure "Form-14" the words and letter "Form-K" shall be substituted.

**27.** In clause (a) of sub-rule (1) of rule 73 for words and figure "Form-15" the word and letter "Form L" shall be substituted.

**28.** In sub-rule (1), (2) and (3) of rule 75 for words and figures "Form-15" and "Form-16" the words and letter "Form-L" and "Form-M" shall be substituted respectively.

**29.** In clause (a) of sub rule (1) of rule 76, for the word and figure "Form 17", the word and letter "Form N" shall be substituted.

**30.** In sub-rule (1) and (5) of rule 77 for word and the figure "Form-15" the word and letter "Form-L" shall be substituted.

**31.** In the said rules, in rule 78,-

**(i)** for clause (vi) of sub-rule (1), the following clause shall be substituted, namely :-

"(vi) Pending receipt of information under clause (v) the Head of Office shall withheld ten percent of the death gratuity."

**(ii)** after clause (ix) of sub-rule (1), the following clause shall be inserted, namely:-

"(x) If no report about the quantum of arrear licence fee is received from the authority in-charge of Government accommodation within a period of 2 months from the date of retirement and 3 months from the date of death of concerned Government employee, it shall be deemed that no arrear licence fee is outstanding against the retired/deceased employees and in that event the amount of gratuity so withheld shall be released by Accountant General, Odisha on receipt of intimation from Head of Office or the Pension Sanctioning Authority where the latter is the Head of Office.

**(iii)** after sub-rule (2), the following sub-rule shall be inserted, namely: -

**(3)** If the dues assessed as payable by the Government servant is more than the Gratuity amount, then the balance recoverable amount is to be realised from the Temporary Increase or Dearness Relief on pension/family pension. For effecting recovery from Temporary Increase or Dearness Relief, the Pension Sanctioning Authority/Accountant General shall, by order in writing, direct the Treasury Officer to adjust it by short payment of Temporary Increase or Dearness Relief and credit the recovered amount by transfer credit to the proper Head of Account of recovery, to be intimated by the Pension Sanctioning Authority. Whenever recovery from Temporary

Increase or Dearness Relief is not feasible for whatever reasons the Pension Sanctioning Authority/Head of Office will take appropriate action under law for recovery of the dues.

**32.** In the said rules, in rule-80.-

**(i)** In sub-clause (i), (ii) and (iii) of clause (B) of sub rule (2) for the words and figure "Form-14" and "Form-21" the words and letter "Form-K" and "Form-R" shall respectively be substituted.

**(ii)** In sub-clause (iii) of clause (B) of sub rule (2) for the words "Pension Disbursing Authority", the words "Appointing Authority", shall be substituted.

**(iii)** In sub-clause (iii) and (iv) of clause (C) of sub rule (2) for the words and figures "Form-14" and "Form-22" the words and letters "Form-K" and "Form-S" shall respectively be substituted.

**(iv)** In sub-clause (i) and (ii) of clause (D) of sub rule (2) for the words and figures "Form-14" and "Form22" the words and letter "Form-K" and "Form-S" shall respectively be substituted.

**(v)** In sub-clause (i), (ii) and (iii) of clause (E) of sub rule (2) for the words figures and letters "Form-14A" and "Form-15A" the words and letters "Form-K" and "Form-L" shall respectively be substituted.

**(v)** In sub-rule (3) for the word and figure "Form-23" the word and letter "Form-T" shall be substituted.

**33.** In the said rules for rule-84, the following rule shall be substituted namely:-

**Manner of payment of pension - (1)** A Pension fixed at monthly rates shall be payable monthly on or after the first day of the following month.

**(2)** Except as otherwise provided in these rules, a gratuity shall be paid in lump sum.

**(3)** Except as otherwise provided in these Rules Temporary Increase or Dearness Relief on pension as sanctioned by Government from time to time shall continue to be admissible to the pensioners drawing Service

Pension, Family Pension, Extra-ordinary Family Pension and Disability Pension including provisional pension, provisional Family Pension and Special Family Pension sanctioned by Government in individual cases w.e.f. dtd.09.11.1994.

**(4)** In case of the pensioner enjoying both the State and Central Pension, the percentage of Temporary Increase or Dearness Relief shall be calculated on the quantum of each pension separately and the sum total of such calculated amount shall be paid to him or her w.e.f. dtd. 16<sup>th</sup> March, 1992.

Provided that where a Government servant has been awarded disability pension in addition to the normal invalid pension, the quantum of Temporary Increase or Dearness Relief shall be determined on the sum total of both the pensions w.e.f. dtd. 09.11.1994.

**(5)** Where the pensioner becomes recipient of family pension in respect of his deceased wife or deceased husband either as a Government servant or as a pensioner, the Temporary Increase or Dearness Relief shall be determined and paid on the total amount of pension and family pension.

Provided that Temporary Increase or Dearness Relief shall be paid with reference to the amount of family pension sanctioned at the enhanced rate under Rule-56 (4) (a) of O.C.S. (Pension) Rules, 1992. On expiry of the period for which family pension was sanctioned at the enhanced rate, the Temporary Increase or Dearness Relief shall be recalculated with reference to the amount of family pension admissible an ordinary rate w.e.f. dtd.09.11.1994.

**34.** In the said rules, in rule 89:-

**(i)** Sub-rule (C) shall be renumbered as clause (i) thereof and after clause (i) so renumbered, the following clause shall be inserted, namely:-

**(ii)** Temporary Increase or Dearness Relief of the re-employed pensioner (including a family pension holder) shall be suspended when he/she is employed/re-employed in the services/posts under the State/Central Government/Company or Local Fund Institutions or Industrial or Commercial Undertakings or Corporations/Boards of State as well as Central Government or under any other Aided Institutions or Nationalised Banks including Reserve Bank of India and State Bank of India



or Universities or under any other Society including Co-operative Societies/Co-operative Banks.

Provided that Temporary Increase or Dearness Relief on pension shall not be suspended if the pensioner is in receipt of consolidated amount in the form of pay, remuneration, honorarium or fixed allowance during the period of re-employment, provided the consolidated amount shall not include any element of dearness allowance and shall be kept at par with the pre-retirement pay of the pensioner w.e.f dtd.09.11.1994.

**(iii)** for sub-rule (d), the following sub-rule shall be substituted, namely:-

"(d) In the case of person retiring before attaining the age of 55 years and who are re-employed, pension/other forms of retirement benefits shall be ignored for initial pay fixation to the extent of Rs.4000/- w.e.f dtd. 01.01.2006 or as shall be notified by the Government from time to time.

Provided that –

**(i)** in the case of officers drawing pension not exceeding Rs.4000/- p.m. - the actual pension.

**(ii)** In other cases - the first Rs.4000/- of the pension.

The pension for the purpose of this rule means gross pension (pension without deduction of commuted value)."

**35.** In the said rules, in rule-90 for the expression and figure "Rs.6500/-" the expression and figure "Rs.76,000" w.e.f. dtd.01.01.2006 shall be substituted.

**36.** In the said rules, in sub rule (1) of rule 99, for the word and figures "Form-24" the word and letter "Form-U" shall be substituted.

**37.** In the said rules, 113, -

**(i)** In cause (i) of sub rule (2) after the words "the death occurred" the following shall be added, namely:-

"shall be recorded by the competent authority in Form "Y" and "Z".

**(ii)** In cause (ii) and (iii) of sub rule (2) for the words and figures “Form-25”, “Form-26” and “Form-27” the words and letters “Form-V”, Form-W and “Form-X” shall be substituted respectively.

**38.** The revised 24 formats from ‘A’ to ‘Z’ are appended below.

By order of the Governor

**Sd/-**

**(R. Balakrishnan)**

**Additional Chief Secretary to Government**

**DECLARATION OF THE RETIRING GOVERNMENT SERVANT**  
**(See Rule-70A).**

I, \_\_\_\_\_ do hereby give my free and full consent that if any over payment made to me is detected while in service or after my retirement in respect of my General Provident Fund Account or on account of Gratuity, Pension and Temporary Increase on Pension etc., the same shall be recovered from my Temporary Increase on Pension or Gratuity payable to me or to my family at any time.

**Full Signature of the  
Retiring Govt. Servant with address.**

**PART-II**

**ACKNOWLEDGEMENT**

**Received from**

**Sri/Smt./Miss** \_\_\_\_\_

**(name & designation of the retiring Government Servant)**

application in Form-E for sanction of Pension/Gratuity and Commutation Value of Pension with Medical Certificate/without Medical Certificate along with nomination in Form-C

***(strike out which is not applicable).***

*\* (on receipt of the application by the Head of Office the Acknowledgement should be detached from the Form and to be handed over to the applicant as a proof of receipt of application).*

**Place:**

**Date** \_\_\_\_\_

**Signature of Head of Office/  
Authorised Authority**

**O.C.S.(PENSION)**  
**FORM-H**  
**[See Rule 72(2)(b)&72(3)]**

**INFORMATION TO THE MEMBER/MEMBERS OF THE FAMILY OF THE  
 DECEASED GOVERNMENT SERVANT FOR GRANT OF FAMILY PENSION  
 AND DEATH GRATUITY**

**(WHERE VALID NOMINATION EXISTS/WHERE VALID NOMINATION DOES NOT EXIST).**

Name of Office / Department \_\_\_\_\_

Letter No. \_\_\_\_\_ Dt. \_\_\_\_\_

To

\_\_\_\_\_

\_\_\_\_\_

**Sub :Payment of Family Pension and Death Gratuity in respect of  
 late Shri/ Smt. \_\_\_\_\_.**

**Sir/Madam,**

**(i)** I am directed to state that in terms of the nomination made by Late Shri/Smt. \_\_\_\_\_ (designation) in the Office/Department of \_\_\_\_\_, death gratuity is payable to his/her nominee(s) a copy of the said nomination is enclosed herewith.

**(ii)** I am directed to state that no nomination has been made by Late Shri/Smt. \_\_\_\_\_ (designation) in the Office/Department of \_\_\_\_\_/ the nomination though made either does not subsist or found to be invalid. The death gratuity is payable to following family members in equal shares as per Rule-49 of the Odisha Civil Service Pension Rules, 1992 as per Legal heir successor CH.

(a) Wife/Husband including judicially separated wife/husband.

(b) Sons including step Sons and adopted sons.

(c) Unmarried daughters including step daughters and adopted daughters.

**(iii)** In the event of there being no surviving member of the family as indicated above, the gratuity will be payable to the following members of the family in equal shares: as per Legal heir successor CH.

- (a) Widowed daughters including step daughters and adopted daughters.
- (b) Father including adoptive father in case of individuals whose personal law permits adoption.
- (c) Mother including adoptive mother in case of individuals whose personal law permits adoption.
- (d) Brothers below the age of eighteen years including step brothers and unmarried or widowed sisters including step sisters.
- (e) Married daughters and Children of a pre-deceased son.
- (f) Children born out of void wedlock.

**(iv)** Family Pension payable to widow/widower/Children including disabled son/disabled daughter/disabled widowed/disabled divorced daughters/Un-married/widowed/divorced daughters/Father/Mother.

*(strike out whichever is not applicable).*

**(v)** It is requested that claim for the grant of gratuity may be submitted in the enclosed OCS (Pension) **Form J** and claim for family pension in OCS (Pension) **Form K** as soon as possible.

Yours faithfully,

**Head of Office**

**N.B. :- Strikeout which is not applicable before sending the letter.**

## O.C.S (PENSION) FORM-A

(see Rule 57 (2))

(Information on list of employees due to retire in the succeeding calendar year)

List of Government servants employed in the Office/Department \_\_\_\_\_ who are due to retire by the end of 31<sup>st</sup> December of the succeeding calendar year.

| Sl. No | Name of the Government Servant | Designation | Date of Birth (dd/mm/yyyy) | Date of super-annuation (dd/mm/yyyy) | GPF Account Number | Whether action for processing of pension paper initiated in advance as per Rule. (Yes/No) |
|--------|--------------------------------|-------------|----------------------------|--------------------------------------|--------------------|-------------------------------------------------------------------------------------------|
| (1)    | (2)                            | (3)         | (4)                        | (5)                                  | (6)                | (7)                                                                                       |
|        |                                |             |                            |                                      |                    |                                                                                           |
|        |                                |             |                            |                                      |                    |                                                                                           |
|        |                                |             |                            |                                      |                    |                                                                                           |

(The List is to be sent by 31<sup>st</sup> of July each year by the Head of Office to the Accountant General, Odisha, Bhubaneswar, Appointing Authority/Administrative Department concerned/ Director of Treasuries & Inspection, Odisha, Bhubaneswar/ Estate Officer (if the Government Servant is allotted a Government Accommodation).

Signature of the Head of Office

## O.C.S (PENSION) FORM-B

[See Note (3) below Sub-rule (2) of Rule 39]

### (MEDICAL CERTIFICATE FORM FOR INVALID PENSION)

(1) Certified that I/We have carefully examined Shri/Smt. \_\_\_\_\_ Son/Daughter of Shri \_\_\_\_\_ working in the Office/Department \_\_\_\_\_. His/Her Date of Birth as per the Service Book is \_\_\_\_\_. His/Her age (dd/mm/yyyy) by appearance is about \_\_\_\_\_ years. I/We consider Shri/Smt. \_\_\_\_\_ to be completely and permanently incapacitated for further service of any kind in the Department/Office in which he/she is working as a consequence of \_\_\_\_\_ (State the cause or the disease), which is noticed after thorough examination.

(2) Certified that I am/We are of the opinion that Sri/Smt. \_\_\_\_\_ is fit for further service of a less laborious character than that is performed by him/her presently and may after resting for \_\_\_\_\_ months be fit for further service of less laborious character than that is being performed now.

Medical Authority with Seal and Signature

Place:-

Date:-

N.B.:- If the incapacity does not appear to be complete and permanent the certificate should be modified accordingly and certificate should be issued by striking out which one is not applicable.



## O.C.S (PENSION) Form-C

(See Rule-53 of OCS (Pension) Rules, 1992)

(See Rule-8 of OCS (Commutation of Pension) Rules-1992)

### NOMINATION FOR PAYMENT OF ARREARS OF COMMUTATION VALUE / DEATH-CUM-RETIREMENT GRATUITY AND LIFE TIME ARREARS OF PENSION.

In the event of my death, I, ----- hereby nominate the person/persons mentioned below, who is/are members of my family/not a part of my family and confer on him/her/them the right to receive the arrears arising out of commutation value of pension and gratuity sanctioned but remaining unpaid, and also, life time arrears of pension or other arrears payable to me, the payment of which have been authorised by the State Government but remain unpaid and confer on him/her/them the right to receive the arrears to the extent specified below against each.

| Original nominee(s)                    |                                       |                                              |                                 | Alternate nominee(s)                                                                                                                                                                                                                                                                                          |                                 |
|----------------------------------------|---------------------------------------|----------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Names and address of nominee/nominees. | Relation-ship with the Govt. Servant. | Date of Birth of the Nominee<br>(dd/mm/yyyy) | Percentage of share of arrears. | Name, address, relationship and date of birth of the person or persons, if any, to whom the right conferred as the nominee, shall pass in the event of the nominee predeceasing the Govt. Servant or the nominee dying after the death of the Govt. servant but before receiving payment of share of arrears. | Percentage of share of arrears. |
| 1                                      | 2                                     | 3                                            | 4                               | 6                                                                                                                                                                                                                                                                                                             | 7                               |
|                                        |                                       |                                              |                                 |                                                                                                                                                                                                                                                                                                               |                                 |

**Note-** 1. Any Retiring Government Servant desirous of assigning different nominees for different type of claims may fill in separate forms of nomination and submit it to pension sanctioning authority/Head of Office.

Contd....



2. All columns should be filled in so as to cover the whole amount of the arrears with reference to the percentage.
3. This nomination supersedes previous nomination if any furnished by me.
4. The Government servant shall draw lines across the blank space below the last entry to prevent the insertion of any name after he has signed.
5. Strike out which is not applicable.

Dated this.....day of month ....., 20.....at.....

Two witnesses to signature:

- 1.
- 2.

Signature of the Government Servant.

Signature of the Head of Office  
accepting the nomination

## O.C.S (PENSION) Form-D

[See Rule 56 (15)]

### (Information on Details of Family)

1. Name of the Government Servant:-
2. Designation:-
3. Date of Birth as per Service Book:-
4. Date of Appointment :-
5. Details of the members of my family\*as on \_\_\_\_\_  
(dd/mm/yyyy)

| Sl.N<br>o. | Name of the members of<br>family* | Date of<br>Birth(dd/mm<br>/yyyy) | Relationship<br>with the<br>Government<br>Servant | Remarks if any |
|------------|-----------------------------------|----------------------------------|---------------------------------------------------|----------------|
| 1.         |                                   |                                  |                                                   |                |
| 2.         |                                   |                                  |                                                   |                |
| 3.         |                                   |                                  |                                                   |                |
| 4.         |                                   |                                  |                                                   |                |
| 5.         |                                   |                                  |                                                   |                |

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of office any addition or alterations in the family.

**Signature of the Government Servant**

Place :-

Date:-

\* Family for this purpose means family as defined in clause (b) of sub-rule (17) of Rule 56 of the Odisha Civil Services (Pension) Rules, 1992.

\*\* Wife and Husband shall include respectively Judicially separated wife and husband.

# O.C.S.(PENSION) FORM-E

## PART-I

**(Reference Rule- 58(2) of OCS (Pension) Rules, 1992  
(Application by the Retiring Government Servant for sanction of  
and rule 5,6,11,12,13,13,14 and 15 of OCS (CP) Rules, 1992  
Pension, Gratuity and Commuted Value of Pension)**

|     |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                            |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.  | Name of the Government Servant (In Block Letters)                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                            |
| 2.  | Father/Spouse Name                                                                                                                                                                                                                     | <div style="border-bottom: 1px solid black; padding: 2px;">Father :-</div> <div style="border-bottom: 1px solid black; padding: 2px;">Husband/Wife :-</div>                                                                                                                                                                                |
| 3.  | Date of birth (by Christian Era)<br>(In words as recorded in the Service Book)                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                            |
| 4.  | Date of Joining in Government Service                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                            |
| 5.  | Date of Retirement                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                            |
| 6.  | Post last served and the name of the Office                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                            |
| 7.  | Type of Pension applicable (Super-annuation / Invalid Pension/Compensation Pension/Pension on Voluntary Retirement/Pension on Compulsory Retirement)                                                                                   |                                                                                                                                                                                                                                                                                                                                            |
| 8.  | Previous Pension / Family Pension received, if any, from other source / Military / Civil.<br>Please indicate the details PPO / FPPO No.- Amount of Pension & date from which received.                                                 |                                                                                                                                                                                                                                                                                                                                            |
| 9.  | Permanent Address:-                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                            |
| 10. | Address for Correspondence (where the Pensioner intends to reside after retirement)<br><div style="text-align: right; margin-top: 5px;">             Phone no.<br/>             Mobile no.<br/>             E mail id           </div> |                                                                                                                                                                                                                                                                                                                                            |
| 11. | (A) Retiring Government Servants choice of the Banks where the pensionary benefits are to be credited.                                                                                                                                 | <div style="border-bottom: 1px solid black; padding: 2px;">Name of the Bank</div> <div style="border-bottom: 1px solid black; padding: 2px;">Branch.....</div> <div style="border-bottom: 1px solid black; padding: 2px;">A/c no.....</div> <div style="border-bottom: 1px solid black; padding: 2px;">IFSC Code..... MICR Code.....</div> |

Contd....



|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                         |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|     | (B) Bank Account Details<br>(when Operated Single / Jointly with the spouse by the Pensioner).                                                                                                                                                                                                                                                                                                                                                                                                | Name of the Bank<br>.....<br>Branch.....<br>A/c<br>no.....<br>IFSC Code..... MICR<br>Code.....<br>BSR Code.....                                                                                                         |
| 12. | Permanent Account Number (PAN) if any<br>(for Income Tax Purpose)                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                         |
| 13. | Percentage (%) of Pension sought to be<br>commuted. (Maximum 40% of Pension)                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                         |
| 14. | <p><b>Details of the family</b> (Family for this purpose means family as defined in clause (b)(i)(iii) of sub-rule (17) of Rule 56 of the Orissa Civil Services (Pension) Rules, 1992.)<br/>Spouse/Son/Sons including adopted sons/Un-married Daughter/Daughters including adopted Daughters/Parents/Parents-in-laws in case of Women Government Employee).</p> <p>NOTE:-Wife and husband shall include respectively judicially separated wife and husband.</p> <p>Any other Information-</p> | <p>Spouse-<br/>DoB<br/><u>Son/Sons /</u><br/><u>Daughter/Daughters</u></p> <p><u>DoB Marital Status</u></p> <p>1.<br/>2.<br/>3.</p> <p><u>Parent /Parents in Law(in case of women Government Servants) DoB/ Age</u></p> |
| 15. | Whether Nomination furnished in Form-3.<br>(Attach Form-3 ).                                                                                                                                                                                                                                                                                                                                                                                                                                  | Nomination form is to be attached.                                                                                                                                                                                      |
| 16. | Whether application for final withdrawal of GPF has been filed; (i) if yes give the date (ii) if no give the reasons.                                                                                                                                                                                                                                                                                                                                                                         | (i)<br>(ii)                                                                                                                                                                                                             |
| 17. | Personal Identification proof to be attached duly attested by Head of Office/Authorised Officer.                                                                                                                                                                                                                                                                                                                                                                                              | (a) Photograph (Single or Joint) to be enclosed.<br>(b) Descriptive Rolls.<br>(c) Specimen Signature/Thumb Impression.                                                                                                  |
| 18. | Information on Drawal of Long Term Advances during the Service Period (Give details with TV No.)                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                         |
|     | (A) House Building Advance                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                         |
|     | (B) Special House Building Advance                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                         |
|     | (C) Motor Car Advance                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                         |
|     | (D) Motor Cycle Advance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                         |
| 19. | Name of Treasury / Special Treasury/ Sub Treasury where the pensioner intends to draw his/her first pension.                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                         |

Signature of the Retiring / Retired Government Servant  
Designation before Retirement.

**DECLARATION OF THE RETIRING GOVERNMENT SERVANT (See Rule-70A).**

I, ....., do hereby give my free and full consent that if any over payment made to me is detected while in service or after my retirement in respect of my General Provident Fund Account or on account of Gratuity, Pension and Temporary Increase on Pension etc., the same shall be recovered from my Temporary Increase on Pension or Gratuity payable to me or to my family at any time.

**Full Signature of the Retiring Govt.  
Servant with address.**

**PART-II**

**ACKNOWLEDGEMENT**

**Received from**

**Sri/Smt./Miss.....  
(name and designation of the retiring Government Servant)**

application in Form-E for sanction of Pension / Gratuity and Commutation Value of Pension with Medical Certificate / without Medical Certificate along with nomination in Form-C (strike out which is not applicable).

*\* (on receipt of the application by the Head of Office the Acknowledgement should be detached from the Form and to be handed over to the applicant as a proof of receipt of application).*

**Place:**

**Date.....**

**Signature of Head of Office/Authorised Authority**



## O.C.S.(PENSION) FORM-F

(To be Filled in by the Head of Office for sanction of Pensionary benefits)

See Rule 58(1), 61, 62(1), 62(2)(i) & 64

### PART-I

|     |                                                                                                                                                      |                                                         |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| 1.  | Verification of information details given by the retiring Government Servants in OCS (Pension) Form-6                                                | Verified the information given in OCS (Pension) Form E. |
| 2.  | Name of the Government Servant (In BLOCK LETTERS)                                                                                                    |                                                         |
| 3.  | Total Period of Gross Service                                                                                                                        |                                                         |
| 4.  | Total Period of Non-Qualifying Service                                                                                                               |                                                         |
|     | (i) Extra Ordinary Leave not Qualifying the Pension                                                                                                  |                                                         |
|     | (ii) Period of Suspension not treated as qualifying service.                                                                                         |                                                         |
|     | (iii) Any other period of service not qualifying for pension                                                                                         |                                                         |
| 5.  | Total Period of Net Qualifying Service<br>(Gross Period of Service – Period of Non-Qualifying Service)                                               |                                                         |
| 6.  | Any other Service Rendered to be added to the Qualifying Service<br>(to be specified by the PSA with reference to the Service Book Entry)            |                                                         |
| 7.  | Total Period of Qualifying Service for determination of pension.                                                                                     |                                                         |
| 8.  | Scale of Pay with Grade Pay, if any, at the time of Retirement.                                                                                      |                                                         |
| 9.  | Emoluments last drawn (Pay, Grade Pay or Personal Pay, if any, drawn as defined in Rule-2(e)(a)(b) of the OCS Pension Rules, 1992 read with Rule-48. |                                                         |
| 10. | Amount of Pension Payable per month.                                                                                                                 |                                                         |
| 11. | Amount of Gratuity payable<br>(Total Emoluments x No. of Half Yearly Qualifying Service) divided by 4, subjected to maximum limit.                   |                                                         |
| 12. | Commuted Value of Pension (Subjected to maximum limit of 40% of Pension)                                                                             |                                                         |
| 13. | Reduced Pension Receivable after Commutation                                                                                                         |                                                         |
| 14. | Amount of Family Pension Payable                                                                                                                     |                                                         |
|     | (i) Before attaining 65 years -                                                                                                                      |                                                         |
|     | (ii) After attaining 65 years -                                                                                                                      |                                                         |
| 15. | Outstanding Government dues for recovery.                                                                                                            |                                                         |
|     | (a) Outstanding Advances :-                                                                                                                          |                                                         |
|     | i) House Building Advance /Special House Building Advance with Interest:-                                                                            |                                                         |
|     | ii) Motor Car Advance with Interest:-                                                                                                                |                                                         |
|     | iii) Motor Cycle Advance with Interest.                                                                                                              |                                                         |
|     | (b) Outstanding fees for Occupation of Government Quarter.<br>Overpayment of pay and allowances including Leave Salary                               |                                                         |
|     | (c) Any other assessed dues payable to Government<br>(Please indicate details)                                                                       |                                                         |

|     |                                                                                                                                               |             |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 16. | Total Outstanding Government Dues Recoverable.                                                                                                |             |
| 17. | Amount of Gratuity to be withheld for un-assessed dues                                                                                        |             |
| 18. | Net Gratuity Payable<br>(Excluding recovery amount and the withheld amount)                                                                   |             |
| 19. | Total amount of Pension to be Commuted (Subject to maximum of 40% of Pension)                                                                 |             |
| 20. | Age on next Birth Day.                                                                                                                        |             |
| 21. | Total Amount of Commuted Value of Pension Payable in lieu of Commutation (Calculation to be made as per formula)                              |             |
| 22. | Details of sanction of Provisional Pension if any with date and amount .                                                                      |             |
| 23. | Whether application for final withdrawal of GPF has been sent to A.G., Odisha; (i) if yes give the letter No. & date (ii) if no give reasons. | (i)<br>(ii) |
| 24. | Place of payment (Name of Treasury/Special Treasury/<br>Sub Treasury                                                                          |             |

Signature of the Head of Office  
with DESIGNATION



## PART-II

(For use by Pension Sanctioning Authority)

Sanction is hereby accorded in favour of Shri/Smt./Kumari.....  
(Name with designation)

in the Dept./Office ..... for payment of pensionary benefits as admissible  
under rules.

1.

| Pension | Commutation<br>of Pension | Reduced<br>Pension after<br>Commutation | Total<br>Commutation<br>value of<br>Pension | Total<br>Retirement<br>Gratuity | Family Pension<br>in the event of<br>death of the<br>Pensioner. |                      | Name of<br>the<br>eligible<br>family<br>pensioner |
|---------|---------------------------|-----------------------------------------|---------------------------------------------|---------------------------------|-----------------------------------------------------------------|----------------------|---------------------------------------------------|
|         |                           |                                         |                                             |                                 | Before<br>65<br>years                                           | After<br>65<br>years |                                                   |
|         |                           |                                         |                                             |                                 |                                                                 |                      |                                                   |

2. Information on sanction of Provisional Pension/Gratuity and Commutation Value of Pension.

| Provisional Pensionary<br>Benefits Sanctioned | Provisional<br>Pension | Provisional Commutation<br>Value of Pension | Provisional<br>Retirement Gratuity |
|-----------------------------------------------|------------------------|---------------------------------------------|------------------------------------|
| Amount                                        |                        |                                             |                                    |
| Sanction Order No.                            |                        |                                             |                                    |
| Date of Sanction                              |                        |                                             |                                    |
| Designation of the<br>Sanctioning Authority   |                        |                                             |                                    |

The amount of outstanding Government dues and the amount to be withheld as suggested in Part-I  
of this form shall be taken into account before authorizing pensionary benefits to the Retired  
Government Servants by the Accountant General, Odisha.

Signature of the Pension Sanctioning  
Authority and designation.



### PART-III

|                                                                              |   |
|------------------------------------------------------------------------------|---|
| (See Pension Rule-64) and Rule-14 of OCS (Commutation of Pension) Rules-1992 |   |
| (ACCOUNT ENFORCEMENT BY THE PRINCIPAL ACCOUNTANT-GENERAL, ODISHA)            |   |
| 1. Name of Government Servant                                                | : |
| 2. Class of Pension                                                          | : |
| 3. Gross Service Admitted                                                    | : |
| 4. Admitted non-qualifying service                                           | : |
| 5. Admitted qualifying service                                               | : |
| 6. Addition to qualifying service                                            | : |
| 7. Admitted amount of pension/ service Gratuity                              | : |
| 8. Admitted amount of retirement gratuity                                    | : |
| 9. Admitted amount of family pension                                         | : |
| i) Before attaining 65 years                                                 | : |
| ii) After attaining 65 years                                                 | : |
| 10. Amount of outstanding Government dues recovered from gratuity.           | : |
| 11. Amount withheld from gratuity pending assessment of Government dues.     | : |
| 12. Commuted value of Pension allowed to surrender                           | : |
| 13. Net Pension Payable after Commutation.                                   | : |
| 14. Net Commuted Value of Pension Payable.:                                  |   |
| 15. Date of commencement of Pension.                                         | : |
| 16. Date of Commencement of Reduced Pension after Commutation:               | : |
| 17. Head of account to which pensionary benefits are debitable.              | : |

ACCOUNTS OFFICER

## O.C.S.(PENSION) FORM-G

(See Rule-62(2))

(Forwarding of Pension Papers of the retiring Government Servant to the  
Office of the A.G., Odisha)

GOVERNMENT OF ODISHA

\_\_\_\_\_ Department

To

The Accountant General (A&E), Odisha  
Bhubaneswar.

Sub:- Forwarding of Pension Papers.

Sir,

I am directed to forward herewith the pension papers of  
Sri/Smt./Kumari \_\_\_\_\_  
and Designation \_\_\_\_\_ working in this Department/Office for  
necessary authorization for drawl of pension/commuted value of pension/Gratuity as per  
the suggestion given in O.C.S. (Pension) Form-F and outstanding Government dues are to  
be recovered from the retirement Gratuity and pending assessment of any other  
outstanding Government dues amount as suggested may be withheld till final decision in  
this regard.

The fact of authorization of pensionary benefits has to be intimated to this  
Office/Department.

Yours faithfully,

Signature of the Pension Sanctioning  
Authority with Designation.

Details of Enclosures :-

1. OCS(Pension) Form-E.
2. OCS(Pension) Form-F.
3. Nomination Form in OCS (Pension) Form C.
4. Specimen Signature, Personal Identification Mark & three copies of Passport Size  
Joint /single Photograph of the retiring Government Servant duly attested by  
Pension Sanctioning Authority / Head of Office .
5. Original Service Book.
6. Original medical Certificate (in case of invalid pension).

Memo No. \_\_\_\_\_ Dt. \_\_\_\_\_

Copy forwarded to Sri/Smt./Kumari \_\_\_\_\_  
At \_\_\_\_\_, P.O. \_\_\_\_\_, Dist \_\_\_\_\_, Pin \_\_\_\_\_  
for information and necessary action.

Signature of the Pension Sanctioning  
Authority with Designation.

Memo No. \_\_\_\_\_ Dt. \_\_\_\_\_

Copy forwarded to the Head of Office for information and necessary action  
with reference to his office letter No. \_\_\_\_\_ Dated \_\_\_\_\_.

Signature of the Pension Sanctioning  
Authority with Designation.



# O.C.S.(PENSION) FORM-H

[See Rule 72(2)(b)&72(3)]

INFORMATION TO THE MEMBER/MEMBERS OF THE FAMILY OF THE DECEASED  
GOVERNMENT SERVANT FOR GRANT OF FAMILY PENSION AND DEATH GRATUITY  
(WHERE VALID NOMINATION EXISTS/WHERE VALID NOMINATION DOES NOT EXIST).

Name of Office / Department \_\_\_\_\_

Letter No. \_\_\_\_\_ Dt. \_\_\_\_\_

To

\_\_\_\_\_  
\_\_\_\_\_

Subject -Payment of Family Pension and Death Gratuity in respect of late  
Shri/Smt. \_\_\_\_\_.

Sir/Madam,

(i) I am directed to state that in terms of the nomination made by Late Shri/Smt. \_\_\_\_\_ (designation) in the Office/Department of \_\_\_\_\_, death gratuity is payable to his/her nominee(s) a copy of the said nomination is enclosed herewith.

(ii) I am directed to state that no nomination has been made by Late Shri/Smt. \_\_\_\_\_ (designation) in the Office/Department of \_\_\_\_\_ / the nomination though made either does not subsist or found to be invalid. The death gratuity is payable to following family members in equal shares as per Rule-49 of the Odisha Civil Service Pension Rules, 1992 as per Legal heir successor CH.

(a) Wife/Husband including judicially separated wife/husband.

(b) Sons including step Sons and adopted sons.

(c) Unmarried daughters including step daughters and adopted daughters.

(iii) (iii) In the event of there being no surviving member of the family as indicated above, the gratuity will be payable to the following members of the family in equal shares: as per Legal heir successor CH.

(a) Widowed daughters including step daughters and adopted daughters.

(b) Father including adoptive father in case of individuals whose personal law permits adoption.

(c) Mother including adoptive mother in case of individuals whose personal law permits adoption.

(d) Brothers below the age of eighteen years including step brothers and unmarried or widowed sisters including step sisters.

(e) Married daughters and Children of a pre-deceased son.

(f) Children born out of void wedlock.

(iv) Family Pension payable to widow/ widower/Children including disabled son/disabled daughter/disabled widowed/disabled divorced daughters/Un-married/widowed/divorced daughters/ Father/ Mother (strike out whichever is not applicable).

(v) It is requested that claim for the grant of gratuity may be submitted in the enclosed OCS (Pension) **Form J** and claim for family pension in OCS (Pension)**Form K** as soon as possible.

Yours faithfully,

Head of Office

**N.B. :-** Strikeout which is not applicable before sending the letter.

# O.C.S. (PENSION) FORM-J

[See rule 72(2)]

## APPLICATION FOR GRANT OF DEATH GRATUITY ON THE DEATH OF A GOVERNMENT SERVANT

(To be filled in by the nominee or separately by each claimant and in case the claimant is minor, the Form should be filled in by the guardian on his/her behalf, Where there are more than one minor, the guardian should claim gratuity in one Form on their behalf.)

|                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------|----------------------|-----------------------------------------------------------|
| 1.                                                                                                                                                                                                                                     | Name of the deceased Government Servant in respect of whom gratuity is claimed.                                                                                               |                                                                                         |                                               |                      |                                                           |
| 2.                                                                                                                                                                                                                                     | Date of death of Government Servant                                                                                                                                           |                                                                                         |                                               |                      |                                                           |
| 3.                                                                                                                                                                                                                                     | Office / Department in which the deceased served last.                                                                                                                        |                                                                                         |                                               |                      |                                                           |
| 4.                                                                                                                                                                                                                                     | Names of the claimants with relationship with the deceased Government Servant                                                                                                 |                                                                                         | <i>Give details below</i>                     |                      |                                                           |
|                                                                                                                                                                                                                                        | Name of the Claimant/Nominee/<br>Name of the Guardian<br>(in case the claimants are minors)                                                                                   | Date of Birth of Claimant/Nominee/<br>Date of Birth of Guardian (in case of minor)<br>* | Relationship with deceased Government Servant | Name of the minor(s) | Relationship with the Guardian<br>[[in case of minor(s)]] |
|                                                                                                                                                                                                                                        | (1)                                                                                                                                                                           | (2)                                                                                     | (3)                                           | (4)                  | (5)                                                       |
|                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
|                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
|                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
|                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
| * The date of Birth furnished in the format above is to be supported by proof of the date of birth as recorded on the certificate (s) furnished by the School/College/Municipal/Local Panchayat Authorities/Register of Birth & Death. |                                                                                                                                                                               |                                                                                         |                                               |                      |                                                           |
| 5.                                                                                                                                                                                                                                     | Documents to be submitted by the Applicant:-                                                                                                                                  |                                                                                         |                                               |                      |                                                           |
| (i)                                                                                                                                                                                                                                    | Two Specimen Signature of the Claimant/Nominee/Guardian duly attested by Head of Office (Left Hand Thumb impression and finger impression if the applicant is not literate).  |                                                                                         |                                               |                      |                                                           |
| (ii)                                                                                                                                                                                                                                   | Two Passport Size Photographs duly attested by Head of Office.                                                                                                                |                                                                                         |                                               |                      |                                                           |
| (iii)                                                                                                                                                                                                                                  | Attested copy of Proof of Date of Birth issued by competent authority like Birth Certificate, Certificate issued by School / College / Municipal / Local Panchayat Authority. |                                                                                         |                                               |                      |                                                           |

Contd.....



|    |                                                                                   |  |                                                                                                  |
|----|-----------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------|
| 6. | Name of the Treasury / Sub-treasury /Special Treasury at which payment is desired |  |                                                                                                  |
| 7. | Name of the Bank where Gratuity amount is to be credited.                         |  | Name of the<br>Bank _____<br>Branch _____<br>A/c No. _____<br>IFSC Code _____<br>MICR Code _____ |

Signature of the Claimant  
or Thumb Impression (in case  
Claimant is illiterate)

Received the Application form for sanction of Gratuity from  
Shri/Smt. \_\_\_\_\_ on dt. \_\_\_\_\_.

Signature of the Head of the Office  
Where G.S. last served.



# O.C.S. (PENSION) FORM-K

[See rule 72(3) and 80 (2)]

(Application for the grant of Family Pension on the death of a Government  
Servant/pensioner)

|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------|
| 1.                                                                                                                                                                                                                                                | Name of the Deceased Government Servant/Pensioner.                                                                                                                                                                                                          |                                                                                               |                                      |                                                               |
| 2.                                                                                                                                                                                                                                                | Date of death of the Government. Servant/Pensioner<br>(enclose attested copy of death certificate)                                                                                                                                                          |                                                                                               |                                      |                                                               |
| 3.                                                                                                                                                                                                                                                | Name and Address of the Applicant for family pension.                                                                                                                                                                                                       |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   | (a)Widow / Widower/ Father/ Mother.                                                                                                                                                                                                                         |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   | (b)Guardian, if the deceased person is survived by minor Child or Children including disabled son/disabled daughter/disabled widowed/disabled divorced daughters<br>(enclose the attested copy of Legal Guardian Certificate issued by the Collector & D.M. |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   | (c) Un-married/widowed/divorced daughters even after attaining the age of Twenty Five years.( enclose substantive documents)                                                                                                                                |                                                                                               |                                      |                                                               |
| 4.                                                                                                                                                                                                                                                | Name and age of surviving widow/widower/ Father/Mother/Guardian and children of the deceased Government servant / pensioner.                                                                                                                                | <i>Give details below</i>                                                                     |                                      |                                                               |
| (a)                                                                                                                                                                                                                                               | Name                                                                                                                                                                                                                                                        | Relationship<br>With the deceased<br>person.                                                  | Date of birth by<br>Christian era. * | Age on date of<br>death of<br>Government<br>servant/pensioner |
|                                                                                                                                                                                                                                                   | (1)                                                                                                                                                                                                                                                         | (2)                                                                                           | (3)                                  | (4)                                                           |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
|                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
| <p>* The date of Birth furnished in the format above is to be supported by proof of the date of birth as recorded on the certificate (s) furnished by the School/College/Municipal/Local Panchayat Authorities/Register of birth &amp; death.</p> |                                                                                                                                                                                                                                                             |                                                                                               |                                      |                                                               |
| 5.                                                                                                                                                                                                                                                | P.P.O. No. of the deceased pensioner                                                                                                                                                                                                                        |                                                                                               |                                      |                                                               |
| 6.                                                                                                                                                                                                                                                | If the applicant is guardian/legal guardian<br>i) Date of birth of minor<br>ii) Relationship of minor with the deceased Government Servant / pensioner                                                                                                      |                                                                                               |                                      |                                                               |
| 7.                                                                                                                                                                                                                                                | Name of the Bank where pensionary benefits are to be credited.                                                                                                                                                                                              | Name of the Bank _____<br>Branch _____<br>A/c No. _____<br>IFSC Code _____<br>MICR Code _____ |                                      |                                                               |

|       |                                                                                                                                                                                                                                                                          |  |
|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 8.    | Documents to be submitted                                                                                                                                                                                                                                                |  |
| (i)   | Two specimen signatures of the applicant, duly attested by the Head of Office (To be furnished in two separate sheets).                                                                                                                                                  |  |
| (ii)  | Two copies of passport size photograph of the applicant, duly attested by Head of Office.                                                                                                                                                                                |  |
| (iii) | If Illiterate, Two slips each bearing left hand thumb and finger impression of the applicant, duly attested Head of Office.                                                                                                                                              |  |
| (iv)  | Descriptive Roll of the applicant, duly attested by Gazetted Officer/Head of Office indicating (a) height and (b) personal identification marks, if any. (To be furnished in duplicate).                                                                                 |  |
| (v)   | Proof of Age :- Attested copy of proof of Date of Birth issued by competent authority like Birth Certificate, Certificate issued by School / College / Municipal / Local Panchayat Authority.                                                                            |  |
| 9.    | Name of Treasury or Sub-Treasury or Special Treasuryat which payment is desired.                                                                                                                                                                                         |  |
| 10.   | Whether pension/family pension is admissible/received from any other source (military or any other State Government or Central Government and / or a public sector undertaking / autonomous body/local fund under the State or Central Government. (If Yes give Details) |  |

Signature of the Applicant.

Received the Application form for sanction of family pension from Shri/Smt. \_\_\_\_\_  
on dt. \_\_\_\_\_.

Signature of the Head of the  
Office with seal.



# O.C.S. (PENSION)FORM-L

[See rule 73(1) and 75, 77]

Form for assessing and sanctioning family pension / death gratuity in case of death while in service.

( To be sent in duplicate if payment is desired in a different unit of accounting circle)

## PART - I

|     |                                                                                                              |         |
|-----|--------------------------------------------------------------------------------------------------------------|---------|
| 1.  | Name of the deceased Government Servant                                                                      |         |
| 2.  | Father's name (and also husband's name in case of female Government Servant)                                 |         |
| 3.  | Date of birth ( by Christian era ) .                                                                         |         |
| 4.  | Date of death (by Christian era) .                                                                           |         |
| 5.  | Permanent address .                                                                                          |         |
| 6.  | Name of the Establishment last served                                                                        |         |
| 7.  | Amount and nature of any pensionary benefits received for previous services if any (both Civil & Military) . |         |
|     | (i) Amount of pension.                                                                                       |         |
|     | (ii) Amount of retirement gratuity.                                                                          |         |
|     | (iii) Amount of family pension.                                                                              |         |
| 8.  | Date of beginning of service.                                                                                |         |
| 9.  | Length of gross service (sl.4 – sl.8) .                                                                      |         |
| 10. | Total Periods of non-qualifying service.                                                                     |         |
|     | (i) Interruption in service condoned.                                                                        |         |
|     | (ii) Extraordinary leave not qualifying for pension.                                                         |         |
|     | (iii) Period of suspension not treated as qualifying service.                                                |         |
|     | (iv) Any other service not treated as qualifying service                                                     |         |
| 11. | Total qualifying service (sl.10 – sl.11)                                                                     |         |
| 12. | Emoluments last drawn in terms of rule 48.                                                                   |         |
| 13. | Proposed amount of family pension (Rs.)                                                                      |         |
|     | (i) At enhanced rate (Rs.)                                                                                   | From To |
|     | (ii) At ordinary rate (Rs.)                                                                                  | From    |
| 14. | Proposed amount of death gratuity (Rs.)                                                                      |         |
| 15. | Outstanding Government dues for recovery from death gratuity.                                                |         |
|     | (i) Licence fee for Government accommodation                                                                 |         |
|     | (ii) Balance of House Building/Special Housing Building / Conveyance or other long term Advance.             |         |
|     | (iii) Over payment of pay and allowances including leave salary with Head of Account.                        |         |
|     | (iv) Any other assessed dues recoverable and the nature thereof and head of account to which to be credited. |         |

|       |                                                                                           |                                |                                                                                               |
|-------|-------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------|
| 16.   | Amount to be held over from gratuity pending assessment of any other Government dues.     |                                |                                                                                               |
| 17.   | Amount of provisional pensionary benefits sanctioned.(if any)                             |                                |                                                                                               |
| (i)   | Amount of family pension.                                                                 |                                |                                                                                               |
| (ii)  | Amount of death gratuity.                                                                 |                                |                                                                                               |
| (iii) | Amount of outstanding Government dues to be recovered from provisional gratuity.          |                                |                                                                                               |
| 18.   | Person/Guardian to whom family pension is payable.                                        |                                |                                                                                               |
| (i)   | Name                                                                                      |                                |                                                                                               |
| (ii)  | Relationship with the deceased Government Servant.                                        |                                |                                                                                               |
| (iii) | Full postal address                                                                       |                                |                                                                                               |
| 19.   | Persons to whom death gratuity is payable when valid nomination exists/does not subsists. |                                |                                                                                               |
|       | Name (s)                                                                                  | Relationship With the deceased | Amount of share payable                                                                       |
|       |                                                                                           |                                |                                                                                               |
|       |                                                                                           |                                |                                                                                               |
|       |                                                                                           |                                |                                                                                               |
| 20.   | Name of Treasury/special Treasury/sub-treasury where payment is to be made.               |                                |                                                                                               |
| 21.   | Name of the Bank where pensionary benefits are to be credited.                            |                                | Name of the Bank _____<br>Branch _____<br>A/c No. _____<br>IFSC Code _____<br>MICR Code _____ |
| 22.   | Head of account to which family pension/death gratuity are debitable .                    |                                |                                                                                               |

Signature with designation of  
the Head of Office

## PART-II

(For use by Pension Sanctioning Authority)

Sanction is hereby accorded in favour of Shri/Smt./Kumari.....

for payment of following pensionary benefits as admissible under rules consequent on the death of

Shri/Smt./Kumari.....

(Name with Designation)

in the Department /Office.....

1.A.

| Family Pension             |  | Name of the Family Pensioner |
|----------------------------|--|------------------------------|
| at the enhanced rate up to |  |                              |
| at the normal rate w.e.f.  |  |                              |

1.B.

| Retirement Gratuity | Name (s) of the claimants | Percentage of share |
|---------------------|---------------------------|---------------------|
|                     |                           |                     |
|                     |                           |                     |
|                     |                           |                     |

2.Information on sanction of Provisional Pension/Gratuity.

| Provisional Pensionary Benefits Sanctioned | Provisional Pension | Provisional Gratuity |
|--------------------------------------------|---------------------|----------------------|
| Amount                                     |                     |                      |
| Sanction Order No.                         |                     |                      |
| Date of Sanction                           |                     |                      |
| Designation of the Sanctioning Authority   |                     |                      |

The amount of outstanding Government dues to be recovered and the amount to be withheld as suggested in Part-I of this form shall be taken into account before authorizing pensionary benefits to the Pensioner by the Accountant General, Odisha.

Signature of the Pension Sanctioning Authority and designation.



## PART-III

(ACCOUNT ENFORCEMENT BY THE PRINCIPAL ACCOUNTANT GENERAL, ODISHA)

|     |                                                                            |                              |
|-----|----------------------------------------------------------------------------|------------------------------|
| 1.  | Name of deceased employee                                                  |                              |
| 2.  | Date of death                                                              |                              |
| 3.  | Gross service admitted                                                     |                              |
| 4.  | Admitted non-qualifying service.                                           |                              |
| 5.  | Admitted qualifying service                                                |                              |
| 6.  | Date of commencement of family pension                                     |                              |
| 7.  | Admitted amount of family pension                                          |                              |
|     | (a) At enhanced rate                                                       | From                      To |
|     | (b) At normal rate                                                         | From                         |
| 8.  | Admitted amount of death gratuity                                          |                              |
| 9.  | Amount of outstanding Government dues recovered from gratuity.             |                              |
| 10. | Amount of provisional family pension/death gratuity to be adjusted.        |                              |
| 11. | Amount withheld from death gratuity pending assessment of Government dues. |                              |
| 12. | Head of account to which pensionary benefits are to be debited.            |                              |

ACCOUNTS OFFICER



# O.C.S.(PENSION) FORM-M

[See rule 73(1) and 75 (2)]

Form for forwarding the family pension/death gratuity papers of a deceased  
Government Servant/Pensioner to the Accountant General/ Controller of Accounts.

GOVERNMENT OF ODISHA

\*\*\*\*\*

Letter No. \_\_\_\_\_ Dt. \_\_\_\_\_

Department / Office \_\_\_\_\_

To

The Accountant-General, Odisha/  
The Controller of Accounts, Odisha,  
Bhubaneswar.

Sub:- forwarding of family pension / death gratuity papers.

Sir,

I am directed to forward herewith the family pension / death gratuity papers of  
Shri/Smt./Kumari \_\_\_\_\_

(Name with designation)

In the Department/Office \_\_\_\_\_ as per the details given  
below for further necessary action.

## LIST OF ENCLOSURES

|     |                                                                                                                                                                            |  |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1.  | Application for family pension in O.C.S (Pension) Form K                                                                                                                   |  |
| 2.  | Application (s) for death gratuity in O.C.S. (Pension) Form J<br>[Application in OCS (Pension) Form J for each of the claimants separately 1 copy each to be furnished.    |  |
| 3.  | Form for assessing and sanctioning family Pension in OCS (Pension) Form L .<br>(To be sent in duplicate where pension is desired in different circles of accounting unit). |  |
| 4.  | Attested copy of the death certificate.                                                                                                                                    |  |
| 5.  | Attested copy of legal heir certificate where no valid nomination subsists.                                                                                                |  |
| 6.  | Attested copy of nomination in OCS (Pension) Form C .                                                                                                                      |  |
| 7.  | Guardianship certificate where payment of death gratuity exceeds Rs.50,000 (if the claim is by the guardian) or indemnity bond whichever is applicable.                    |  |
| 8.  | Slip containing specimen signatures for each of the claimants duly attested(in duplicate)                                                                                  |  |
| 9.  | Slip containing height, personal marks of identifications for each of the claimants duly attested. (in duplicate)                                                          |  |
| 10. | Passport size photograph of the applicant in OCS (Pension) Form K(in duplicate)                                                                                            |  |
| 11. | Original /Duplicate Service Book.                                                                                                                                          |  |

2. Following outstanding government dues are to be recovered from the death gratuity and to be adjusted:-

- (i) Licence fee for Government Accommodation \_\_\_\_\_.
- (ii) Balance of House Building / Special Housing Building / Conveyance and Other Advances \_\_\_\_\_.
- (iii) Over payment of Pay and Allowance including Leave Salary \_\_\_\_\_.
- (iv) Any other assessed Government Dues \_\_\_\_\_.

3. Pending assessment of any of the above outstanding Government dues, if any, necessary amount as required under rule 78(1)(vi) shall be withheld from death gratuity.

4. The payment of provisional family pension/death gratuity shall be adjusted from the final payment. Sanction of provisional family pension and gratuity order enclosed.

5. The fact of authorisation of Pensionary benefits is to be intimated to this Department / Office.

Yours faithfully,

Signature with designation of  
Pension Sanctioning Authority

Memo No. \_\_\_\_\_ Dt. \_\_\_\_\_

Copy forwarded to Shri/Smt. \_\_\_\_\_ for information  
with reference to the application in Form-H and Form-J and Head of Office with reference to the letter  
No. \_\_\_\_\_ dt. \_\_\_\_\_ for information and necessary action.

Signature and designation of  
Pension sanctioning Authority

# O.C.S. (PENSION) FORM-N

[See rule 65 (4), 76 (1) and 9 & 15 of  
OCS Commutation of Pension Rules]

FORM FOR SANCTIONING PROVISIONAL PENSION, PROVISIONAL FAMILY PENSION,  
PROVISIONAL COMMUTED VALUE OF PENSION AND PROVISIONAL GRATUITY

Space for  
Photograph\*

Sanction is hereby accorded for payment of provisional Pension, provisional Family Pension, Provisional Commuted Value of Pension and Provisional Gratuity as indicated below if favour of Shri/Smt. \_\_\_\_\_ pending issue of final P.P.O. and G.P.O. by the Accountant General, Odisha.

|       |                                                                                                                        |  |
|-------|------------------------------------------------------------------------------------------------------------------------|--|
| 1.    | Name of the Pensioner/Family Pensioner                                                                                 |  |
| 2.    | Father's/Husband's name                                                                                                |  |
| 3.    | Office / Department in which the Pensioner/deceased Govt. servant served last                                          |  |
| 4.    | Permanent Address                                                                                                      |  |
| 5.    | (a) Amount of Provisional Pension/Family Pension                                                                       |  |
|       | (b) Date from which Provisional Pension/Family Pension is payable                                                      |  |
| 6.(a) | Amount of retirement/death gratuity                                                                                    |  |
| (b)   | Amount of gratuity to be deducted towards the outstanding Govt. dues as per details below :-                           |  |
|       | (i) Licence fee for Govt. accommodation                                                                                |  |
|       | (ii) Balance of house building/Special House Building conveyance & other advance with interest, if any.                |  |
|       | (iii) Over payment of pay & allowance Including leave salary                                                           |  |
|       | (iv) Any other assessed Government dues                                                                                |  |
| (c)   | Amount of gratuity to be held over for Adjustment of un-assessed Government Dues.                                      |  |
| (d)   | Amount of gratuity payable to the pensioner                                                                            |  |
| (e)   | Amount of gratuity, if any payable to the members of family of the deceased Government servant as per details below :- |  |
|       | (i)                                                                                                                    |  |
|       | (ii)                                                                                                                   |  |
|       | (iii)                                                                                                                  |  |
| (f)   | Amount of Provisional Commuted Value of Pension.                                                                       |  |
|       | (i) Amount of provisional pension commuted                                                                             |  |
|       | (ii) commuted value of provisional pension                                                                             |  |
|       | (iii) The amount of provisional pension payable for month after commutation.                                           |  |

Pension Sanctioning Authority

Signature and seal of the



Memo No. \_\_\_\_\_ Dt. \_\_\_\_\_

Copy forwarded to \_\_\_\_\_ (Head of Offices)/Treasury/sub-Treasury/Special Treasury officer \_\_\_\_\_ / Accountant General, Odisha, Bhubaneswar/Beneficiary concerned Shri/Smt. \_\_\_\_\_, for information and necessary action.

Signature and seal of the Pension  
Sanctioning Authority/ Head of Office

---

\* Joint photograph in case of Provisional Pension and single photograph of the claimant for Provisional Family Pension.

\*\* Score the items not necessary.

**INDEMNITY BOND**  
**O.C.S. (PENSION)FORM-P**  
[ see rule 55 (3) ]

Form of bond of Indemnity for payment of minor(s) share of death/retirement gratuity up to Rs.50,000 (rupees fifty thousand) to the person without production of guardianship certificate.

KNOW ALL MEN by these presents that we (a) \_\_\_\_\_  
(b) \_\_\_\_\_ the widow/son/brother, etc. of (c) \_\_\_\_\_ deceased,  
resident of \_\_\_\_\_ (hereinafter called "the Obligor") and  
(d) \_\_\_\_\_ son/wife/daughter of \_\_\_\_\_ resident of  
\_\_\_\_\_ and (e) \_\_\_\_\_ son/wife/daughter of  
\_\_\_\_\_ resident of \_\_\_\_\_ the sureties for and on behalf of  
the Obligor (hereinafter called "the Sureties") are held firmly bound to the Governor of  
Odisha (hereinafter called "the Government" in the sum of Rs. \_\_\_\_\_  
(Rupees \_\_\_\_\_ only) well and truly to be paid to the Government on  
demand and without a demur for which payment we bind ourselves and our respective  
heirs, executors, administrators, legal representatives, successors and assigns by these  
presents.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ Two thousand and  
\_\_\_\_\_ and

WHEREAS (c) \_\_\_\_\_ at the time of his death in the employment of the  
Government/Pensioner receiving salary at the rate of Rs. \_\_\_\_\_  
(Rupees \_\_\_\_\_ only) per month / pension at the rate of  
Rs. \_\_\_\_\_ per month from the Government.

AND WHEREAS the said (c) \_\_\_\_\_  
died on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ and there  
was due to him at the time of his death the sum of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_  
only) for and towards share of his minor son (s) /daughter (s) the death/retirement gratuity.

AND WHEREAS the "Obligor" claims to be entitled to the said sum as de facto  
guardian of the minor son (s) /daughter (s) of the said (c) \_\_\_\_\_ but has not  
obtained till the date of these presents the certificate of guardianship from any competent  
Court of law in respect of the said minor (s).

AND WHEREAS the "Obligor" has satisfied (d) & (e) \_\_\_\_\_ that he/she  
is entitled to the aforesaid sum and that it would cause undue delay and hardship if the  
"Obligor" be required to produce the certificate of guardianship from the competent Court  
of law before payment to him of the said sum of Rs. \_\_\_\_\_.



And WHEREAS the Government has no objection to the payment of the said sum of the "Obligor" but under Government Rules and Orders, it is necessary for the "Obligor" to first execute a bond with one surety/two sureties to indemnify the Government against all claims to the amount so due as aforesaid to the said (c) \_\_\_\_\_ before the said sum can be paid to the "Obligor".

AND WHEREAS the "Obligor" and at his/her request the surety/sureties have agreed to execute the bond in the terms and manner hereinafter contained.

NOW THE CONDITION OF THIS BOND is such that if after payment has been made to the "Obligor", the "Obligor" and/or the surety/sureties shall in the event of a claim being made by any other person against the Government with respect to the aforesaid sum of Rs. \_\_\_\_\_ refund to the Government the said sum of Rs. \_\_\_\_\_ and shall otherwise indemnify and keep the Government harmless and indemnified against and from all liabilities in respect of the aforesaid sum and all costs incurred in consequence of the claim thereto. Then the above written bond or obligation shall be void and of no effect but otherwise it shall remain in full force, effect and virtue.

AND THESE PRESENTS ALSO WITNESS that the liability of the sureties hereunder shall not be impaired or discharged by reason of time being granted by or any forbearance act or omission of the Government whether with or without the knowledge or consent of the surety/sureties in respect of or in relation to the obligations or conditions to be performed or discharged by the "Obligor" or by any other method or thing what so ever which under the law relating to the sureties, shall but for this provision have the effect of so relating the surety/sureties from such liability nor shall it be necessary for the Government to sue the "Obligor" before suing the surety/sureties or either of them for the amount due here under, and the Government agrees to bear the stamp duty, if any, chargeable on these presents.

IN WITNESS WHEREOF the "Obligor" and the surety/sureties hereto have set and subscribed the respective hands hereunto on the day, month and year above written,

Signed by the above named 'Obligor' in the presence of

1. \_\_\_\_\_
2. \_\_\_\_\_

Signed by the above named Surety/Sureties

1. \_\_\_\_\_
2. \_\_\_\_\_

Accepted for and on behalf of the Governor of Odisha by

Names and designations of the Officer directed or authorised, in pursuance of Article 229 (1) of the Constitution, to accept the bond for and on behalf of the Governor in the presence of

(Name and designation of witness)

Contd.....

NOTE I. (a) Full name of the claimant referred to as the 'Obligor'

(b) State relationship of the Obligor to the deceased.

(c) Name of the deceased Government Officer.

(d) Full name or names of the sureties with name or names of the father(s)/husband(s) and place of residence.

(e) Designation of the Officer responsible for payment.

NOTE II. The Obligor as well as the sureties should have attained majority so that the bond may have legal effect or force.



**INDEMNITY BOND**  
**O.C.S. (PENSION)FORM-Q**  
[see rule 56 (19)(ii)(b)& 56 (20)(B)(b)]

(Form of Indemnity Bond for payment of family pension/Death gratuity in case of disappearance of the Government Servant while in service/disappearance of Pensioner).

KNOW ALL MEN by these presents that we (a) \_\_\_\_\_ (b) \_\_\_\_\_ the wife/son/brother/nominee etc. of (c) \_\_\_\_\_ who was holding the post of \_\_\_\_\_ in the Department/Office of \_\_\_\_\_/who was in receipt of pension from \_\_\_\_\_ is reported to have been missing since \_\_\_\_\_ (hereinafter referred to as 'missing Government Servant /missing pensioner) resident of \_\_\_\_\_ (hereinafter called "the Obligor") and (d) Shri \_\_\_\_\_ son/wife/daughter of Shri \_\_\_\_\_ resident of \_\_\_\_\_ and (e) Shri \_\_\_\_\_ son/wife/daughter of \_\_\_\_\_ resident of \_\_\_\_\_ the sureties for and on behalf of the "Obligor (hereinafter called "the sureties") are held firmly bound to the Government of Odisha(hereinafter called "the Government") in the sum of Rs. \_\_\_\_\_ (in words) \_\_\_\_\_ equivalent of the amount on account of payment of salary, leave encashment, G.P.F., Pension, Retirement/Death Gratuity and each and every sum being the monthly family pension will and truly to be paid to the Government on demand and without a demur together with simple interest at the rate \_\_\_\_\_ per cent p.a. from the date of payment thereof until repayment for which payment we bind ourselves and our respective heirs, executors, administrators, legal representatives, successors and assigns by these presents.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ TwoThousand \_\_\_\_\_.

AND WHEREAS (c) \_\_\_\_\_ was at the time of his disappearance is in the employment of the Government and receiving pay at the rate of Rs. \_\_\_\_\_ (in words) \_\_\_\_\_ only per month from the Government/is in receipt of pension at the rate of Rs. \_\_\_\_\_ (in words) \_\_\_\_\_ per month.

AND WHEREAS the said (c) \_\_\_\_\_ disappeared on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ and there was dues payable to him at the time of his disappearance the sum equivalent of (i) Salary Due (ii) Leave Encashment (iii)G.P.F. (iv) Pension and (v) Retirement /Death Gratuity.

AND WHEREAS the Obligor is entitled to family pension of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ only) plus admissible temporary increase thereon.

AND WHEREAS the Obligor has represented that he/she is entitled to the aforesaid sum and approached the Government for making payment thereof to avoid undue delay and hardship.

AND WHEREAS the Government has agreed to make payment of the said sum of Rs. \_\_\_\_\_ (in words) and monthly family pension @ Rs. \_\_\_\_\_ (in words) \_\_\_\_\_ only and temporary increase thereon to the Obligor upon the Obligor and the Sureties entering into a Bond for the above mentioned sum to indemnify the Government against all claims to the amount so due to the aforesaid missing Government servant/Pensioner.

AND WHEREAS the Obligor and at his/her request the Surety/Sureties have agreed to execute the bond in the terms and manner hereinafter contained.

NOW THE CONDITION OF THIS BOND is such that if after payment has been made to the Obligor, the Obligor and or the Surety/Sureties shall in the event of a claim being made, by any other person or the missing employee/pensioner on appearance, against the Government with respect to the aforesaid sum of Rs. \_\_\_\_\_ (in words) \_\_\_\_\_ and the sum paid by the Government as monthly pension, temporary increase and other dues as aforesaid then refund is to be made to the Government for each and every sum paid along with simple interest @ \_\_\_\_\_ % per annum and shall, otherwise, indemnify and keep the Government harmless and indemnified against and from all liabilities in respect of the aforesaid sums and all costs incurred in consequence of the claim thereto. THEN the above written Bond or obligation shall be void and of no effect but otherwise it shall remain in full force, effect and virtue.

AND THESE PRESENTS ALSO WITNESS that the liability of the Surety/Sureties hereunder shall not be impaired or discharged by reason of time being granted by or any forbearance act or omission of the Government whether with or without the knowledge or consent of the surety/sureties in respect of or in relation to the obligations or conditions to be performed or discharged by the Obligor or by any other method or thing what so ever which under the law relating to sureties would but this provision shall have no effect of so releasing the Surety/Sureties from such liability nor shall it be necessary for the Government to sue the Obligor before suing the Surety/Sureties or either of them for the amount due hereunder, and the Government agrees to bear the stamp duty, If any, chargeable on these presents.

IN WITNESS WHEREOF the Obligor and the Surety/Sureties hereto have set and subscribed their respective hands hereunto on the day, month and year above written.

Signed by the above named 'Obligor' in the presence of

1. \_\_\_\_\_

2. \_\_\_\_\_

Signed by the above named 'Surety/Sureties'

1. \_\_\_\_\_

2. \_\_\_\_\_

Accepted for and on behalf of the Governor of Odisha \_\_\_\_\_  
by (Name and Designation of the Officer directed or authorised, or in pursuance of Article 299(1) of the Constitution, to accept the Bond for and on behalf of the Governor) in the presence of \_\_\_\_\_

(Name and designation of witness)

Contd.....



**Note I.** (a) full name of the claimant referred to as the 'Obligor'.

(b) State relationship of the "Obligor" to the missing Government Servant/Pensioner.

(C) Name of the 'missing Government Servant'/Pensioner.

(d) Full name or names of the sureties with names or names of the father (s) / husband (s) and place of residence.

**Note II.** The Obligor as well as the sureties should have attained majority so that the bond may have legal effect or force.

**Note III.** The rate of simple interest will be as prescribed; by the Government from time to time.

**Note IV.** Strikeout the portion which is not applicable to the case either as a Government Servant or as Pensioner.



# O.C.S. (PENSION)FORM-R

[ see rule 80 (2) ]

Form for Sanction of Family Pension to the child or children of a retired Government Servant who dies after retirement but does not leave behind a widow or widower.

GOVERNMENT OF ODISHA

\*\*\*\*\*

Department of \_\_\_\_\_ Office of \_\_\_\_\_

Letter No. \_\_\_\_\_ Dt. \_\_\_\_\_

To

The Accountant General,  
Odisha, Bhubaneswar.

Subject – Grant of Family Pension to the child/children/Guardian (in case of minor(s)).

Sir,

I am directed to say that Shri/Shrimati \_\_\_\_\_ formerly  
(Designation) \_\_\_\_\_ working in this Department/Office was authorised  
pension of Rs. \_\_\_\_\_ with effect from \_\_\_\_\_ on his/her  
retirement from service.

2. Intimation has been received in this Department/Office that  
Shri/Smt. \_\_\_\_\_ died on \_\_\_\_\_ and that at the time of  
death left no widow/widower but was survived by the following children.

| Sl.no. | Name (*) | Son/<br>Daughter | Date of birth<br>in<br>Christian Era | Name of the Guardian (In<br>case on minor(s)) |
|--------|----------|------------------|--------------------------------------|-----------------------------------------------|
| (1)    |          |                  |                                      |                                               |
| (2)    |          |                  |                                      |                                               |
| (3)    |          |                  |                                      |                                               |

3. In term of rules 56 of the Odisha Civil Services (Pension) rules, 1992 the amount of family pension has become payable to the children in the order mentioned above. The family pension will be payable on behalf of the minor to Shri/Smt. \_\_\_\_\_ who is the guardian.
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 from \_\_\_\_\_ and subject to the provision of sub-rule(5) of Rule 56 of the Odisha Civil Services (Pension) rules, 1992 will be tenable till \_\_\_\_\_.
5. The family Pension is debitable to the Head \_\_\_\_\_.
6. List of documents enclosed are :-
- (i) Permanent address of the Child/Children/Guardian .
  - (ii) Specimen signature or \*\* left hand thumb and finger impressions of the claimant or guardian duly attested by Head of Office/Gazetted Officer.
  - (iii) Two attested copies of passport size photograph of the Child/Children/Guardian.
  - (iv) Descriptive roll of the Child/Children/Guardian, duly attested.

7. Name of the Treasury where payment is to be made (Treasury/Sub-Treasury/Special Treasury):-

8. Name of the Bank where payment is to be made:-

Branch.....

A/c no.....

IFSC Code.....MICR Code.....

9. The receipt of this letter may kindly be acknowledged and this Department/Office be informed that instructions for the payment of family pension to the Child/Children/Guardian have been issued to the disbursing authority concerned.

Pension Sanctioning Authority

\* The names of children should be mentioned in the order of eligibility mentioned in Rule 56 (7) (c) of the Orissa civil Services (Pension) Rules, 1992.

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

# O.C.S.(PENSION)FORM-S

[ see rule 80 (2) ]

Form for sanctioning Family Pension to the child or children on the death or re-marriage of a widow/widower who was in receipt of Family Pension.

GOVERNMENT OF ODISHA

\*\*\*\*\*

Department of \_\_\_\_\_ Office of \_\_\_\_\_

Letter No. \_\_\_\_\_ Dt. \_\_\_\_\_

To

The Accountant General, Odisha, Bhubaneswar.

Subject – Grant of Family Pension to the child/children.

Sir,

I am directed to say that Shri/Smt. \_\_\_\_\_ widow/widower of late Shri/Smt. \_\_\_\_\_ was authorised previously for payment of Family Pension of Rs. \_\_\_\_\_ with effect from \_\_\_\_\_ through FPPO No. \_\_\_\_\_ issued by the Principal A.G. (A&F), Odisha \_\_\_\_\_. The family pension was tenable till the death or re-marriage of the widow/widower.

2. Intimation has been received in this Department/Office that Shri/Smt. \_\_\_\_\_ the Family Pension holder died/re-married on \_\_\_\_\_. At the time of death/re-marriage Shri/shrimati \_\_\_\_\_ had following children.

| Sl. No. | Name (*) | Son/ Daughter | Date of birth in Christian era | Name of the Guardian (in case of Minor(s)) |
|---------|----------|---------------|--------------------------------|--------------------------------------------|
| (1)     |          |               |                                |                                            |
| (2)     |          |               |                                |                                            |
| (3)     |          |               |                                |                                            |

3. In term of rules 56(7)(c) of the Odisha Civil Services (Pension) Rules, 1992 the amount of family pension has become payable to the children in the order mentioned above. The family pension will be payable on behalf of the minor to Shri/Shrimati \_\_\_\_\_ who is the guardian.
4. Sanction for the grant of Family Pension of Rs. \_\_\_\_\_ per month to the Child/Children, mentioned above is hereby accorded. The Family Pension will take effect from \_\_\_\_\_ and subject to the provision of sub-rule(5) of Rule 56 of the Odisha Civil Services (Pension) Rules, 1992 will be tenable till \_\_\_\_\_.
5. The family Pension is debitable to the Head \_\_\_\_\_.
6. List of documents enclosed are :-
1. Permanent address of the Child/Children/Guardian.
  2. Specimen signature or \*\* left hand thumb and finger impressions of the claimant or guardian duly attested by Head of Office/Gazetted Officer.
  3. Two attested copies of passport size photograph of the Child/Children/Guardian.
  4. Descriptive roll of the Child/Children/Guardian, duly attested.
  5. Death Certificate / Marriage Certificate attested copy.
  6. Legal Guardian CH in case of claimant is minor.
7. Name of the Treasury where payment is to be made (Treasury/Sub-Treasury/Special Treasury):-



8. Name of the Bank where payment is to be made:- \_\_\_\_\_  
Branch.....  
A/c no.....  
IFSC Code..... MICR Code.....
9. The receipt of this letter may kindly be acknowledged and this Department/Office be informed that instructions for the payment of family pension to the Child/Children/Guardian have been issued to the disbursing authority concerned.

Yours faithfully,  
Pension Sanctioning Authority

\* The names of children should be mentioned in the order of eligibility mentioned in Rule 56 (7) (c) of the Orissa civil Services (Pension) Rules, 1992.

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

# O.C.S. (PENSION)FORM-T

[ see rule 80 (3) ]

Claim Application Form for grant of residuary \* gratuity on the death of a Pensioner,  
( to be filled in separately by each applicant)

|     |                                                                                                           |                                                             |
|-----|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1.  | Name of the applicant                                                                                     |                                                             |
| 2.  | Date of birth of the applicant.                                                                           |                                                             |
| 3.  | (i) Name of the guardian in case the applicant is minor.                                                  |                                                             |
|     | (ii) Date of birth of guardian.                                                                           |                                                             |
| 4.  | Full address of the applicant.                                                                            |                                                             |
| 5.  | Name of the deceased pensioner.                                                                           |                                                             |
| 6.  | Office/Department in which the deceased pensioner served last.                                            |                                                             |
| 7.  | Date of death of the pensioner.                                                                           |                                                             |
| 8.  | Date of retirement of the deceased pensioner.                                                             |                                                             |
| 9.  | Amount of monthly pension @ (including ad hoc increases, if any) sanctioned to the deceased pensioner.    |                                                             |
| 10. | Amount of retirement gratuity received by the deceased pensioner.                                         |                                                             |
| 11. | The amount of pension @ (including ad hoc increase, if any) drawn by the deceased till the date of death. |                                                             |
| 12. | If the deceased had commuted a portion of pension before his death the commuted value of the pension.     |                                                             |
| 13. | Total of items, 10, 11 and 12.                                                                            |                                                             |
| 14. | Amount of death gratuity equal to 12 times of the emoluments.                                             |                                                             |
| 15. | The amount of residuary gratuity claimed i.e., (totals of item 14 – totals of item 13).                   |                                                             |
| 16. | Relationship of the applicant with the deceased pensioner.                                                |                                                             |
| 17. | Name of the Treasury or sub-Treasury or Special Treasury at which payment is desired.                     |                                                             |
| 18. | Signature or Thumb impression of the applicant (to be furnished in a separate sheet duly attested)**      |                                                             |
| 19. | Name of the Bank where payment is to be made:-                                                            | Branch.....<br>A/c no.....<br>IFSC Code..... MICR Code..... |

Signature of the Applicant/Guardian (in case of minor(s))

\* When a Government servant had retired before earning pension, the amount of service gratuity should be indicated.

\*\* Attestation should be done by two Gazetted Government servants or by two or more persons of respectability in the own village or paragona in which the applicant resides.



# O.C.S. (PENSION)FORM-U

[ see rule 99 (1) ]

Form of application for permission to Gazetted Government Servants of the State Government to accept Commercial Employment within a period of two years from the date of retirement.

|    |                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Name of the Officer (IN BLOCK Letter).                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 2. | Date of retirement                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 3. | Particulars of the Department/Office in which last served.                                                                                                                                  | Name of Department/Office:-<br>Post Hold :-<br>Duration :-                                                                                                                                                                                                                                                                                                                                                                |
| 4. | Post held at the time of retirement and period for which held.                                                                                                                              | From:-<br>To :-                                                                                                                                                                                                                                                                                                                                                                                                           |
| 5. | Pay scales of the post and pay drawn by the Officer at the time retirement.                                                                                                                 | Scale of Pay:-<br>Pay:-                                                                                                                                                                                                                                                                                                                                                                                                   |
| 6. | Pensionary benefits (Received/Receivable)                                                                                                                                                   | Pension :-<br>Commutation Value of Pension:-<br>Gratuity:-                                                                                                                                                                                                                                                                                                                                                                |
| 7. | Details regarding commercial employment proposed to be taken up                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (a) Name of the firm/company/ co-operative etc.                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (b) Products being manufactured by the firm/type of business carries out by the firm etc.                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (c) Whether the Officer had during his official career' any dealings with the firm etc.                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (d) Duration and nature of the Official dealings with the firm.                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (e) Name of the job/post offered.                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (f) Whether post was advertised, if not, how offer was made (attach newspaper cutting of the advertisement, and a copy of the offer of appointment, if any).                                |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (g) Description of the duties of the job/post                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                           |
|    | (h) Remuneration offered for post/job<br>(i) If proposing to set up a practice, indicate :-<br>(a) Professional qualification/in the field of practice.<br>(b) Nature of proposed practice. |                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 8. | Any information which the applicant desires to furnish in support of his request.                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 9. | Declarations :-                                                                                                                                                                             | I hereby declare that –<br>(i) the employment which I propose to take up will not bring me in to conflict with Government.<br>(ii) My commercial duties will not be such that my previous official position or knowledge or experience under Government could be used to give my proposed employer an unfair advantage;<br>(iv) My commercial duties will not involve liaison or contact with the Government Departments. |

Dated:

Signature of the applicant  
Address:-

# O.C.S. (PENSION)FORM-V

[ see rule 113 (2) (ii) ]

## FORM OF APPLICATION FOR DISABILITY PENSION

|     |                                                                                                                                                         |                                                                                      |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| 1.  | Name of the Applicant.                                                                                                                                  |                                                                                      |
| 2.  | Father's Name                                                                                                                                           |                                                                                      |
| 3.  | Full Residential Address                                                                                                                                | Village:-<br>Post Office:-<br>District:-<br>State:-                                  |
| 4.  | Present or last employment, including full particulars and address of the establishment.                                                                |                                                                                      |
| 5.  | Date of applicant's birth by Christian era (as per record in the Service Book).                                                                         |                                                                                      |
| 6.  | Date of entry in to service (as per record in the Service Book).                                                                                        |                                                                                      |
| 7.  | Full particulars of service and length of service including interruption (both qualifying and none qualifying).                                         |                                                                                      |
| 8.  | Percentage of Disability sustained due to Injury/Disease (as certified by the Medical authorities) and circumstances which resulted in that disability. |                                                                                      |
| 9.  | Date of injury/disease (as certified by the Medical Authorities).                                                                                       |                                                                                      |
| 10. | Pay at the time of injury sustained, disease contacted.                                                                                                 |                                                                                      |
| 11. | Pension claimed.                                                                                                                                        |                                                                                      |
| 12. | Name of the Treasury/Sub-Treasury/Special Treasury where pension is to be paid.                                                                         |                                                                                      |
| 13. | Name of the Bank where payment is to be made:-                                                                                                          | Branch.....<br>A/c no.....<br>IFSC Code..... MICR Code.....                          |
| 14. | Personal Identification Marks                                                                                                                           |                                                                                      |
| 15. | Height                                                                                                                                                  |                                                                                      |
| 16. | Thumb and finger impression                                                                                                                             | Thumb :-<br>Fore-finger :-<br>Middle finger :-<br>Ring-finger :-<br>Little finger :- |

Date of Application:-

Signature of the Applicant

Place:

Received the Application Form for sanction of Disability Pension from Shri/Smt. \_\_\_\_\_  
on Dt. \_\_\_\_\_

Signature of Head of office/Authorised Officer



# O.C.S. (PENSION)FORM-W

[ see rule 113 (2) (ii) ]

## FORM OF APPLICATION FOR EXTRAORDINARY FAMILY PENSION.

Application for Extraordinary Pension for the family of Late Shri/Smt. \_\_\_\_\_  
killed or dies of Injury/Disease claimed as being attributable to Government Service.

|     |                                                                               |                                                             |
|-----|-------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1.  | Name of the deceased Government Servant.                                      |                                                             |
| 2.  | Full Residential Address of the deceased Government Servant.                  | Village:-<br>Post Office:-<br>District:-<br>State:-         |
| 3.  | Particulars of post held at the time of death.                                |                                                             |
| 4.  | Name and Address of the Office/ Establishment where served.                   |                                                             |
| 5.  | Length of service (as per Service Book).                                      |                                                             |
| 6.  | Pay at the time of death.                                                     |                                                             |
| 7.  | Date of birth (as recorded in the Service Book)                               |                                                             |
| 8.  | Age at the time of death (copy of death certificate to attached).             |                                                             |
| 9.  | Nature of Injury/Disease causing death.                                       |                                                             |
| 10. | Name of the Claimant.                                                         |                                                             |
| 11. | Claimant's nature of relationship with the deceased Government Servant.       |                                                             |
| 12. | Full Residential Address of the Claimant.                                     | Village:-<br>Post Office:-<br>District:-<br>State:-         |
| 13. | Date of Birth and Age (proof is to be attached).                              |                                                             |
| 14. | Height.                                                                       |                                                             |
| 15. | Identification Marks.                                                         |                                                             |
| 16. | Present Occupation of the claimant if any.                                    |                                                             |
| 17. | Amount of Pension claimed                                                     |                                                             |
| 18. | Date from which benefit (s) claimed.                                          |                                                             |
| 19. | Name of the Treasury/Sub-Treasury/ Spl. Treasury where pension is to be paid. |                                                             |
| 20. | Name of the Bank where payment is to be made:-                                | Branch.....<br>A/c no..... IFSC<br>Code..... MICR Code..... |

Contd.....

|     |                                                                                                                |      |          |                                |
|-----|----------------------------------------------------------------------------------------------------------------|------|----------|--------------------------------|
| 21. | Name and ages of surviving Children/<br>Widow/widower/<br>Father/Mother of the deceased<br>Government Servant. | Name | Relation | Date of birth by Christian era |
|     |                                                                                                                |      |          |                                |
|     |                                                                                                                |      |          |                                |
|     |                                                                                                                |      |          |                                |
|     |                                                                                                                |      |          |                                |
|     |                                                                                                                |      |          |                                |

Place

Signature of the Claimant

Date

Received the Application Form for sanction of Extra Ordinary Family Pension from Shri/Smt. \_\_\_\_\_  
on Dt. \_\_\_\_\_.

Place

Signature of the Head of Office

Date

Seal

Note 1 - Please strike out the word or words which are not applicable.

Note 2 - If the deceased has left no son, widow, daughter, father or mother surviving him, the word "none" or "dead" should be entered opposite to such relations.

Note-3 - The term 'child' indicates a posthumous child of the Government Servant and is covered by the term 'surviving kindred'.



# O.C.S. (PENSION)FORM-X

[ see rule 113 (2) (iii) ]

(Form to be used by the Medical Board when reporting in Injuries/Diseases/Death)

Instructions to be observed by the Medical Board while preparing the report.

- (1) The Medical Board before recording their opinion should invariably consult the proceedings of the previous Medical Board, if any, as also previous medical/Hospital documents connected with the Government Servant brought before them for examination, or who has died.
- (2) If the injuries/diseases by more than one, they should be numbered separately, giving percentage of disability for each, with full details.
- (3) In answering the question in the prescribed Form the Medical Board will continue itself exclusively to the Medical aspect of the case, and will carefully discriminate between the Government Servant's/claimant's unsupported statements and the documentary evidence available.
- (4) The Medical Board will not express any opinion, either to the Government Servant examined ( or any of his relatives or friends, etc.) or in their Reports, as to whether he or his family is entitled to compensation or as to the amount of it, nor will it inform the Government Servant or any other person connected with the Government Servant of about the nature of the Medical Report given by it.
- (5) The Medical Board shall give their Report herein below.
- (6) The report of the Medical Board, on each occasion, shall be supported by all the necessary and full medical and Hospital documents which shall be maintained and preserved for reference, from time to time, as may be necessary, until the same would no longer be required for reference.

## PROCEEDINGS OF THE MEDICAL BOARD (CONFIDENTIAL)

Proceedings of the Medical Board assembled by the order of \_\_\_\_\_ for the purpose of examination and reporting on \_\_\_\_\_.

- (i) the present state of the Injury/Injuries/Disease/Diseases sustained/contacted by or,
- (ii) death of, Shri/Smt. \_\_\_\_\_ on the \_\_\_\_\_ (Please give date, month and year).
- (a) State briefly the circumstances under which, the Injury/Injuries/Disease/Diseases was/were sustained/contacted or death occurred and the date thereof.
- (b) What is the Government Servant's present condition.
- (c) Is the Government servant's :-
  - (i) Present condition, or
  - (ii) death wholly due to Injury/Injuries/Disease/diseases and reason as claimed ?

If so, please explain fully how ?

If not, please state to what other causes the same is/are attributable.

- (d) From which date it appears that the Government servant has been \_\_\_\_\_ incapacitated on that account :
- (e) Which is the date of injury/disease/death :

The opinion of the Board upon the question below as follows:-

## PART A- FIRST EXAMINATION

1. The percentage of disability due to Injury/Injuries/Disease/Diseases is \_\_\_\_\_ % .

(Please give herein full details/justification about the nature of the Injury/Disease and for percentage of disability certified, supported by full/all medical and hospital documents with reference to Schedule-I and I-A.

2. For what period from the date of Injury/Injuries/Disease/Diseases .

(a) Has the Government Servant been unfit for duty ? \_\_\_\_\_ from to \_\_\_\_\_

(b) The Government Servant is likely to remain unfit for duty ? \_\_\_\_\_ From to \_\_\_\_\_

3. Other relevant information, if any.

Place:-

Date:-

Presiding Officer of the Medical Board

Member of the Medical Board

Member of the Board.

## PART B – SECOND OR SUBSEQUENT EXAMINATIONS

1. If the original degree of disability of the Government Servant has changed, what is the percentage of disability now? (Please give here details of justification in support of your view along with all further medical and Hospital documents in full).

2. For what period from the date of Injury/Injuries/Disease/Diseases.

(a) Has the Government Servant been unfit for duty ? \_\_\_\_\_

(b) Is the Government Servant likely to remain unfit for duty ? \_\_\_\_\_

Place:-

Date:-

Presiding Medical Officer

of the Medical Board

Member of the Board.

Member of the Board.

Note:- Please score out the word/words not applicable.



# O.C.S. (PENSION)FORM-Y

[ Please See Rule 113 ]

## REPORT ON ACCIDENTAL AND SELF-INFLICTED INJURIES

1. Declaration by the injured person I, \_\_\_\_\_ hereby declare that the injury (Number, rank, name and unit) sustained by me on \_\_\_\_\_ did/did not occur while I was in the performance of Government duty.

(Medical Officer before whom the declaration is made)

(Signature of the Injured Person)

Station \_\_\_\_\_ date \_\_\_\_\_

Station \_\_\_\_\_ date \_\_\_\_\_

2. Nature, location and severity of injury :-

Note- Hospital to be notified at once if would is believed to be self-inflicted

(Medical Officer)

3. Short statement of the circumstances of the cases (Signed statements of witness giving a detailed account of the circumstances of the accident must be attached to this Form. Place or sketch of place of accident and how it occurred in case of lorry, motorcar or cycle accidents)

4. Opinion of the Commandant/Head of Office.

- (a) (i) Was the individual in the course of performance of an official task or as task the failure to do which would constitute an offence triable under the disciplinary code applicable to him ? (Indicate the nature of the task, by whom it was ordered and when), or

(ii) Did the accident occur during the journey or transport by a reasonable route under organised arrangements from the individual's quarters to or back from an appointed place of duty? Cite and attach copies of standing instructions or other orders in support, if the journey or transport was officially organised, also a sketch showing the reasonable route from the individual's quarters to the place of duty \_\_\_\_\_.

Or

(iii) Was the individuals participating in recreation organised or permitted by service authorities? Indicate the nature of the recreation e.g. P.T. Exercise including games. In case of games and sports of parade hours, cite and attach copy of Official orders to indicate that it was organised or permitted by competent authority.

Or

(iv) Was the individual travelling either in a body or singly under organised arrangements? (Cite and attach copy of Official order to indicate that that the arrangements were organised by competent authority).

Or

(v) Was the individual proceeding to his leave station or returning to duty from his leave station? In either case, was the journey at public expense or was performed on concession voucher or at individual's own expense? (Give \_\_\_\_\_)

(1) the date of commencement and termination of the period of leave ;

(2) the name of the leave station ; and

Contd.....

(3) particulars of the direct route from the place of duty to or from the leave station.

(b) Was the accident due wholly/partially to :

(i) serious negligence \_\_\_\_\_ and/or

(ii) misconduct of the individual? (Indicate the nature of the serious negligence misconduct and the grounds on which the opinion is based).

(c) Was any one else to balance for the accident? (If so, indicate how and to what extent).

(d) Was the individual under the influence of intoxicating drink or drug at the material time?

(e) Has any Court of Enquiry been held or will be held? If so, indicate the date and the place of the enquiry, and attach the Enquiry Report (in original). \*\*

Station \_\_\_\_\_

Date \_\_\_\_\_

Officer Commanding  
Head of Office.

5. The injury/disability/death occurred in place/field/operational area and not attributable to Government service.

\*\*\* Head of State/Frontier D.G.

Head of Office

Head of Department.

Station :-

Date:-

## FOR USE ON FIELD SERVICE ONLY (Items 6-8)

(to be completed in all field service cases where injuries are, or are suspected to be self-inflicted)

(a) Opinion of the Unit Commander-

(b) Disciplinary action taken, or proposed, whether against injured individual or another \_\_\_\_\_

(Commandant of Unit).

To

The Deputy I.G., State

7. Forwarded with reference to my casualty signal No. \_\_\_\_\_ Dated \_\_\_\_\_

Date:-

Commanding D.I.G., State

To

The I.G., Frontier, DECISION of I.G.,

8. The casualty should be reported as \_\_\_\_\_  
Dated \_\_\_\_\_

Date:-

General Officer  
Commanding I.G., Frontier.

To

The D.G.,

Note:- If the I.G. decide that the casualty is to be reported as self-inflicted, he should indicate how far he concurs with the opinions expressed above.

\* Strike out whichever is not applicable.

\*\* In all cases of death, court of Enquiry must be held, so also in respect of disability exceeding 20%.

\*\*\* To be completed and signed by O.C. unit if injury is not severe and no court of inquiry is held.



# O.C.S. (PENSION)FORM-Z

[ Please See Rule 113 ]

FORM FOR REPORT ON CASES (OTHER THAN THOSE DUE TO INJURIES)  
WHICH HAVE ENDED FATALLY OR ARE PROPOSED FOR INVALIDING

## PART-A

( To be filled by the M. O.)

Station \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_ Service No. \_\_\_\_\_ Designation \_\_\_\_\_  
Unit \_\_\_\_\_ Service \_\_\_\_\_ Force \_\_\_\_\_

Other full service particulars and office address, etc. \_\_\_\_\_

Disability \_\_\_\_\_

Out-come of the case, i.e., died or to be invalided \_\_\_\_\_

Medical Officer

## PART – B

( to be answered by the officer Commanding Unit)

Circumstances of the case :-

1. Was the individual in your opinion of average physique and stamina when he joined the Unit?
2. (a) Was the individual, as far as you are aware, in his normal health prior to the onset of the illness?  
(b) If you are aware of any previous illness from which he suffered (which is not recorded in his medical history) state its nature and duration.....
3. Was the individual employed on sedentary duties/sheltered occupation? If so.  
(a) had he to do P.T. and/or Parades ?  
(b) was he doing it regularly prior to falling ill or had been exempted there from on account of ill-health, If so, from which date?
4. (a) (i) Mention any circumstances of exposure giving details thereof, and/or \_\_\_\_\_  
(ii) State periods and conditions of service at any particular place, which you consider caused or aggravated the illness \_\_\_\_\_  
(b) (i) Give the nature of duties he had to perform in Government service \_\_\_\_\_  
(ii) Was he object to stress and strain by such duties? If so, was it of an exceptional nature? Give details \_\_\_\_\_  
(c) Diseases endemic to certain areas or disease due to infection:  
(i) If disability or death was due to infection, is there any evidence that the exposure was due to negligence or misconduct on his part?  
(ii) Did he live in limit lines or was he permitted to live outside with his family?

Contd...

(iii) How many out passes was he granted during the previous month and what was the date of the last out pass?

(iv) Was the disease endemic to the area he was serving in and during this period or immediately preceding it were there other cases of the same disease in the Unit? If so, give the number of such cases, details of movements of infected persons and state any other circumstances which might have been responsible for the disease.

(v) Give the date of last leave and places where the leave was spent, Did illness start during leave? If shortly after return from leave, state date on which the illness commenced .....

(d) Veneral Diseases (Further information on the points) mentioned below:-

(i) when was it contacted.

(ii) Period of treatment .....

(iii) Whether after treatment the man returned to full duty?

(iv) Whether after return to duty post hospital Surveillance and treatment was continued according to existing regulations .....

(v) After return to duty, was the man subjected to any stress of an exceptional nature? If so, mention the nature of exceptional stress....

5. Do you consider that the death or disability was attributable to or aggravated by service?

Date:-

Officer Commanding  
Head of the Office  
Head of the Department

#### PART – C

(To be completed by Medical Officer concerned in all death cases)

(i) How many cases of this disease are treated during six months prior to admission of this individual?

(ii) How many cases of this disease were received from this Unit? Give details of such patients in chronological order ?

(iii) Was the infection endemic or was there any outbreak of it in the local garrison?

(iv) Was there an outbreak of the disease in the neighbouring city or villages?

(v) What is your view of the source of infection? In all cases state whether you consider the death was attributable to or aggravated by service and give the reasons on which you base your opinion .....

Commanding Officer  
Hospital

1. Chief Medical Officer, Presiding Officer of the Medical Board.
2. Medical Officer, Member of the Medical Board.
3. Medical Officer, Member of the Medical Board.

|    |                                                                                    |  |                                                                                                  |
|----|------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------|
| 6. | Name of the Treasury / Sub-treasury / Special Treasury at which payment is desired |  |                                                                                                  |
| 7. | Name of the Bank where Gratuity amount is to be credited.                          |  | Name of the<br>Bank _____<br>Branch _____<br>A/c No. _____<br>IFSC Code _____<br>MICR Code _____ |

Signature of the Claimant  
or Thumb Impression (in case  
Claimant is illiterate)

Received the Application form for sanction of Gratuity from  
Shri/Smt. \_\_\_\_\_ on dt. \_\_\_\_\_.

Signature of the Head of the Office  
Where G.S. last served.