CERTIFICATES TO BE SUBMITTED BY THE PENSIONERS

LIFE CERTIFICATE

Certified that I have seen the Pensioner Mr./ Mrs. Miss_____

holder of P.P.O No._____and he/she is alive on this date.

Signature of Gazetted Officer

Date: (With Seal)

RE-MARRIAGE/NON-RE-MARRIAGE CERTIFICATE
(Only in case of Family Pensioners)

I hereby declare that I have /have not re-married during the last one year.

Signature/ Thumb impression of Pensioner

Certified that the above declaration is correct to the best of my knowledge and belief.

Signature of Gazetted Officer

Date: (With Seal)

EMPLOYMENT / NON RE-EMPLOYMENT CERTIFICATE

(i)   I hereby declare that I have not served in any capacity either in a Government department/office company, Corporation, autonomous body or Society of Central or State Government or Union Territory or a Local Fund during the last one year.

Or

I declare that I have been employed / re-employed in the office of _____ which is a part of / financed by _____Government.

Further that the orders of my re-employment do/do not stipulate my pension being held in abeyance.

(ii)   I declare that I have not accepted any commercial employment in India.

Or

I declare that I have accepted commercial employment in India after obtaining prior sanction of the Central / State Government and none of the conditions, if any, attached thereto by Government has been violated.

Note:- This declaration is required to be given for a period of 2 years from the date of retirement.

I declare that I have not accepted employment under a Government outside India / an International organization of which government of India is not a member.

Or

I declare that I have accepted employment under a Government outside India / an International organization of which government of India is not a member after obtaining the prior sanction of the Central / State Government and none of the conditions attached thereto by the government has been deviated.

Place:

(Signature of Pensioner)

Name _____

Date: P.P.O No._____

Mobile ./ Phone No. if, any_____

Address_____

_____