

To,

GOVERNMENT OF KHYBER PAKHTUNKHWA FINANCE DEPARTMENT (REGULATION WING)

No.SO(SR-II)FD/4-36/2017

Dated Peshawar the 28/08/2017

The Senior Member, Board of Revenue, Khyber Pakhtunkhwa. 01.

All Administrative Secretaries to Govt: of Khyber Pakhtunkhwa. 02.

The Principal Secretary to Governor, Khyber Pakhtunkhwa, 03.

The Principal Secretary to Chief Minister, Khyber Pakhtunkhwa. 04.

The Secretary, Provincial Assembly, Khyber Pakhtunkhwa 05.

All Heads of Attached Departments In Khyber Pakhtunkhwa. 06.

- 07. All Commissioners in Khyber Pakhtunkhwa.
- All Deputy Commissioners in Khyber Pakhtunkhwa. 08.
- All Political Agents / District & Sessions Judges in Khyber Pakhtunkhwa 09.
- The Registrar, Peshawar High Court, Peshawar. 10.
- The Chairman, Public Service Commission, Khyber Pakhtunkhwa. 11.
- The Chairman, Services Tribunal, Khyber Pakhtunkhwa. 12.
- The Chairman, Provincial Ombudsman Secretariat, Khyber Pakhtunkhwa 13.

Pakhtunkhwa. All Heads of Autonomous & Semi-Autonomous Bodies in Khyber 14.

REVISION OF PENSION APPLICATION FORM 3 (PEN). Subject:

Dear Sir,

I am directed to refer to the subject noted above to state that the Competent Authority in consultation with the Accountant General, Khyber Pakhtunkhwa has been pleased to introduce a revised pension application form 3 (PEN) a copy of which is enclosed. I am to request that the new form may invariably be used while processing the pension cases. However, the pension cases already processed on the existing application form shall continue to be entertained.

The Manager Government Printing press is being requested to standardize the above 2. form so as to enable the Departments/Offices to obtain further supply thereof from the Government Press.

Yours faithfully

(Muhapmad Javed Saddiqi) Deputy Secretary (Reg-I)

Enclosure as above.

Endst of even No & Date even.

A copy alongwith a copy of the revised form 3 (PEN) is forwarded for information to:-

The Accountant General, Khyber Pakhtunkhwa, Peshawar. 01.

Coordinator, PMRU Chief Secretary's office, Khyber Pakhtunkhwa. 02.

- The Director, Treasuries & Accounts, Khyber Pakhtunkhwa. 03.
- All the District Comptroller of Accounts in Khyber Pakhtunkhwa. 04.
- The Director, Local Fund Audit, Khyber Pakhtunkhwa, Peshawar. 05.
- The Director, FMIU, Finance Department.
- 06. All the District/Agency Accounts Officers, Khyber Pakhtunkhwa/FATA.
- 07. The Private Secretary to Minister Finance, Khyber Pakhtunkhwa.
- The Private Secretary to Secretary / P.As to Special Secretary, Additional 08. 09. Secretaries / Deputy Secretaries in Finance Department.
 - HR Finance Department (Assistant Director Web).
- 10. The Manager Govt. Printing Press Peshawar for Immediate necessary action. 11.

(Moazzam Khan) SECTION OFFICER (SR.II)



PENSION PAPERS

Name		
Father/Husband Name		
CNIC No		
Designation		
Department		
Personal No		
Date of Retirement/Deat	th	

1.	FORM 3 (PEN) APPLICATOIN/ CERTIFICATES TO BE GIVEN BY TH EPENSIONER FOR PENSION / GRATUITY COMMUTATION	
To b nval	be given by retiring government servant for grant of pension in case of superannuation / retirin lid / compensation / compulsory retirement]	g/
The		
ne		
ir) N	Madam	
	It is submitted that I National National Advancementation of the submitted that I	me:
	Designation/Post heldBPSBPS	On
	(Please indicate kind of appointment i.e. Regular/Officiating or Acting charge/Cur	ant
han	Nation Nation	anty
	Personnel No Cell No.(i)	
i)	Gmail:PostalAddress	
		een
ern	mitted to retire from Government service / I am due to retire/ has been retired compulsority	011
		Ints
	A Bard / Deat Office / Treesurg office	
	Branch	
יחר	CS Form (where applicable) and list of my family members, is enclosed}.	
2.	I do hereby undertake that government may, within one year from the issue of Pension Payment Or recover any of its dues from the pension granted to me.	
3.	I hereby declare that I shall not take part in any elections or engage myself in political activities of kind within two years from the date of retirement.	any
4.	I do hereby declare that I have neither applied for nor received any pension/ commutation/ gratuit respect of any portion of the service included in this application and in respect of which pension/ gra is claimed herein, nor shall I submit any application hereafter without quoting a reference to application and to the order which may be passed thereon.	
5.	I hereby undertake to refund if the amount of pension granted to me afterwards found to be in excest that to which I am entitled under the regulation.	is of
6.	I do hereby declare that I have not received any pension or gratuity in respect of any portion of service included in this application.	the
7	. I hereby opt for communication @(subject to a maximum of 35%) of my gross pension.	
	NAME & SIGNATURE OF RETIRING GOVERNMENT SERVANT (PENSIONER)	
	DATED OF RETIRING GOVERNMENT DERVARY (LENGIONELY	
	HEAD OF OFFICE/DEPARTMENT	
	Note: Pension to be verified by Pension Sanction Authority / DDO	

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FORM 3 (PEN)	
APPLICATOIN FOR FAMILY PENSION	
(To be filled in and signed by applicant himself/ he	erself)

B	 	ľ

Dear Sir/ Madam

(death certificate attached). I therefore request that the family pension admissible under

			and the second se		
the rules may	kindly	be	sanctioned	to	me.

ist of my S.No.	family members Name	Relationarity with	CNIC No.	Age/ Date of Birth	Marital Status
		the deceased			1

(3) It is hereby informed that my gratuity/ commutation/ family pension may be transferred/ credited by the Accounts

Account No......(DCS form, where applicable, is enclosed).

UNDERTAKINGS:

- 4. I do hereby undertake that government may, within one year of Pension Payment Order, recover any of its dues from the pension granted to me.
- 5. I do hereby declare that I have neither applied for nor received any family pension or gratuity in respect of any portion of the service included in this application and in respect of which family pension/ gratuity is claimed herein, nor shall I submit any application hereafter without quoting a reference to this application and to the order which may be passed thereon.
- 6. I hereby undertake to refund if the amount of family pension granted to me afterwards found to be in excess of that to which I am entitled under the regulation.
- 7. I do hereby declare that I have not received any family pension or gratuity in respect of any portion of the service included in this application (in case of anticipatory pension only).

	SIGNATURE:	
THUMB IMPRESSION:	NAME:	
THUMB IMPRESSION	CNIC No.	

HEAD OF OFFICE/DEPARTMENT

DATED_

Note: Pension to be verified by Pension Sanction Authority / DDO

Important: Every pensioner family pensioner is bound to provide life certificate / Non-marriage certificate to his/ her bank on or before 10th March and 10th September of each year (Annex-A)

PENSION FORM T	O BE USED IN CASE	FORM 3 (PEN) OF SUPERANNUATION/ RETIRING / I COMPULSORY RETIREMENT	
To be issued by	y the Sanctioning Aut	thority 90 days before superannuation Government servant]	/ retirement of the retiring
Subject: <u>SANCTION C</u> AND COMP	OF PENSION ON SUP	<u>ERANNUATION/ RETIRING / INVALID/</u> <u>NT</u>	COMPENSATION
		aving applied for retiring/ invalid/ comp atired compulsorily vide Notification No	
dated	issued by	*** *** *** *** *** *** *** *** *** *** *** ***	2° 4
Mr./Mrs./Ms			
Designation		drawing pay / emoluments Rs	(reckonable towards
		basis (Please indicate nature of appo	
		.e.f) Person	
CNIC NO	has retired / has h	een permitted to retire is due to	o be retired has been retired
compulsorily from the (Government service (t	tick whichever is applicable) on	date , after availing LPR for
		u of LPR Rs	27 x
Pension Calculation			
	Gross Pension	Rs	
	Commutation	Rs	
	Net Pension	Rs	13 103 ¹⁴
Other Benefits:	۲. بر	с ж . ж	· · · ·
	i)	Rs	
		Rs	83400 SA
		Rs	1 V
() ?	,		
Gratuity (in case whe	re qualifying service is	5 years or more but less than 10 years)	
Rs			
(1) His/ her date of b	birth is	Date of 1st entry into government	service is and
		I length of qualifying service for pension	is years
months	days.		5 B
(2) Certified that no in	nguiry is pending again	st him/her.	
		80	2
(3) Certified that no re	ecovery is outstanding	against him/her.	
(4) Certified that: -			
i. Advar ii Antar	mount of Rs	nd fully repaid, along with interest. on account of nding which may be recovered from the p	.(HBA/MCA/etc.) principal amount bension.
(5) Anticipatory pens	ion upto (%) of	full pension is sanctioned as admissible	to him/her.
servant has been	finalized. Therefore, atory pension) and con	/ criminal case pending against the a final pension payment @ (%) nmutation amounting%) (Sub Accounts office, may be paid.	(After adjustment of already paid
sanction for grant by the retiring go	of pension / commuta overnment servant, to	e of retiring employee has been satisf ation @% upto maximum o be determined by the Accounts office 	e, is hereby accorded in favour of Post Office / Treasury Account

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FORM 3 (PEN)

OR



- i. Amount or percentage of reduction in pension.....
- ii. Amount or percentage of reduction in gratuity

iii. Sanction is hereby accorded to the grant of pension / gratuity as so reduced.

(8) The payment of pension and/ or gratuity may commence w.e.f.

Following documents attached.

- Pension application.
- Notification of retirement.
- Last Pay Certificate (LPC)/ Last Payslip
- Pension contribution receipts/ Bank Challan / acceptance certificate (in service death)
- Original service book along with its attested copy/ service statement (in case of gazetted government servant).
- N.D.C from Estate office in case of Government accommodation.
- Three attested photographs of Pensioner.

HEAD OF OFFICE/DEPARTMENT

[.] Dependents Lists.

- Specimen Signatures /Left, Right hand thumb and fingers impression Form.
- No Demand ,Declaration , Undertaking & Option Certificate.
- Pensioner Bank Account Details.

SIGNATURE WITH STAMP PENSION SANCTIONING AUTHORITY

- The AGPR/ Accounts Office is requested to grant pension and endorse a copy of computerized pension payment order (C.P.P.O) / Pension Payment Order (P.P.O.) to this department/ office.

Important: As per requirement every pensioner is bound to provide life certificate to his/ her bank on or before 10th March and 10th September of each year <u>(Annex-A).</u>

FORM 3 (PEN)

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FAMILY PENSION FORM (IN-SERVICE DEATH)

[To be issued by the Appointing Authority / Pension Sanctioning Authority in the event of in-service death of a government servant]

SANCTION OF FAMILY PENSION IN CASE OF IN-SERVICE DEATH OF A GOVERNMENT Subject: SERVANT

In Service Death

It	is	mentioned	that	Mr./Mrs./I	VIs						5/0,	W/O,	D/O.
			*** ******	Design	ation/Post	heid	************			drawin	g pay	/ emolur	nents
•••	*** * * *		eckonabl	e toward	pension),	in BS	******	(Please	indicate	kind o	of app	oointmen	t i.e.
R	egula	r/Officiating	or Actin	g charge	/ Current	charge	w.e.f) Pe	rsonne	No.		
CI	NIC	No			lastly p	posted a	IS	ha	as expire	d on			
w	hile ir	service											

Family Pension Calculation:

(In service death)

Other Benefits:

Gross Pension	Rs
Family Pension @75% of	Rs
Gratuity ¼ th (of Gross Pension)	Rs
i)	Rs
ii)	Rs
m	Rs

(3) Certified that no inquiry is pending against deceased employee.

(4) Certified that no Demand / Recovery is outstanding against the deceased.

(5) Certified that Advances drawn by the deceased (if any) have been fully repaid or waived off.

(6) As per record, it is verified that Mr./Mrs./Ms..... CNIC No. is bonafide family member entitled to family pension of Mr./Mrs./Ms. (late) and his/ her gratuity/ family pension may be transferred/ credited in Bank / Post Office / Treasury......Account No.....(as opted).

(7) Administrative and financial sanction for grant of family pension / gratuity is hereby accorded.

Following documents attached

- Pension application along with three attested photographs.
- Death certificate and death Notification.
- Last Pay Certificate (LPC)
- Pension contribution receipts/ Bank Challan / acceptance certificate (in service death)
- Original service book along with its attested copy/ service statement (in case of gazetted government servant, in service death).
- N.D.C from Estate office in case of Government accommodation.

SIGNATURE WITH STAMP PENSION SANCTIONING AUTHORITY

HEAD OF OFFICE/DEPARTMENT

DATED_

The AGPR/ Accounts Office is requested to grant family pension/gratuity and endorse a copy of computerized family pension payment order (C.F.P.P.O) / Pension Payment Order (P.P.O.) to this department/ office.

Note: Application for Family Pension after Retirement Death Cases at Annex-B.

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Important: As per requirement every pensioner is bound to provide life certificate / Non-marriage certificate to his/ her bank on or before 10th March and 10th September of each year (Annex-A).

POST PENSION LIFE CERTIFICATE

"Annex-A" 33

[This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank/ post office/ treasury (pension payment office) in person or through representative or by post/ courier service].

This	is	to	certify	that	Mr./Mrs./Ms			••••••				S/o,	W/o,	D/o
					holder	of	PPC	No.						CNIC
No					whose	spec	imen	signatures	1	thumb	impression	and	addres	s are
apper	nded	belo	w is alive	till dat	e			7						

DATE:

(PENSIONER'S SIGNATURE / THUMB IMPRESSION) PHONE NO. ADDRESS:

(SIGNATURES OF ATTESTING OFFICER WITH DATE & NAME STAMP)

NO MARRIAGE CERTIFCATE FORM

[This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank/ post office/ treasury (pension payment office) in person or through representative or by post/ courier service].

DATE:

(PENSIONER'S SIGNATURE / THUMB IMPRESSION) PHONE NO. Address:

(SIGNATURES OF ATTESTING OFFICER WITH DATE & NAME STAMP)

> Note: The above certificate(s) is/are to be signed by Gazetted Government Officer/Military Commissioned Officer/Magistrate/Sub-Register /Pensioned Officer / Chairman Union Councils /Member of the Federal Or Provincial Assemblies /Manager of Banks.

"Annex-B"

APPLICATION FOR FAMILY PENSION

(After Retirement Death Cases)

(To be filled and singed by the applicant himself/herself)

То												
		The					х.					
Dear Si	ir,						husband/wife/Father/Mother/Sister/Brother					
		lt	is	requested	that	my						
•			•••••		expired on (d	late)	I, therefore, request that					
the fam				nder the rule may								
2.	It is de	clared th	at I have	e neither applied f	or nor receiv	ed any fam	hilly pension.					
3.	Any a	hy amount of the family pension granted to me, afterwards found to be in excess of that to which I am										
	entitle	d under t	he rules.	I hereby underta	ike to refund	any such e	AXC655					
4.	The fo	llowing d	locumen	ts, duly attested,	are enclosed	l:-	the stand throad sate					
		Three	specime	n signature of W	/idow/Un-Mar	rried Daugh	hter/Widow Daughter duly attested/three sets					
		of my	thumb ar	nd finger impressi	ons on the p	rescribed for	orm.					
		Three	photogra	aphs of Widow/Ur	n-Married Da	ughter/Wid	ow Daughter.					
		List ar	nd particu	lars of family me	mbers three	Nos.						
		Three	number	s Descriptive Roll	la la							
			Certifica									
		Non-n	narriage	and non-separa	ation certification	ate on sta	mp Paper and dully attested by the oath					
		comm	issioner				·					
		Three	numbe	ers of photocopy	of CNIC	of Widow/	/Un-Married Daughter/Widow Daughter and					
		Dece	50-505-1300-V									
		In cas	se of Wid	low Daughter Nika	ah Nama , Cl	NIC copy o	f her husband.					
		In cas	se of Dis	ability Pension, St	tanding Medi	cal Board f	rom Police & Services Hospital.					
		Optio	n Form f	or Direct Credit S	ystem (DCS)	and Indem	nnity Bond on stamp paper.					
							Yours faithfully,					
				Signat								
					v/Husband/Er							
				Memb	er of the fam	ily						
				Postal	Address							
Date.												

*Indicated relationship with the deceased Government Servant.