

Human Resources Department  
Employee Benefits Division: Central Office

#239, Union Bank Bhavan, Vidhan Bhavan Marg, Nariman Point, Mumbai 400 021

Staff Circular No.7116

June 04, 2020

To: All Branches/Offices,

Highlights of the Circular

- Extension of another Pension option to Compulsorily Retired Employees/Officers.
- Submission of Pension Option Forms
- Option Open from 04.06.2020 to 02.08.2020

**2<sup>nd</sup> Option of Pension for  
Compulsorily Retired Employees / Officers (CRS)  
under Union Bank of India (Employees') Pension Regulations 1995**

1. In terms of the 10<sup>th</sup> Bipartite Settlement / Joint Note dated 27.04.2010, a second option for pension under Bank Employees Pension Regulations 1995 was given to Bank employees, who were in the service of the bank prior to 29.09.1995 and retired from their services or continued to be in service as on the date of Bipartite Settlement / Joint Note dated 27.04.2010. However, the above option for pension was not extended to employees, who were compulsorily retired by way of punishment by the bank.
2. Indian Banks' Association (IBA) has advised the Banks vide their letter No. HR&IR/CIR/G2/BRK/4684 dated 16.03.2018 to extend 2<sup>nd</sup> option of pension to employees, who were compulsorily retired between 29.09.1995 and 27.04.2010 and have not exercised the option earlier, as per the terms and conditions of the Bipartite Settlement/ Joint Note dated 27.04.2010, provided they withdraw the court cases filed by them, if any, against the Bank, for not extending pension option to them.
3. In view of the guidelines given by IBA, it has been decided by the Board of the Bank to extend the option of pension to employees / officers, who were compulsorily retired between 29.09.1995 and 27.04.2010.
4. As per the agreed terms and conditions of the said Bipartite Settlement / Joint Note, Pension / Family Pension shall be payable to those, who opt to join the Pension Scheme, with effect from 27.11.2009. However, employees who have compulsorily retired after that date i.e. 27.11.2009, shall get pension from the respective dates of compulsory retirement from service.

5. ELIGIBILITY:

5.1 In terms of Settlement/Joint Note dated 27th April 2010, another option for joining the existing Pension Scheme is to be extended to Compulsorily Retired employees / officers, who:

- (a) were in the service of the bank prior to 29th September 1995 and Compulsorily Retired from the service of the bank on or before the date of the settlement i.e. 27.04.2010;
- (b) exercise an option in writing within 60 days from the date of offer, to become a member of the Pension fund; and
- (c) refund within 30 days after expiry of the said period of 60 days, the entire amount of the Bank's contribution to the Provident Fund and interest accrued thereon received by the employee/officer on compulsory retirement together with 56% of the said received amount as his/her share in contribution towards meeting the funding gap as per the said Settlement.

5.2 Family of those employees, who were in the services of the Bank prior to 29<sup>th</sup> September 1995 and compulsorily retired from the service of the bank on or before the date of the settlement i.e. 27.04.2010 and died will be eligible for family pension provided:

- (i) *The family of the deceased employees exercise option in writing within 60 days of the offer to become a member of the Pension Fund; and*
- (ii) *Refund within 30 days after expiry of the said period of 60 days the entire amount of the Bank's contribution to the Provident Fund and interest accrued thereon received by the deceased employee on retirement plus 56% of the said received amount as his/her share in contribution towards meeting the funding gap as per the Settlement.*

5.3 The option to join pension scheme can be exercised during the period from 04.06.2020 to 02.08.2020 (both days inclusive).

5.4 Pension / Family pension shall be payable with effect from 27.11.2009 to those, who opt to join the Pension Scheme in terms of the Settlement. However, employees / officers compulsorily retired after that date i.e. 27.11.2009 shall be entitled to get pension after respective dates of their compulsory retirement.

5.5 All the regulations of Union Bank of India (Employees') Pension Regulations 1995 shall be applicable to these employees / officers.

5.6 Once the option is exercised and the requisite fund is refunded to the bank, the pension option cannot be revoked.

6. As per Union Bank of India (Employees') Pension Regulation 41 (8) (iii), an applicant, who is compulsorily retired by the Bank and is eligible for compulsory retirement pension under Regulation 33 shall be eligible to commute a fraction of his pension subject to the limit specified in sub-regulation (1) of Regulation 41, after he/she has been declared fit by a Medical Officer approved by the Bank.



7. Please further note that in terms of Regulation 41(9)(g) of Union Bank of India (Employees') Pension Regulations 1995, "in respect of whom invalid pension under Regulation 30 or Compassionate Allowance under Regulation 31 or Compulsory Retirement Pension under Regulation 33 is admissible, commutation shall become absolute on the date of the medical certificate given by a medical officer approved by the Bank. Therefore, Compulsorily Retired Employee/Officer, who opt for pension option and seek commutation of pension shall approach the respective Regional Office / nearest Regional Office for medical examination by Doctor approved by the Bank. Commutation of Pension facility shall not be available for Family Pensioners.

8. Procedure for submission of Option Form by eligible Compulsorily Retired Employees / Officers & Family of deceased Compulsorily Retired Employees / Officers to join the Pension Scheme

Sr. No.	Category	Forms to be submitted	Mode of Submission	Stipulated Period of submission	Further course of action.
01	<b><u>Pension Option by Compulsorily Retired Employee:</u></b>  Employees / Officers who were in the services of the Bank prior to 29.09.1995 and compulsorily retired after completing 10 years of qualifying service prior to the date of the Settlement i.e. 27.04.2010	Annexure I to VIII	In physical form	60 days From 04.06.2020 To 02.08.2020	The set of application form as mentioned in this circular will be available at the nearest UBI Branch/Office. The filled in applications along with required documents in two sets are to be submitted in any of the nearby Branch/Office.  After receipt of set of application forms/documents <b>along with a copy of Punishment Order</b> , as mentioned in this circular from the Compulsorily Retired Employee / Officer/Family of the Compulsorily Retired Employee/Officer, Branch / Office will acknowledge one copy and forward the 2 <sup>nd</sup> copy to Regional Office under whose jurisdiction the branch/office, where the Compulsorily Retired Employee / Officer last worked falls.  Regional Office will forward the same to Central Office, Employee Benefit Division (EBD) along with work sheet for sanction/approval of pension option.
02	<b><u>Pension Option by FAMILY of deceased Compulsorily Retired Employee:</u></b>  Family of those employees who were in the services of the Bank prior to 29.09.1995 and compulsorily retired after completing 10 years of qualifying service prior to the date of the Settlement i.e. 27.04.2010 and died.	Annexure VIII to X along with Death Certificate of the employee and KYC documents of family pension applicant	In physical form	60 days From 04.06.2020 To 02.08.2020	

#Note: Medical examination is to be carried out by the Doctor approved by the Bank. Expenses, if any, related to the said medical examination including Doctor's fee (if any) shall be borne by the applicant.

*by copy*

9. Please note that any communication / letter or any other correspondence in any other form, submitted by Compulsorily Retired Employee/Officer or Family pension applicant prior to the date of this Circular shall not be entertained by the Bank as valid Option since Option form has to be submitted strictly as per formats enclosed.

**10. Procedure for remittance of funds refunded by Compulsorily Retired Employees / Family of Compulsorily Retired Employees :**

- 10.1 The process of submission of option to join the Pension Scheme will commence from 04.06.2020 and will be closed on 02.08.2020 (both days inclusive).
- 10.2 After submission of the pension option form by the eligible Compulsorily Retired Employee or Family of the deceased compulsorily retired employee has to refund the required amount on or before 01.09.2020 (within 30 days from the cut-off date) to the branch/office where the application form was submitted.
- 10.3 Branch / Office shall remit the amount collected from the eligible Compulsorily Retired Employee or Family of the deceased compulsorily retired employee to Pension Fund Account No. 378902010102148 individually, immediately and submit the consolidated list of Pension Optees, in the following format:

Sr. No.	PF No.	Name of the employee / family pension applicant.	Bank's contribution of PF with int. accrued thereon	56% of Bank's contribution with int. accrued thereon	Total of 4 & 5	Branch	Zone
01	02	03	04	05	06*	07	08
		TOTAL					

\*Total of column 06 should tally with the amount credited to Pension Fund Account No. 378902010102148

- 10.4 It may please be noted that only after refund of amount by the eligible Compulsorily Retired Employee or Family of the deceased compulsorily retired employee to Pension Fund Account, a Note for approval of pension / family pension will be put up to the competent authority.

**11. Procedure for remittance of contribution towards Pension Fund by Br/RO:**


Sr.No.	Nature of Contribution	Stipulated period of refund/credit to Pension Fund	Pension Fund Account to be credited & other steps to be taken
(i)	Bank's contribution to Provident Fund & interest thereon by Compulsorily Retired Employees / Family of deceased Compulsorily Retired Employees /	30 days (from 03.08.2020 to 01.09.2020)  Branch / Regional Office has to credit the account mentioned here as soon as they receive the	A/c.No.378902010102148 Branch/RO remitting the amount must mention correct Provident Fund Account No. and Name of the remitter, Branch Name, Branch SOL ID, Transaction

Officers. AND 56% of Bank's contribution to the Provident Fund.	amount from the Compulsorily Retired employees / family members of the deceased Compulsorily Retired employees, giving correct PF No. of the employee/officer.	Date.
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12. All the Branch Managers/Departmental Heads are requested to display the circular on the Notice Board of the Branch / Office. Further, in order to give wide coverage, copy of the circular be sent to the local retired employees'/officers' Federation/Association. A copy of the circular is also uploaded on the bank's corporate website: [www.unionbankofindia.co.in](http://www.unionbankofindia.co.in)
13. The application forms can be downloaded from Bank's corporate website: [www.unionbankofindia.co.in](http://www.unionbankofindia.co.in)
14. Co-operation of all staff members is solicited for timely exercising the option and are further requested to publicize / canvass the information to all concerned, so that, all eligible Compulsorily Retired Employees / family members of deceased Compulsorily Retired employees get the benefit of the scheme.
15. For any further clarification/assistance in respect of implementation of the pension option scheme, the following officials of EBD, Central Office may be contacted.

Shri Ganpat Patel, Manager (Pension) : 022-22896246/IP 116246  
Shri Kaiffy Goyal, Manager (Pension) IP 116249  
Email ID: [ganpat.patel@unionbankofindia.com](mailto:ganpat.patel@unionbankofindia.com); [kaiffy.goyal@unionbankofindia.com](mailto:kaiffy.goyal@unionbankofindia.com)

Shri Sanjeevkumar Pillamari  
Chief Manager : 022-22896236 / IP: 116236  
e-mail ID : [ebd.co@unionbankofindia.com](mailto:ebd.co@unionbankofindia.com);

  
\_\_\_\_\_  
CHIEF GENERAL MANAGER (HR)  
HR

ANNEXURE - I  
to Staff Circular No. 7116 dated 04.06.2020

**OPTION FORM FOR JOINING THE PENSION**

(To be submitted by the Employees / Officers who were in the service of the bank prior to 29.09.1995 and Compulsorily Retired from the service of the bank on or before 27.04.2010)

To  
The Chief General Manager (HR)  
Human Resources Department  
Union Bank of India  
Central Office  
Mumbai - 400 021

I hereby declare that I have read and understood the terms of Settlement / Joint Note dated 27.04.2010 for extending another option to join Pension Scheme. I have understood that the terms of the Settlement/Joint Note have been arrived at on the basis of the Unions/Associations offering to contribute 30% of the initial funding gap assessed for extending another option for joining the pension scheme. I am agreeable to the said contribution of 30% towards the initial funding gap and hereby voluntarily opt to become a member of the Bank's Pension Scheme as per the provisions of the said Settlement/Joint Note.

I undertake to refund the Bank's contribution to Provident Fund together with interest thereon paid to me on my Compulsory Retirement plus 56% of the said amount being 30% contribution towards the initial funding gap in terms of Clause 3 (c) of Joint Note dated 27.04.2010 and Clause 2 (IV) (b) of the Settlement dated 27.04.2010. The total amount due from me will be refunded to the Bank on or before 01.09.2020.

- i. I confirm that I have not filed any case in any court of law against the Bank in connection with Pension Option;

OR

- ii. I have filed a case in \_\_\_\_\_ Court for Pension Option. However, I have withdrawn the same (copy of the relevant Order is enclosed) / I hereby undertake to withdraw the said case and submit the relevant Order.



Further, I hereby declare that I am aware that Pension payable to me is subject to the provisions of the Union Bank of India (Employees') Pension Regulations 33 for Compulsory Retirement Pension.

I am aware that once I exercise Pension Option and refund the requisite fund, the Pension option cannot be revoked.

Place:.....

Date :.....

.....  
(Signature)

Name in full : .....

Category : Officer / Clerk / Sub-staff

Date of Joining : .....

Last Designation of the

Employee and Branch : ..... Branch .....

P.F. Account No. : .....

Present Residential Address : .....

Mobile No. : .....

e-mail ID : .....

.....  
Signature attested

Name of the Official:.....

(Branch/Departmental Head)

P.A. No.....

Seal of the Branch / Department

Note: Additions/alterations in the text of the above form will render the option invalid

#### ACKNOWLEDGEMENT

Option Form as above received and forwarded to Employee Benefits Division (EBD) - Central Office (through Regional Office in case of branches)

Place:.....

Date:.....

Signature

(Branch/Departmental Head)

Name of the Official.....

Seal of the Branch/Department

ANNEXURE - II

to Staff Circular No. 7116 dated 04.06.2020

FORM NO.3

APPLICATION FOR GRANT OF PENSION

To  
The Chief General Manager (HR)  
Human Resources Department  
Union Bank of India  
Central Office  
Mumbai 400 021.

Passport size  
PHOTOGRAPH  
alongwith spouse duly  
attested by Branch  
Manager/Departmental  
Head

I retired from the Bank's service under Compulsory Retirement, with effect from \_\_\_\_\_ and have now opted for Union Bank of India Employees' Pension Scheme. Please sanction the pension as per the rules of the Bank. I desire to draw my pension from \_\_\_\_\_ Branch and request you to credit the monthly pension to my SB A/c No. \_\_\_\_\_ with \_\_\_\_\_ Branch, \_\_\_\_\_ Region.

The necessary details are as under :

1. Name in full :
2. PF No. :
3. Date of Birth :
4. Date of Joining :
5. Designation at the time of joining :
6. Branch/Department last worked :
7. Name of the Region :
8. Designation at the time of cessation  
Of service :
9. Date of cessation of service and reason :
10. Addition to qualifying service in terms  
Of Pension Regulations (applicable for the  
employees joined as specialists) :
11. Name of the spouse :
12. Date of birth of spouse :





13. Data of family members :

S.No.	Name	Relationship	Date of Birth
i.			
ii			
iii			
iv.			
v.			

I hereby declare that information furnished above is true to the best of my knowledge and I shall give any other information as and when required by the Bank.

Signature  
Address

Place:  
Date :

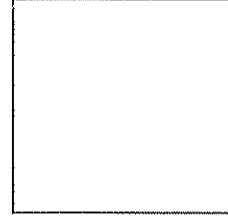
**Note: ENSURE TO ENCLOSE AN ADDITIONAL PASSPORT SIZE PHOTOGRAPH JOINTLY WITH SPOUSE.**

ANNEXURE - III  
to Staff Circular No. 7116 dated 04.06.2020

**FORM NO. 5A (PART I)**  
**APPLICATION IN DUPLICATE FOR COMMUTATION OF**  
**PENSION SUBJECT TO MEDICAL EXAMINATION**

To,

The Chief General Manager(HR)  
Human Resources Department  
Union Bank of India,  
Central Office  
Mumbai 400 021.



Dear Sir,

I desire to commute a fraction of my pension in accordance with Union Bank of India Employees' Pension Regulations, 1995. An attested copy of my photograph is affixed on the application and an unattested copy is enclosed. The necessary particulars are furnished below:

1. Name in full (in block letters) :
2. PF No :
3. Designation at the time of retirement :
4. Branch/Office last worked :
5. Name of the Region :
6. Date of birth (as per Bank's service record) :
7. Date of Joining the Bank :
8. Date of retirement /CRS :
9. Class of Pension :



10. Fraction of pension proposed to be :  
commuted not exceeding 1/3rd thereof

11. S. B. Account

12. Branch where pension is payable :

13. Name of the Region :

\_\_\_\_\_  
(Signature)

Address :

Place:

Date :

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ACKNOWLEDGEMENT

Received from Shri/Smt. /Kum \_\_\_\_\_

Application for commutation of Pension subject to Medical Examination.

\_\_\_\_\_  
Branch Manager/Departmental Head

Branch/Dept. \_\_\_\_\_

Place:

Date :

ANNEXURE - IV  
to Staff Circular No. 7116 dated 04.06.2020

FORM NO. 7 (PART- I)

DECLARATION BY THE PENSIONER FOR  
FACILITATING MEDICAL EXAMINATION  
BY THE BANK'S MEDICAL OFFICER

Space for affixing  
attested  
passport size  
photograph

The applicant must complete this statement prior to his examination by the Bank's Medical Officer and must sign the declaration appended thereto in the presence of Bank's Medical Officer.

1. Name in full (in block letters) :
2. Date of birth (as per Bank's service record) :
3. Particulars regarding parents
  - a) Father's age, if living & state of health :
  - b) Father's age at death and cause of death :
  - c) Mother's age, if living & state of health :
  - d) Mother's age at death and cause of death :
4. Have you been considered for grant of invalid Pension?  
If so, state the ground thereof :
5. Have you been granted leave on medical certificate during the last three years of your service?  
If so, state periods of leave and nature of illness :



6. Have you during the last three years period :

(a) suffered from any major illness requiring hospitalization?

If so, the nature of illness & period of hospitalization may please be indicated; or :

(b) undergone any major surgical operation:

(c ) lost or gained weight markedly :

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**DECLARATION BY THE APPLICANT**

(To be signed in the presence of the Bank's Medical Officer)

I declare all the above answers to be, to the most of my belief, true and correct.

I am fully aware that by willfully making a false statement or concealing a relevant fact, I shall incur the risk of losing the commutation.

Place:

Date:

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Applicant's signature or thumb  
impression in case of illiterate applicant

Signature of Bank's Medical Officer

ANNEXURE - V  
to Staff Circular No. 7116 dated 04.06.2020

**FORM NO. 7 (PART II)**

Medical details of the Pensioner

(To be filled by the examining Medical Officer)

1. Apparent Age :
2. Height :
3. Weight :
4. Describe any scars or identifying marks of the applicant:
5. Pulse rate :
  - (a) Sitting
  - (b) Standing
- What is the character of pulse? :
6. Blood Pressure :
  - (a) Systolic
  - (c) Diastolic
7. Is there any evidence of disease of the main organs? :
  - (a) Heart
  - (b) Lungs
  - (c) Liver
  - (d) Spleen
  - (e) Kidney
8. Investigations (wherever considered necessary by the Bank's Medical Officer) :
  - (i) Urine (State specific gravity)
  - (ii) Blood
  - (iii) X-ray Chest
  - (iv) E.G.G.
9. Any additional finding :



ANNEXURE - VI  
to Staff Circular No. 7116 dated 04.06.2020

FORM NO. 7 (PART III)

(Certificate of fitness for payment of Commutation of Pension)

(To be filled by the examining Medical Officer)

I/We have carefully examined Shri/Smt./Kum. \_\_\_\_\_ and  
am/are of opinion that

He/She is in good bodily health and has the prospect of an average duration of life.

OR

He/She is not in good bodily health and is not a fit subject for

OR

Although he/she is suffering from

he/she is considered fit subject for commutation but his/her age for the purpose of  
commutation, i.e. the age next birthday should be taken to be \_\_\_\_\_ (in words)  
years more than his/her actual age.

Place :

Date :

\_\_\_\_\_  
Signature and designation of  
examining Medical Officer



ANNEXURE - VII  
to Staff Circular No. 7116 dated 04.06.2020

**FORM NO.8**

**NOMINATION FORM FOR COMMUTED VALUE OF PENSION/ARREARS OF PENSION**

**From:**

Shri / Smt/ Kum. \_\_\_\_\_  
Retired as \_\_\_\_\_  
P.F. No. \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**To,**

**The Chief General Manager(HR)**  
Human Resources Department  
Union Bank of India,  
Central Office  
Mumbai 400 021.

Dear Sir,

I \_\_\_\_\_, hereby nominate the person/persons mentioned below, who is/are members of my family to receive, to the extent specified against their names, the amount of commuted value of Pension/arrears of Pension in the event of my death, which has become payable and remained unpaid.

Sr. No.	Full Name and Address of the Nominee	Relationship with Pensioner	Age	Share/Proportion in which commuted value of pension/arrears payable to each nominee





Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2020

\_\_\_\_\_  
Signature/Thumb Impression  
Of the pensioner

Witnessed by :

1. Signature :  
Full Name :  
Address :
  
2. Signature :  
Full Name :  
Address :

ANNEXURE - VIII  
to Staff Circular No. 7116 dated 04.06.2020

**LETTER OF UNDERTAKING FOR RECOVERY OF EXCESS PAYMENTS  
MADE ON ACCOUNT OF PENSION SETTLEMENT**

To  
The Chief General Manager (HR),  
UNION BANK OF INDIA,  
Human Resources Department  
Central Office,  
Mumbai-400021.

Dear Sir,

I have been sanctioned Pension / Family Pension as per Staff Circular No. 7116 dated 04.06.2020 under Union Bank of India (Employees') Pension Regulations, 1995. As per the said circular, I am eligible to get the commutation/ arrears on my pension. I understand that you are agreeable to release such commutation / arrears of pension subject to my furnishing letter of authority / undertaking authorizing you to make recoveries of excess payments made if any to me while giving the commutation / arrears of pension.

Accordingly, I hereby irrevocably authorize you to make any recoveries / adjustments out of my future pension, if it is revealed at any time that I have been paid pension wrongly. I undertake to repay the amount immediately on demand, in lump sum. This undertaking / authority is irrevocable and binding upon me / my legal heirs/ nominees as well.

Yours faithfully,

Place :

Date:

.....  
Signature

Name of the pensioner:.....  
/ Family pensioner  
Employee's P.F. No. :.....

Telephone/Mobile No.....



ANNEXURE - IX  
to Staff Circular No. 7116 dated 04.06.2020

**PENSION OPTION FORM FOR FAMILY PENSION**

(To be submitted during the stipulated period of 60 days from 18.03.2020 to 16.05.2020 by family member of Ex-Employee/Officer who were in the services of the Bank prior to 29<sup>th</sup> September 1995 and compulsorily retired from the service of the bank on or before the date of the settlement i.e. 27.04.2010 and died thereafter):

To:  
The Chief General Manager (HR)  
Human Resources Department  
Union Bank of India,  
Central Office,  
Mumbai 400 021

I hereby declare that I have read and understood the terms of Settlement / Joint Note dated 27.04.2010 for extending another option to join Pension Scheme. I have understood that the terms of the Settlement/Joint Note have been arrived at on the basis of the Unions/Associations offering to contribute 30% of the initial funding gap assessed for extending another option for joining the pension scheme. I am agreeable to the said contribution of 30% towards the initial funding gap and hereby voluntarily opt to become a member of the Bank's Pension Scheme as per the provisions of the said Settlement/Joint Note and to cease to be a member of the Contributory Provident Fund Scheme.

I undertake to refund the Bank's contribution to Provident Fund together with interest thereon paid to me on my Compulsory Retirement plus 56% of the said amount being 30% contribution towards the initial funding gap in terms of Clause 3 (c) of Joint Note dated 27.04.2010 and Clause 2 (IV) (b) of the Settlement dated 27.04.2010. The total amount due from me will be refunded to the Bank on or before 01.09.2020.

I am aware that once I exercise the pension option and refund the requisite fund, the pension option cannot be revoked.

Name of the Family Member : \_\_\_\_\_

Name of the Employee : \_\_\_\_\_

P.F. No. : \_\_\_\_\_

Present Residential Address : \_\_\_\_\_

\_\_\_\_\_(Mob No.)\_\_\_\_\_

Category : \_\_\_\_\_(Officer/Clerk/Sub-staff)



Date of Joining : \_\_\_\_\_  
Date of CRS : \_\_\_\_\_  
Last Working Branch : \_\_\_\_\_

(Signature)

Place:

Date:

(To be attested by AGM/Chief Manager/Manager as the case may be under his full signature and PF No.)

Note: Additions/alterations in the text of the above form will render the option invalid.

.....  
**ACKNOWLEDGEMENT**

Received application form from Shri/Smt \_\_\_\_\_

For opting pension as per Staff Circular No. \_\_\_\_\_ dated \_\_\_\_\_ and  
forwarded to Employee Benefits Division (EBD) Central Office.

Place:.....

Date:.....

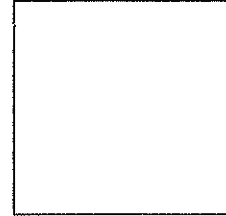
Chief Manager/Manager

ANNEXURE - X  
to Staff Circular No. 7116 dated 04.06.2020

FORM -4

(Application for grant of Family Pension  
on the death of the Employee/Pensioner).

The Chief General Manager (HR),  
Human Resources Department  
Union Bank of India  
Central Office  
Mumbai 400 021.



Sir,

I regret very much to inform you of the sad demise of my husband /wife Shri / Smt. \_\_\_\_\_ on \_\_\_\_\_. The relative death certificate is enclosed. After his/her death, I am the first / next family member being spouse/son/daughter of deceased employee eligible for family pension.

I, therefore, request you to grant me family pension as per Bank's pension scheme, 1995.

1. Details of the applicant

- A. Full Name : Mr/Mrs \_\_\_\_\_
- i) Widow/Widower  
ii) Son/Daughter (Unmarried & unemployed not over 25 years age)  
iii) Guardian if the deceased person is survived by minor child or children
- B. Permanent Address :
- C. Branch from where pension Payment is desired :
- D. S.B. A/c. No.(Individual) :  
(15 Digit Account no.)
- E. Date of Birth (family pensioner) :
- F. Marital Status of the applicant :



2. Name & age of the surviving widow/widower and children of the deceased employee/pensioner.

Sr. No.	Name	Relationship with the deceased person	Date of birth by Christian era	Occupation, if any

3. Details of the deceased employee/pensioner

- i) Full Name :
- ii) PF Number :
- iii) Designation :
- iv) Branch/Dept. last worked & Zone :
- v) Date of Birth :
- vi) Date of joining Bank's services :
- vii) Date when Compulsorily retired :
- v) Date of death :

4. Indicate whether family pension is admissible:  
 From any other source Military or Stare  
 Government and /or a public sector  
 Undertaking / autonomous body/local fund under  
 the Central or State Government.

5. Enclosures

- (ii) Certified copy of death certificate of the employee
- (iii) Certified copy of the birth certificate/School leaving certificate in case of child
- (iv) Latest passport size photograph (two copies) of the applicant
- (v) Other relevant documents establishing identify such as election card/adhaar card/pan card etc.



(vi) In case of family pension for son/daughter, who are physically crippled or suffering from disorder or disability of mind, certificate from the Doctor approved by the Bank to the effect that the disability or handicap is of such a nature as to prevent him / her from earning livelihood, stating exact mental or physical conditions of a child. (such certificate to be produced to the bank every 3 years)

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Signature or left hand thumb  
Impression of the applicant in  
case of illiterate

Date:

Full residential Address:

Witness:

1. Name:

Address

Signature

2. Name:

Address

Signature

<b>From :</b>  Regional Office, ..... .....	<b>To:</b>  The Chief General Manager (HR), Human Resources Department Central Office
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REF. NO.

DATE :

**WORKSHEET FOR SANCTION OF PENSION**

**PART A**

1. Name of the Employee : \_\_\_\_\_
2. P.F. No. : \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_
4. Date of Joining : \_\_\_\_\_
5. Date of cessation of service (CRS) : \_\_\_\_\_
6. Reason of cessation of service : **Compulsory Retirement**  
(Copy of Relieving Order to be attached)
7. Designation at the time of Cessation of service : \_\_\_\_\_
8. Branch/Department last worked : \_\_\_\_\_
9. Qualifying Service : \_\_\_\_\_ Years
10. Whether departmental or judicial proceedings instituted / pending. : Yes / No  
If yes, give details.





11. Emoluments drawn during 10 months prior to cessation of service

Month & Year	Basic Pay	Allowances Qualifying for P.F. & D.A.	Increment Component of Fixed Personal Allowance	Allowance qualifying for P.F. only
	Rs.	Rs.	Rs.	Rs.
TOTAL				

12. Amount of Provident Fund Bank's Contribution Paid : Rs. \_\_\_\_\_

13. Date of PF Payment :

Sr. Manager (HR)/Chief Manager (HR)