SINGLE COMPREHENSIVE FORM

PLEASE FILL IN ALL THE ITEMS PROPERLY AND CAREFULLY. IN CASE A PARTICULAR ITEM IS NOT APPLICABLE, PLEASE STATE SO BUT DO NOT LEAVE THE ITEM BLANK. THIS FORM NOT COMPLETED IN ALL RESPECTS WILL NOT BE ACCEPTED AND A FRESH SINGLE COMPREHENSIVE FOR MAY BE CALLED FOR.

(As per memo No. 398-F(Pen) dt. 13/09/2012- of Govt. of West Bengal, Finance Deptt.)

1.		Name of the Govt. employee (IN BLOCK LETTERS)
2.	а	Name of the establishment last served/serving with full Address including Pin code and Telephone No. / FAX No.
	b	Employer / PSA's code No. (as given by AG office)
3.		Date of Birth of Govt. employee (dd/mm/yyyy format)
4.		Class of Pension applicable (Superannuation/Family/Retiring/Invalid/Pro rata etc) in this case
5.		Designation of the Govt. employee
6.		Whether a member of General Provident Fund (GPF), If so, quote GPF Account No.
7.		Address of the Govt. employee:
	a.	Present (with Pin code)
	b.	Permanent (with Pin code)
	c	Mobile No. of Pensioner to which SMS alerts to be sent, if desired.
	d	E-mail id of the Pensioner to receive alerts, if desired
8.	a.	Name of the recipient of family pension (IN BLOCK LETTERS)
	b.	Relationship with Govt. employee
9.		Address of the family pensioner (in case of death while in service/after retirement)
	a.	Present (with Pin code)
	b.	Permanent (with Pin code)
	С	Mobile No. of Family Pensioner to which SMS alerts

		to be sent, if desired.
	d	E-mail id of the Family Pensioner to receive alerts, if
		desired
10.		Place of payment of Pension / Family Pension
		(State clearly the name of Treasury with Unit No. i.e. I or
		II if payment is desired in West Bengal.)
11		
11.		Name of the Treasury/PAO (with Unit No. i.e. I or II)
		with which Pension Sanctioning Authority attached
12.		If payment of pension is desired through a Public Sector Bank in Calcutta Corporation area? If so.
	a.	Name of the Bank & Branch
		(with B.S.R. Code No. of the Paying Branch as well
		as Link Branch)
	b.	S/BA/c. No. (in single name/joint name with spouse)
	7	(Enclose Annexure A in duplicate)
13.	a	Date of appointment
	b	Date of commencement of Pensionable Service
	c	Date of Retirement/Death (strike out whichever is not
		applicable)
	<u> </u>	
14.	a	Nationality and Religion
14.	b	Gender (Male/Female)
	U	Gender (Marc/Penjare)
15.	a.	Status of the Govt. employee (Temporary/Permanent)
į		
	b.	Whether work-charged employee
	<u> </u>	
	c.	Whether appointment is made on ad-hoc basis and if
		so, whether subsequently regularised by Govt. (enclose copy of Govt. order)
		(Cherose copy of Govt. order)
16.		Father's/Husband's Name of the Govt. employee
17	T _	Wile al. 1 1 1 1 W D
17.	a	Whether already enrolled under West Bengal Health
	b	Scheme (please answer in either of YES or NO). If answer to 17(a) above is 'Yes', then whether opted
		out from Health Scheme after retirement? (please
		answer in either of YES or NO). If answer to 17(a) above
		is 'No' then please leave out this column.
18.		Whether a member of Contributory Provident Fund
10		(CPF), If so, quote CPF Account No.
19.		If a member of Contributory Provident Fund (CPF),
		whether the employer's share of CPF along with interest and additional interest accrued thereon has been credited
		to the Govt. Account (with full particulars mentioning the
20		period for which refund made)
20.		Pension Rules and relevant Govt. order applicable in
21.		Govt under which service has been randowed (in
41.		Govt. under which service has been rendered (in

		order of employment s	showing the period	ods served					
Y		under each govt.)							
22.	a.	Period of gross service							
	b.	Period of war/military service if any							
	c.	Details of period(s) of Service on deputation terms to Govt. undertakings/Autonomous bodies/bodies etc., if any							
		Organisation From (Date) To (Date)			Remarks	Contribution Received			
							(Yes/No)		
	d.	Amount and nature of pension/gratuity received for Military service							
	e.	Whether opted for Family Pension on account of Military Service							
	f.	Whether in receipt of any other Pension, if so its' particulars and source from which being drawn.							
23.	<u> </u>	Non-qualifying service :							
	a.	EOL without medical ce	rtificate						
	b.	Period of suspension pension etc.	not to be count						
	c.	Other non qualifying ser	vice, if any						
24.	<u> </u>	Net qualifying service qualifying service)	(Gross service	minus non-					
25.		Weightage of Service a retired on or after weightage under Rule 1971 is not applicable).	25/02/2009, the 27 of WBS(D	benefit of					
26.	a.	Total service qualifying	for pensionary be	nefits.					
	b.	Last pay drawn in pay any.	band + Grade Pa	y + NPA, if	₹				
	c.	Scale of pay/Pay Band	& Grade Pay						
	d.	Proposed Superannuation Pension/Retiring Pension / Invalid Pension							
	e.	Proposed Retiring Grat	uity/Death Gratuit	y 					
	f.	Proposed family pension							
27	•	Date on which the Go applied for pension							
28	•	Date from which pensic commence	on/family pension	is to					

b. If so, amount/portion of pension c. Date on which application for confidence of the pension sanction d.	ommutation ning authority Pension (in	has been			17 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -		
received by the pension sanction	ning authority Pension (in	′					
J D 1 CT 1	`	case of					
d. Proposed amount of Reduced commutation applied and sanction							
e. Proposed amount of CVP (enclose application for commutated duly accepted by PSA)							
Descriptive Roll of the pensione the following information):	r/family pens	sioner(Enclo	ose descrip	tive roll in 3	separate sheets with		
(i) Height			··· «				
(ii) Identification marks		7.77.2.4.4					
(iii) Left Thumb and finger impression	on	<u> </u>	V=		AND		
Thumb Fore fing	er Midd	le finger	Ring fi	nger Li	ttle finger		
(Persons who are literate enough to	sign their nan	nes in Englis	h Hindi or	the Official Re	egional Language, are		
exempted from recording their left	thumb and fin	ger impression	ons)				
31. Statement of fami daughter(s) beyond 25 years & physic years)	ly mer	nbers d and menta	(includin ally retarde	g unmarried ed son(s)/dau	d/widowed/divorced aghter(s) beyond 25		
SI. Name(s) Date	of birth A	ge Relati	ionship	Marital Statu	Date of marriage		
32. a) Whether nomination made for Family Pension		ion/LTA			- 1		
1 1	If so, state the name of the nominee (enclose the nomination paper in duplicate)						

	c)	If not, state the name(s his/her/their age, share paya the deceased pensioner/fam of pensionary benefits are p	ible and relatively related to the relation of	tionship	with		
33.		(For Death case	es only)				
	a)		ade for d	eath-gra	atuity		
	b)	(Yes/No) If so, state the name of his/her/their relationship wand share payable					
		Enclose two sets (one in gratuity duly counter signed Bengal Notification no. 963	d by the Head	of the (
	c)	State below the details of daughter(s) beyond 25 years [defined in Rule 7]	s & physicall;	y crippl	ed and men	itally retarded so	rried/widowed/divorced on(s)/daughter(s) beyond
		Statem	ent of	fam	ily mo	embers	
SI. No.		Name(s)	Date of birth	Age	Relations hip	Marital Status	Date of marriage in case of married daughters included; if any,
1		married before death of Go	vt. employee	do not	fall in the	definition of Fa	mily for the purpose of
34.		Outstanding dues of the	Govt. employ	ee (ple	ase always	s quote head of	f account to which the
		recovery to be credited).			Ā	Amount (₹)	Head of Account
	(a)	House Building Advance					
	b)	Marriage & Illness Advan	ce				
	c)	Cycle /Scooter/Car Advar	ice/Computer	Advano	ce		
	d)	Festival Advance					
	e)	Overdrawal of pay/allowa			ie Head		•
	f)	Any other outstanding dunder which it is to be c	ues with He		Account	-	
35.	a)	Provisional Pension/Fami (Please state the rate sanctioned)					
	b)	Provisional gratuity/death	gratuity paid	, if any			

	(c)	Immediate relief paid, if any	
36.		Head of Account to which pension/gratuity is chargeable	
37.	a)	Whether the Govt. employee is re-employed after retirement	
	b)	If so, details of re-employment and fixation of re-employed pay may be stated with necessary order of competent authority.	
38.	a.	Whether the family pensioner is employed (widow/widower).	
	b.	Whether the Family Pensioner is in receipt of any other Pension/Family Pension. If so, details thereof.	
39.		Please state the name of legal guardian/natural guardian who will draw the share of pension/family pension/gratuity/death gratuity in favour of minors.	
40.		State with details whether any vigilance case/court case/departmental or criminal proceedings is pending against the Govt. employee. If so, give details with supporting documents.	
41.		Any other Remarks	
42. empl retire	ovee h	The undersigned having satisfied himself that the above particulars been thoroughly satisfactory hereby orders the grant of ratuity/service gratuity which may be accepted by the Accountant	the full pension/family pension, death-cum-
	(B)	The undersigned having satisfied himself that the service of Sh	ri/Shrimati/Kumari
		has not been thoroughly	satisfactory here by orders that the full
pens as ad	ion/fam lmissib	nily pension/death-cum-retirement gratuity/service gratuity, which le under the rules shall be reduced by the specified amount or pe	th may be accepted by the Accountant General reentage indicted below:-
	Am	ount or percentage of reduction pension/family pension	Amount or percentage
of re	duction	n in gratuity The grant of	pension/family pension, death-cum-retirement
1		vice gratuity	
	•	applicable portion should be scored out]	

Dated:

such excess.

Signature

found to be in excess of amounts to which the pensioner is entitled under the rules, he/she shall remain liable to refund

This order is subject to the condition that if the amount of pension and/or gratuity as authorised be afterwards

FullName

Designation of the

Pension Sanctioning Authority

	Note:-
	The following documents are required to be submitted to the Office of the Accountant General (A&E), West Benga alongwith this form duly filled:-
	Service Book of the Govt, employee alongwith pay fixation statement under the relevant ROPA rules duly checked and verified by the Head of the Office.
b.	LPC/Statement of Outstanding dues/Annexure to 1315-F dt. 14-10-96 duly filled.
c.	Calculation Sheet for Qualifying Service, Pension, Gratuity and Family pension.
d.	Attested Passport size Joint Photograph/photograph and specimen signature/left hand thumb and finger impressions of the Pensioner/Family Pensioner/Legal guardian/Legal heirs (4 copies each).
e.	Death Certificate/Medical Certificate (in case of death/invalidation)
f.	Death certificate of the husband / Oivorce certificate (in case of the family Pension to widowed/divorced daughter)
g.	Marriage Certificate (in case of family pension to Post-retiral Spouse / second marriage after the death of the first wife/husband)
h.	Guardianship certificate (in case of Payment of Family Pension / Share of death gratuity to minor through legal guardian)
i.	Nomination under Arrears of Pension Nomination Rules, 1986 in duplicate in terms of GO No. 10885-F dt. 24-10-86 read with 1633 dt. 17-02-1989 and GO No. 9203-F dt. 11-08-89.
j.	One set of nomination for Death Gratuity duly counter signed by the Head of the Office in the prescribed form in terms of Govt. of We Bengal Notification no. 963-F (Pen) dt. 7-11-05 (only in Death cases).
k.	Application for commutation of pension in Prescribed Form duly signed by the PSA.
1.	Certificate to the effect that no case or appeal is pending in any court of Law against the drawal of pay in terms of GO No. 547-F (Pedt. 12-04-1993.
m.	Application for family pension in Annexure II (in death cases / in case death after retirement)
n.	Application for pension in Form 5 (if payment is desired outside West Bengal)
o.	Copies of clearance certificates/correspondences if any, issued by AG(A&E), West Bengal for item nos. 34 (a), 34 (b) & 34 (c) of Sin Comprehensive Form.
p.	Age proof certificate for payment of Family Pension in favour of minor.
q.	Family details of the Govt. employee including disabled child to be submitted by the pensioner/family pensioner under attestation Pension Sanctioning Authority.
r.	Requisite certificate /document if family pension is allowed to physically crippled/mentally disabled son or daughter and depend parents.
S.	Copy of relevant office order of the competent authority regarding higher appointment along with mode of pay fixation/promotion / benefit /grade appointment etc.
t.	Income certificate in case of Family pension to widowed/divorced/un-married daughter beyond 25 years as well as Family pension dependent parents.
u.	Copy of enrolment certificate in case of enrolment under West Bengal Health Scheme 2008.
1	In case of payment is desired in outside West Bengal, this form may be submitted in duplicate.