



स./ No. 5-1(17)/2008-PD

दिनांक/Dated: 05/08/2015

प्रेषक / From:

संयुक्त सचिव (प्रशासन)  
Joint Secretary (Admn.)

सेवा में / To :

The Directors / Heads of all  
National Labs./Instts. of CSIR  
Hqrs./Complex/Centres/Units

**विषय / Sub : Amendment to Central Civil Service (Extra-ordinary) Pension Rules- Issue of Notification and forms reg.**

महोदय/Sir / महोदया/Madam,

मुझे भारत सरकार के कार्मिक, लोक शिकायत तथा पेंशन मंत्रालय के पेंशन एवं पेंशनभोगी कल्याण विभाग द्वारा उपरोक्त विषय पर दिनांक 2 जून 2015 को जारी किए गए अधिसूचना संख्या No.33/4/2014-P&PW(F) को जानकारी, मार्गदर्शन और अनुपालन के लिए अग्रेषित करने का निदेश हुआ है।

I am directed to forward herewith Ministry of Personnel, Public Grievances & Pensions, Department of Pension & Pensioners' Welfare Notification No. 33/4/2014-P&PW(F) dated 2<sup>nd</sup> June 2015 on the above subject for information, guidance and compliance.

भवदीय/Yours faithfully

*विनोद कुमार*  
05/08/15  
(विनोद कुमार /Minod Kumar)  
अवर सचिव (नीति) / US(PD)

संलग्न/Encl. : यथोपरि/As above

प्रतिलिपि/Copy to:

- 1) Head, IT Division with the request to make this OM available on the website & Policy Repository.
- 2) कार्यालय प्रति/Office copy

**[TO BE PUBLISHED IN THE GAZETTE OF INDIA, IN PART II, SECTION 3, SUB SECTION(i)]**

**Government of India  
Ministry of Personnel, Public Grievances and Pensions  
(Department of Pension and Pensioners Welfare)**

**New Delhi, the 02.06.2015.**

**NOTIFICATION**

G.S.R.....- In exercise of the powers conferred by the proviso to article 309 read with clause (5) of article 148 of the Constitution and after consultation with the Comptroller and Auditor General in relation to persons serving in the Indian Audit and Accounts Department, the President hereby makes the following rules further to amend the Central Civil Services (Extraordinary Pension) Rules, 1939, namely:-

1. (1) These rules may be called the Central Civil Services (Extraordinary Pension) Amendment Rules, 2015.  
  
(2) They shall come into force on the date of their publication in the Official Gazette.
2. In the Central Civil Services (Extraordinary Pension) Rule, 1939, in Schedule IV, for Form A and Form B, the following Forms shall respectively be substituted, namely:-

**“FORM A**  
**[See rule 13 (4) (ii)]**  
**FORM OF APPLICATION FOR DISABILITY PENSION**  
**Part I**  
**(To be filled by the applicant)**

1.	Details of the Applicant: (i) Name (ii) Designation/Rank (iii) IRLA/Personal/ Force/ Regiment No. (iv) Aadhaar Number ( if available) (v) Marks of Identification	Space for  Photograph
2.	Name of Father OR Mother OR Both a) Name of Father b) Name of Mother	
3.	Date of birth of applicant	
4.	(i) Correspondence address with PIN code (ii) Permanent address with PIN code	
5.	Post held at the time of injury/disease	
6.	Bank name, Branch address, Account No. to which pension is to be credited (joint account, either or survivor, with spouse) BSR Code, IFSC Code	
7.	Enclosures: (i) Self-attested copies of certificate of Medical Board, (ii) Form 3 of Central Civil Services (Pension) Rules, 1972 (iii) Nomination Forms (except commutation of pension), (iv) Undertaking in Form 26 of Central Civil Services (Pension) Rules, 1972 (if applicable), (v) Undertaking for refunding any excess payment, (vi) Specimen signature/thumb impression (in case of illiterate applicant) (vii) Three joint photographs with spouse or separate photographs of the applicant and spouse where it is not possible to submit a joint photograph, {Note: Thumb impression ( in the case of illiterate applicant) is to be attested by a Gazetted Officer and photographs are to be attested by Head of Office}	

Note: In case the Head of Office is satisfied that it is not possible for the applicant to open a joint account for reasons beyond his/her control, this requirement may be relaxed.

Place:

Date:

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 Signature of Applicant

Contact Number:

e-mail ID:

Date of receipt of Form:

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 Signature of Head of Office with seal

**Part II**  
(To be filled by the Head of Office and forwarded to Accounts Officer)

1.	(i) Present/last post held (ii) Post held at the time of injury/disease (iii) Head quarters/unit with address (iv) Service to which belongs	
2.	(i) Date of entry into service (ii) Date of discharge/boarding out from service	
3.	Net qualifying service (a) Actual (b) Notional for categories 'D' and 'E'	
4.	Pay band and grade pay or pay scale	
5.	(i) Basic pay on the date of injury/disease (ii) Basic pay on the date of medical examination (include non-practising allowance in the basic pay)	
6.	Percentage of disability sustained due to injury/disease (as certified by the medical authorities) and circumstances which resulted in that disability	
7.	(i) Date of injury/disease (as certified by the medical authorities) (ii) Date of medical examination	
8.	Amount of retirement gratuity/death gratuity	
9.	(a) Proposed disability pension (b) Date from which pension is to commence	
10.	Rate of extraordinary family pension if death occurs within 7 years from the date of injury or date of medical report on disease and is on account of the same injury or disease for which he was boarded out.	
11.	Rate of family pension in case of death other than as in item 10 – (i) Enhanced rate (ii) Ordinary rate (iii) Period for which family pension will be payable (a) at enhanced rate (b) ordinary rate	

Accounts Officer

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*Signature of Head of Office with seal*

**FORM B**  
[See rule 13 (4) (ii)]

**FORM OF APPLICATION FOR FAMILY PENSION**

Application for extraordinary family pension in respect of late Shri/Smt. .... killed or died of injury(ies)/disease(s) claimed as attributable to Government Service.

**I. Information regarding the deceased**

1.	Full name and address	
2.	Name of Father OR Mother Or Both	
3.	Date of death	

**II. Information regarding the claimant**

4.	Name and address, (showing Village, Post Office, District, State, PIN code)	
5.	Date of birth	
6.	Aadhar Number ( if any)	
7.	Monthly income from all sources	
8.	Relationship with the deceased	
9.	Bank name Branch address Account No. BSR Code/IFSC Code	

**III. Details of surviving members of family of the deceased**

Relation	Name	Date of birth (Christian Era)	Disability, if any	Marital status
Widow/Widower				
Sons				
Daughters				
Father				
Mother				
Brother				
Sister				

IV. In case the claimant is minor or suffering from disorder or disability of mind, including mental retardation, details of guardian/nominee, wherever applicable-

Name	Date of birth	Relationship with the minor/mentally disabled claimant	Relationship with the deceased Government servant	Postal address

- Enclosures: 1. Report of medical examination of the deceased employee  
(Copies of) 2. Guardianship certificate, if applicable  
3. Disability certificate of the claimant, if any  
4. Income certificate

Specimen signature/thumb impression and two photographs of the applicant, attested by a Gazetted Officer are enclosed.

Place:

Date:

(Signature of claimant)

Phone No:

Permanent Account Number for Income Tax (PAN).....

Aadhar No., if available - .....

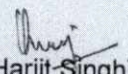
**NOTE:** If the deceased has left no son, widow, daughter, father or mother, brother or sister surviving him, the word "**None**" should be entered opposite to such relative.

Place:

Date:

(Signature and Seal of Head of Office)"

[File No. 33/4/2014-P&PW(F)]

  
(Harjit Singh)  
Deputy Secretary

Note: The Central Civil Service (Extraordinary Pension) Rules, 1939 as amended upto the 7<sup>th</sup> August, 1987 were published by the Ministry of Personnel, Public Grievances and Pensions, Department of Pension and Pensioners Welfare and the said rules were further amended *vide*

1. S.O No.1487(E) dated the 30<sup>th</sup> December, 2003
2. S.O No.410(E) dated the 15<sup>th</sup> February 2011
3. G.S.R No. 96 dated the 20<sup>th</sup> December, 2013.