



सत्यमेव जयते

कार्यालय रक्षा लेखा नियंत्रक (सेना)
Office of CDA (Army)
मेरठ छावनी

Belvedere Complex, Ayudh Path, Meerut Cantt-250001
फोन स. 0121-2646632 फ़ैक्स स. 0121-2646254, 2646216



परिपत्र

पत्र सं प्रशा/III/वेतन/NPS

दिनांक- 08.04.2024

सेवा में,

1. मुख्य कार्यालय के समस्त अनुभाग
2. समस्त अधीनस्थ कार्यालय

विषय : Option to avail benefits in case of death or discharge on invalidation or disability of Government Servent/Subscriber during service : NPS

संदर्भ : इस कार्यालय का पत्र सं प्रशा/III/वेतन/NPS दिनांक 18/03/2024

उपरोक्त संदर्भित विषय के संदर्भ में कृपया मुख्य कार्यालय द्वारा जारी दिनांक 18/03/2024 के परिपत्र का संज्ञान ले। उक्त परिपत्र के माध्यम से उन **NPS subscribers** से **Form-1** तथा **Form-2** को पूर्णतः भरकर दिनांक 21/03/2024 तक e-mail के माध्यम से प्रेषित करने का निर्देश जारी किया गया था जिससे कि ऐसे समस्त कार्मिकों का ब्योरा NSDL पोर्टल पर अपलोड किया जा सके।

यह अत्यंत खेद का विषय है कि मामले को गंभीरता से नहीं लिया गया जिसके कारण NSDL पोर्टल पर Form-1 तथा Form-2 के ब्योरो को अपलोड नहीं किया जा सका। सक्षम अधिकारी द्वारा कार्य में उक्त शिथिलता को गंभीरता से लिया गया है तथा पुनः एक अवसर प्रदान करते हुए दिनांक 15/04/2024 तक Form-1 तथा Form-2 को भरकर cdaanthree.dad@hub.nic.in पर प्रेषित करने की सलाह दी जाती है तथा यह भी सलाह दी जाती है कि समस्त form भरकर डाक के माध्यम से भी भेजना सुनिश्चित करें।

समस्त प्रभारी अधिकारियों को उक्त कार्य को उच्च प्राथमिकता देने की सलाह दी जाती है तथा यह अपेक्षा की जाती है कि समस्त NPS कार्मिकों के Form-1 तथा Form-2 को उपरोक्त दिनांक तक भेजना सुनिश्चित करें।

संलग्नक : Form-1 तथा Form-2 की प्रतिलिपि

प्रतिलिपि: OA Cell – Website पर अपलोड करने हेतु

सहायक नियंत्रक(प्रशा)

वरिष्ठ लेखा अधिकारी

Form 1

OPTION TO AVAIL BENEFITS IN CASE OF DEATH OR DISCHARGE ON INVALIDATION OR DISABILITY OF GOVERNMENT SERVANT / SUBSCRIBER DURING SERVICE

[See rule 10)

* I,, hereby exercise option that in the event of my discharge from service on the account of disability or retirement from service on account of invalidation or Death during service, benefits under CCS(Pension) Rules, 1972 or CCS(Extraordinary Pension) Rules, 1939 as the case may be, may be paid to me or my family.

OR

* I,, hereby exercise option that in the event of my discharge from service on the account of disability or retirement from service on account of invalidation or Death during service, benefits may be paid to me or my family, as the case may be, based on the accumulated pension corpus in the Individual Pension Account under the National Pension System in accordance with the CCS(Implementation of National Pension System) Rules, 2021.

Signature of Government servant / Subscriber

Name-----

Designation-----

Office in which employed-----

Telephone No.-----

Place and date:

This option supersedes any other option made by me earlier.

* Completely strike out the benefits for which option is not intended to be made.

(To be filled in by the Head of Office or authorised Gazetted Officer)

Received the option dated, under CCS(Implementation of National Pension System) Rules, 2021

made by Shri/Smt./Kumari.....

Designation.....

Office.....

Entry of receipt of option has been made in pageVolume.....of
Service Book.

Signature,
Name and Designation of Head of Office or authorized Gazetted Officer with seal
Date of receipt.....

The receiving Officer will fill the above information and return a duly signed copy of the complete Form to the Government servant who should keep it in safe custody so that it may come into the possession of the beneficiaries in the event of his/her death/invalidation.

FORM 2
Details of Family
[See rule 10(3)]

Important

1. The original Form submitted by the Government servant / Subscriber is to be retained. All additions or alterations are to be communicated by the Government servant/retired Government servant / Subscriber alongwith the supporting documents and the changes shall be recorded in this Form under the signature of Head of Office in Col 7. No new Form will substitute the original Form. However, the retiring Subscriber should submit the details of family afresh at the time of retirement.
2. The details of spouse, all children and parents (whether eligible for family pension or not) and disabled siblings (brothers and sisters) may be given.
3. The Head of Office shall indicate the date of receipt of communication regarding **addition or alteration in the family in the 'Remarks' column. The fact regarding disability or change of marital status of a family member should also be indicated in the 'Remarks' column.**
4. Wife and husband shall include judicially separated wife and husband.
5. The retired Government servant shall attach the details of change in family structure after retirement in the proforma prescribed under Dept. of P.& P.W., O.M No. 1 (23)-P.&P. W/91-E, dated the 4th November, 1992.
6. Copies of birth certificates to be attached. Copies of any other relevant certificates, if available, should be attached.

Name of the Government servant / Subscriber		Designation		Nationality	
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Details of family members:

S.N.	Name (Please see notes below before filling)	Date of birth DD/MM/YYYY	Aadhaar no.* (optional)	Relationship with Govt. servant/ retired Government servant / Subscriber	Marital status	Remarks	Dated signature of Head of Office
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	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

I hereby undertake to keep the above particulars up to date by notifying to the Head of Office any addition or alteration.

E-mail:(Optional)

Place:

Mobile:(Optional)

Date

(Signature)

**Providing Aadhaar No. is optional. However, if it is provided, consent to link it to Bank Account and also for authentication of identity from UIDAI for pension related purpose only, is presumed.*