

LIFE CERTIFICATE

Please see attachment for Life certificate to be submitted by pensioners/family pensioners during November 2017. Please inform pensioners to submit Life Certificate at their pension paying branch or any branch.

Regards,

Asst General Manager

PPF & G Department.

Please find the below mentioned Life Certificate.

CERTIFICATES TO BE SUBMITTED BY PENSIONER

STATE BANK OF INDIA

ANNEXURE - A

Branch Name:
SB A/C No.:

Branch Code:
Category: Del/Central/Rail/Telecom/State

I. Life Certificate

Certified that I have seen the Pensioner
..... holder of Pension Payment Order No. and A/c No. and
that he is alive on this date.

Signature of Pensioner

Name:

Place:

Date:

Signature with SS No.:
Date:
Name:
Designation:
Seal:

ADDITIONAL INFORMATION

I submit herewith additional details as under:

1. Income Tax Permanent Account Number (PAN) :
2. Mobile No. :
3. Date of birth of the Pensioner/Spouse:
(Proof of Date of Birth attached)
4. Aadhar No.
5. e-Mail Address:

Signature of the Pensioner
Name of the Pensioner:
Aadhar No. :
Savings Bank Account No.

II. Non Employment Certificate

*I declare that I have not received any remuneration for serving in any capacity in the establishment of the Central Government or a State Government or a Government undertaking or from a Local Fund during the period November to April 20....., May to October 20.....

*I declare that I have been employed/re-employed in the office of
and was in receipt of the following emoluments during the period (to be specified),

*I declare that I have not accepted any employment under any Government outside India or Commercial Employment after obtaining/without obtaining sanctioning of the Director/CSIR (to be furnished by Class I Officer only).

* Strike out whichever is not applicable

Place:
Date:

Signature of Pensioner

III. Certificate of Re-marriage/Non-marriage

I hereby declare that I am not married/I have not been re-married during the past six months and shall inform the Bank as soon as I marry/re-marry.

Place:
Date:

Signature of Pensioner

I certify to the best of my knowledge and belief that the above declaration is correct.

(Signature of the responsible officer
or a well-known person)
Name:
Designation:

Place:
Date: