

Government of India
Ministry of Finance
Department of Expenditure
Central Pension Accounting Office
Trikoot-II, Bhikaji Cama Place
New Delhi - 110 066

CPAO/Tech/Life Certificate/2014-15/670-711

31.10.2014

OFFICE MEMORANDUM

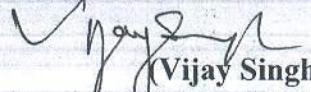
Sub: Submission of Life Certificate in the month of November, 2014

Attention is invited to this Office OM No. CPAO/Tech/Pre-2006/Revision/2011-12/191 dated 23rd October, 2012 circulating therewith a copy of CPAO's advertisement in English released in the leading national and regional dailies on 21st October, 2012 regarding obtaining of life certificate in the revised format by the authorized banks from the Central Civil pensioner/family pensioner in November every year.

It was also advised that the information on the current address and telephone number collected from the Life Certificates is to be updated on the banks master data with the CPPC and the updated master data is required to be sent to CPAO not later than the last week of December every year.

Since the pensioners/family pensioners would start approaching the banks for life certificate from 1st of November, it is reiterated that all Pension Account Holding Branches must be sensitized to ensure the receipt of Life Certificate in the revised format (copy enclosed).

The updated master data must reach CPAO not later than the last week of December, 2014. The modified format of Life Certificate is also available on CPAO's website www.cpaonnic.in at the link "Forms→For Pensioners" appearing on the left pane of Home Page.


(Vijay Singh)
Sr. Accounts Officer (Tech)

To,
Heads of all the CPPCs of
Authorized Banks (As per List)

ANNEXURE-XVII
(See para 15.1 page 11 of
CPAO's Scheme Booklet)

Part-A (Every year)
LIFE CERTIFICATE

(To be submitted by Pensioner once a year in November)

Certified that I have seen the pensioner Shri/Smt./Ms. _____

(Name of Pensioner)

holder of Pension Payment Order No. _____ and that he/she is alive on this date.

1. Present address of the pension/family pensioner.
2. Telephone/Mobile number.

Name

Place: _____ Office

Designation of Authorised Officer

Date:

Seal