

**FORM PEN 18**  
[See rule 9.24(1)]

**Form of letter to the Audit Officer forwarding papers for the grant of family pension and death-cum-retirement gratuity to the family to a Government employee who dies while in service.**

No.....  
Government of Haryana  
Department/Office.....  
Dated, the.....

To

Accountant General, Haryana.  
.....  
.....

**Subject: - Grant of Family pension and death-cum-retirement gratuity.**

Sir,

I am directed to say that Shri/Smt.....  
designation.....died on.....His  
family has become eligible for the grant of family pension and death-cum-retirement  
gratuity. Form PEN 17 duly completed is forwarded herewith for further necessary  
action.

2. Government dues in respect of the deceased Government employee will be recovered out of the death-cum-retirement gratuity as indicated in section II of part I of form PEN 17.
3. Your attention is invited to the list of enclosures, which is forwarded herewith.
4. The receipt of this letter may be acknowledged and this Department/Office informed that necessary instructions for the disbursement of family pension and death-cum-retirement gratuity have been issued to the disbursing authority concerned.

Yours faithfully,

Head of Office/Pension Sanctioning Authority

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List of enclosures: -

1. Form PEN 17 duly completed.
2. Service book (date of death to be indicated in the service book).
3. Two specimen signatures or left hand thumb and finger impression of the claimant or guardian duly attested.
4. Two copies of passport size photographs of the claimant or guardian duly attested.
5. Two copies of descriptive roll of the claimant or guardian duly attested indicating height and personal identification marks.
6. Postal address of the claimant or guardian.

**FORM PEN 17**

[See rules 9.22(1) 9.24(1), (3) and (5) and 9.26(1) and (5)]

**Form for assessing and authorizing the payment of family pension and death-cum-retirement gratuity when a Government employee dies while in service.**

**(To be sent in duplicate if payment is desired in a different circle of accounting unit)**

**PART I**

**Section 1**

- 1. Name of the deceased Government employee.....
- 2. Father's/Husband's Name.....
- 3. Date of birth (by Christian era).....
- 4. Date of death (by Christian era).....
- 5. Religion and Nationality.....
- 6. Office/Department in which last employed.....
- 7. Appointment held last:
  - (1) Substantive.....
  - (2) Officiating.....
- 8. Date of beginning of service.....
- 9. Date of ending of service.....
- 10. (i) Total period of military service for which pension/gratuity was sanctioned:.....
- (ii) Amount and nature of any pension/gratuity received for Military service.....
- 11. Amount and nature of any pension received for previous Civil service, if any.....
- 12. Government under which service has been rendered in order of employment.....
- 13. The date on which intimation regarding the death of a Government employee was received by the Head of Office.....
- 14. The date on which action initiated to: -
  - (i) Obtain claim or claims from the claimants in the appropriate form death-cum-retirement gratuity and family pension as provided in rule 9.21. ....
  - (ii) Obtain the 'No demand certificate' from the Accounts officer (Rent)/Rent Assessing Authority as provided in rule 9.27 (1). ....
  - (iii) Assess the Government dues other than the dues pertaining to occupation of Government accommodation as provided in rule 9.24(2). ....
  - (iv) Assess the service and emoluments qualifying for death-cum-retirement gratuity and family pension as provided in rules 9.22 and 9.23. ....
- 15. Whether nomination made for death-cum-retirement gratuity.....
- 16. Length of service qualifying for death-cum-retirement gratuity/pension.....
- 17. Period of non-qualifying service.....
  - (i) Interruption service condoned under rule 3.17 A.....
  - (ii) Extraordinary leave not qualifying for gratuity.....
  - (iii) Period of suspension treated as non-qualifying from.....to.....
  - (iv) Any other service not treated as qualifying service.....
- Total period of non-qualifying service**.....
- 18. (a) Emoluments reckoning for death-cum-retirement gratuity.....
- (b) Amount of death-cum-retirement gratuity.....

**FORM PEN 17 (Contd....)**

- 19. If family pension 1964 applies.
  - (i) Proposed family pension at: -

- (a) Enhanced rates (if service rendered at the time of death is more than seven years).....  
(as in para 2 of Appendix I to these rules)
- (b) Ordinary rates as (in para I of Appendix I to these rules)
- (ii) Period of tenability of family pension 1964. From..... To.....
  - (a) Enhanced rates.....
  - (b) Ordinary rates.....
- 20. Person to whom family pension is payable.
  - Name:.....
  - Relationship with the deceased Government employee .....
  - Full Postal Address: .....
- 21. Details of Government dues recoverable out of gratuity: -
  - (i) License fee for occupation of Government accommodation (See rule 9.27).....
  - (ii) Amount of death-cum-retirement gratuity to be held over pending receipt of information from the Accounts Officer (Rent) Rent Assessing Authority. (See rule 9.27 (1) (v)).....
  - (iii) Dues referred to in rule 9.27(2).....
- 22. Date on which claim received from the claimants.....
- 23. Name of guardian who will receive payment of death-cum-retirement gratuity family pension in the case of minors.....
- 24. Place of payment (Treasury, Sub-Treasury or branch of Public Sector Bank).....
- 25. Head of Account to which death-cum-retirement gratuity and family pension are debitable.

Place:

Dated, the

Signature of Head of Office

**SECTION II**

Details of provisional family pension and gratuity to be sanctioned by Pension sanction Authority in accordance with rule. 9.25

Provisional family pension ... Rs. ....

Gratuity (the amount mentioned in item 18 (b) of Part (1) ... Rs. ....

Less

(a) Licence fee recoverable from gratuity for occupation of Government accommodation (as in item 21 (i) of Part (1) ... Rs. ....

(b) Amount of Gratuity to be held over pending receipt of information from the Accounts Officer (Rent)/Rent Assessing Authority (as in item 21 (ii) of Part (1) ... Rs. ....

(c) Other Government dues as mentioned in item 21 (iii) of Part I. ... Rs. ....

(d) Total of (a), (b) & (c), ... Rs. ....

(d) Total of (a), (b) & (c), ... Rs. ....

Place:

Dated, the

Signature of Head of Office

**ANNEXURE-1**

<b>Form of letter to the widow/widower of a deceased Govt. employee for a grant of a Family Pension, 1964</b>
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No.....  
Government of Haryana  
Department/Office.....  
Dated, the.....

To

.....  
.....  
.....

Subject: - Payment of Family Pension Scheme, 1964 in respect of Late  
Shri/Smt.....

Sir/Madam,

1. I am directed to say that in terms of Appendix I of Punjab Civil Services Rules, Volume II, a family pension is payable to you as widow/widower of the late  
Shri/Smt.....  
(Designation.....in the Office/Department  
of.....)

2. You are advised that a claim for the grant of family pension may be submitted in the enclosed Annexure II.

3. The family pension will be payable till your death or re-marriage, whichever event occurs earlier. In the event of your death or re-marriage, the family pension shall be granted to the child or children, if any, through the guardian.

Yours faithfully,

(Head of Office)

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Attestation should be done by two Gazetted Government employees or two or more persons of respectability in the town, village or pargana in which the applicant resides.

## ANNEXURE-II

<b>Form of application for the grant of family pension on the death of a Govt. Employee/Pensioner.</b>
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1. Name of the applicant
  - (i) Widow/widower.....
  - (ii) Guardian, if the deceased person is survived by child or children.....
2. Name and age of surviving widow/widower and children of the deceased Government employee/pensioner.

Serial No.	Name	Relationship with the deceased person	Date of birth (to be attested by the Head of Office)
1			
2			
3			
4			

3. Date of death of the Government employee/pensioner.....
4. Office/Department in which the deceased Government employee/pensioner served last.....
5. If the applicant is guardian, his date of birth.....  
Relationship with the Govt. employee/Pensioner .....
- 5A If the applicant is widow/widower the amount of service pension which she/he may be in receipt on the date of death of the husband/wife.....
6. Full address of the applicant.....  
.....
7. Place of payment of pension and gratuity.....  
(Treasury, Sub-Treasury, Public Sector Bank Branch).
8. Enclosures: -
  - (i) Two specimen signatures of the applicant duly attested (in case of literate claimants) (To be furnished in two separate sheets).
  - (ii) Two copies of passport size photograph of the applicant, duly attested.
  - (iii) Two slips each bearing left hand thumb and finger impressions of the applicant, duly attested (in case of illiterate claimants).
  - (iv) Descriptive Roll of the applicant, duly attested, indicating (a) height and (b) personal marks, if any, on the hand, face, etc. (To be furnished in duplicate).
  - (v) Certificate(s) of age (in original with two attested copies) showing the dates of birth of the children. The certificate should be from the Municipal Authorities or from the Local Panchayat or from the head of a recognized school if the child is studying in such school. (This information should be furnished in respect of such child or children the particulars of whose dates of birth are not available with the Audit Officer/Head of Office).
  - (vi) Death Certificate.
9. Signature or left-hand thumb impression of the applicant.....

10. Attested by:		
Name	Full Address	Signature
(i).....	.....	.....
(ii).....	.....	.....
11. Witnesses:		
(i).....	.....	.....
(ii).....	.....	.....

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Note: - Attestation should be done by two gazetted Government employees or two or more persons of respectability in the town, village or pargana in which the applicant resides. To be furnished in case the applicant is not literate enough to sign his name.

In the case of re-marriage of the widow while applying for family pension on behalf of the minor child, the widow should furnish (i) the date of her re-marriage, (ii) name of the Treasury/Sub-Treasury at which payment is desired and (iii) her full address in the application for family pension. It is not necessary to furnish a fresh application nor the document as they are already available with the pension papers on which family pension was originally admitted to her.

Signature & Designation of Sanctioning Authority

**ANNEXURE-III**

<b>FORM FOR SANCTIONING FAMILY PENSION</b>
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1. Name of the Government employee.....
2. Father's Name .....  
(and also husband's name in the case of a woman Government servant)
3. Religion and Nationality.....
4. Last appointment held including name of establishment.....
5. Date of beginning of Service.....
6. Date of ending of service.....
7. Substantive appointment held.....
8. Pension Rules opted/eligible.....
9. Length of continuous qualifying service prior to death.....
10. Pay as per paragraph 2 of the Punjab Govt. Finance Department's letter No. 7856 (7) FRI/64/9691, dated 16<sup>th</sup> October, 1964 (Annexure I to Punjab CSR Vol.II 1969 Edition as applicable to Haryana State).....
11. Amount of Family Pension admissible.....
12. Date from which pension is to commence.....
13. Place of payment (Government Treasury sub-treasury or Branch of Public Sector Bank).....

The undersigned having satisfied himself of the above particulars of late Shri/Smt.....  
Hereby orders the grant of a family pension of Rs.....P.M.  
to Shri/Smt.....  
which may be accepted by the Accountant General, Haryana as admissible under the rules.

Signature and Designation  
of the Sanctioning Authority

**FORM PEN-19**  
**[See rule 9.21 (1)]**

**Form of letter to the member or members of the family of a deceased Govt. employee where valid nomination for the grant of the death-cum-retirement gratuity exists.**

No.....  
Government of Haryana  
Department/Office.....  
Dated, the.....

To

.....  
.....  
.....

Subject: - Payment of death-cum-retirement gratuity in respect of the late Shri/Smt.....

Sir/Madam,

I am directed to state that in terms of the nomination made by the late Shri/Smt.....  
.....(Designation) in the office/Deptt. of  
..... a death-cum-retirement gratuity is payable to his/her nominee(s). A copy of the said nomination is enclosed herewith.

2. I am to request that a claim for the grant of the gratuity may be submitted by you in the enclosed FORM PEN 1B.
3. Should any contingency have happened since the date of making the nomination, so as to render the nomination invalid, in whole or in part, precise details of the contingency may kindly be stated.

Yours faithfully,

Head of Office



**FORM PEN-20**

**Form of letter to the member or members of the family of a deceased Govt. employee where valid nomination for the grant of the death-cum-retirement gratuity does not exists.**

No.....  
Government of Haryana  
Department/Office.....  
Dated, the.....

To

.....  
.....  
.....

Subject: - Payment of death-cum-retirement gratuity in respect of the late  
Shri/Smt.....

Sir/Madam,

I am directed to say that in terms of rule 6.16-A of Punjab CSR Vol.II, a death-cum-retirement gratuity is payable to the following members of the family of late Sh./Smt.....(Designation), in the Office/Department of ..... In equal share: -

- (i) Wife/Husband including judicially separated wife/husband.
- (ii) Sons including step children and adopted children.
- (iii) Unmarried daughters -do-

2. In the event of there being no surviving member of the family as indicated above, the gratuity will be payable to the following members of the family in equal share: -

- (i) Widowed daughters
- (ii) Father
- (iii) Mother  
(Including adoptive parents in case of individuals whose personal laws permit adoption)
- (iv) Brother below the age of eighteen years and unmarried and widowed sisters (including step brothers and step sisters).
- (v) Married daughter, and
- (vi) Children of pre-deceased son.

3. It is requested that a claim for the payment of gratuity may be submitted in the enclosed Form PEN 1B as soon as possible.

Yours faithfully,

Head of Office

**FORM PEN 1B**

[See rule 9.21 (1)]

**Form of applicant for the Grant of death-cum-retirement gratuity on the death of a Government Employee.**

*(To be filled in separately by each claimant and in the case claimant is minor, the Form should be filled in by the guardian on his/her behalf. Where there are more than one minor, the guardian should claim gratuity in one Form on their behalf).*

1. (i) Name of the claimant in case he is not minor.....  
(ii) Date of birth of the claimant.....
2. (i) Name of the guardian in case the claimants are minors.....  
(ii) Date of birth of the guardian.....
3. (i) Name of the deceased Government employee in respect of whom gratuity is being claimed.....  
(ii) Date of death of Government employee.....  
(iii) Office/Department in which the deceased served last.....
4. Relationship of the claimant/guardian with the deceased Government employee.....
5. Full postal address of the claimant/guardian.....
6. (i) Where gratuity is claimed by the guardian on behalf of minors the names of the minors, their ages, relationship with the deceased Government employee, etc.: -

Serial No.	Name	Age	Relationship with the deceased Govt. employee	Postal Address
1				
2				
3				
4				

(ii) Relationship of the guardian with minor.....

7. Place of payment of pension and gratuity.....  
(Treasury/Sub-Treasury/Public Sector Bank Branch)

Signature/Thumb impression of the  
Claimant/guardian

8. Two specimen signatures or left hand thumb\* and finger impressions of the claimant/guardian duly attested.....

9. Attested by: -

Name	Full Address	Signature
(i).....	.....	.....
(ii).....	.....	.....

10. Witnesses:

(i).....	.....	.....
(ii).....	.....	.....

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\*To be furnished in case the applicant is not literate enough to sign his name.

**ANNEXURE-I**

**Form for Sanction of Gratuity in case of Death**

**A Remarks by the receiving authority**

1. As to character and past conduct of applicant.....
2. Explanation of any suspension or Degradation.....
3. Regarding any gratuity or pension already received by the applicant (See Chapter VII).....
4. Any other remarks.....
5. Opinion of receiving authority whether the service claimed is established and should be admitted or not (See rule 9.7 and 9.12 (a) (ii)).....

Signature.....  
Authority.....

**B Order of the sanctioning authority**

(a) The undersigned having satisfied himself that the service of Late Shri/Smt./Kumari..... is thoroughly satisfactory hereby orders the grant of DCRG/residual gratuity which may be accepted by the Accountant General as admissible under the rules to the persons mentioned in clause (c) below.

**OR**

(b) The undersigned having satisfied himself that the service of late Shri/Smt./Kumari..... has not been thoroughly satisfactory hereby orders that the DCRG which may be accepted by the Accountant Gen. admissible under the rules to the persons mentioned in clauses (c) below, shall be reduced by the specified amount of percentage indicated below. A sum of Rs..... on account..... is to be held over from the DCRG till the outstanding dues are assessed and adjusted.

(c)

Name of person	Address	Relationship with the deceased officer	Amount of share of DCRG
1	2	3	4

This order is subject to the condition that should the amount of gratuity as authorized by the Accountant General if afterwards found to be in excess of amount to which the person

concerned is entitled under the rules he/she will be called upon to refund such excess. A declaration from the person accepting this condition has been obtained and enclosed/declaration from the person accepting to condition will be obtained and submitted separately.

2. The DCRG/residual gratuity payable at.....treasury and is chargeable.

Dated

Signature & Designation of  
Sanctioning Authority

**Report regarding verification of Qualifying Service**

Certified that Sh./Smt./Kum.....  
Designation..... has completed a qualifying service  
of.....years.....months.....days as  
on.....(date). The service has been verified on the basis of his service  
documents and in accordance with the rules regarding qualifying service in force at  
present. The verification of service shall be treated as final and shall not be reopened  
except when necessitated by a subsequent change in the rules and order governing the  
conditions under which the service qualifies for pension.

DETAILS OF QUALIFYING SERVICE

S.No.	Period		Page No. of Service Book	No. or part of page of Service Book
	From	To		

(Signature of Head of Office)

**Table: Details of Qualifying Service**

Name.....Designation.....

Name of Govt. under with employed (in order of employment)	Name of Establishment	From	To	Total Period	Less Non-Qualifying Service (see table-II)	Qualifying service
1	2	3	4	5	6	7





**Calculation Sheet for Family Pension/Death-Cum-Retirement Gratuity & History Sheet of Service**

1. Name : .....
2. Post held at the time of death : .....
3. Date of Birth : .....
4. Date of Death : .....
5. Date of joining Govt. Service : .....
6. Total Period of Service .....Years .....Months .....Days
7. Less period of E.O.L. etc. not .....Years .....Months .....Days  
qualifying service
8. Net qualifying service .....Years .....Months .....Days
9. Pay drawn at the time of death Rs. ....
10. Amount of Family pension Rs. ....  
(30% of pay last drawn)  
subject to minimum of Rs. 1275/-
11. Amount of pension to be drawn for first seven Rs. ....  
years or till the deceased would have  
completed 65 years of age (which ever is earlier)
12. Calculation of gratuity (D.C.R.G) at the following rates :-
  - (i) For less than one year service : 2 months emoluments
  - (ii) One year service but less then Five years service : 6 months emoluments
  - (iii) With Five years or more service :  $\frac{1}{4}$  of the emoluments for  
each half year subject to minimum of twelve years emoluments and maximum of  $16\frac{1}{2}$   
times in case of Class I, II and III employees and  $17\frac{1}{2}$  times in case of class IV employee.

Emoluments means Pay as defined in rule 2.44(a)(1) of C.S.R. Vol. I Part I. Plus Dearness allowance admissible on such pay on the date of death.

Pay Rs. \_\_\_\_\_

D.A. Rs. \_\_\_\_\_

Total Rs. \_\_\_\_\_ X \_\_\_\_\_ = Rs. \_\_\_\_\_

\_\_\_\_\_

Head of Office

**Descriptive Roll/Signature or Left hand thumb impression**

Claimant .....

Name of deceased .....

Relationship with deceased

{widow/widower/ guardian of minor child (ren)}

- (i) Date of Birth
- (ii) Height
- (iii) Personal marks of identification  
(on hand or face)
- (iv) Specimen Signature /Left-hand thumb impression :
  - 1. ....
  - 2. ....

Attested by :

Name	Full Address	Signature
(i).....	.....	.....
(ii).....	.....	.....

Note :- The descriptive roll and signature of left hand thumb impression accompanying the application for family pension should be in duplicate in two separate sheets and attested by two gazetted officers or persons of respectability in town, village or pargana in which the applicant resides.

**Descriptive Roll/ Signature or Left hand thumb impression**

Claimant .....

Name of deceased .....

Relationship with deceased

{widow/widower/ guardian of minor child (ren)}

- (i) Date of Birth
- (ii) Height
- (iii) Personal marks of identification  
(on hand or face)
- (iv) Specimen Signature /Left-hand thumb impression:
  - 1. ....
  - 2. ....

Attested by :

Name	Full Address	Signature
(i).....	.....	.....
(ii).....	.....	.....

Note: - The descriptive roll and signature of left hand thumb impression accompanying the application for family pension should be in duplicate in two separate sheets and attested by two gazetted officers or persons of respectability in town, village or pargana in which the applicant resides.

**DETAILS OF MEMBERS OF FAMILY**

**Of Late Shri/Smt.....Designation**

<b>S.No.</b>	<b>Name and Postal Address</b>	<b>Relation</b>	<b>Date of Birth</b>

**No Demand Certificate (N.D.C)**

Certified that there are no long term advances and other advances outstanding/pending against

Late Shri/ Smt.....  
Designation .....  
Date of Death .....  
Date of Birth .....

(Signature of Head Office)

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**NO JUDICIAL / DEPARTMENTAL PROCEEDINGS CERTIFICATE**

Certified that no Judicial / Departmental proceedings have been instituted/ are pending against

Late Shri/ Smt.....  
Designation .....  
Date of Death .....  
Date of Birth .....

(Signature of Head Office)

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**PRESENT POSTAL ADDRESS OF THE CLAIMANT**

Name of the Deceased .....Designation

.....

Claimant .....

Relationship with the Deceased. ....

[Widow/widower/ guardian of the minor child (ren)]

Address.....

.....

.....Pin.....

**LAST PAY CERTIFICATE (L.P.C)**

Office of the .....

NO.....

Office case..... (Provincial)

LAST PAY CERTIFICATE OF .....

of the .....proceeding

on to .....

2. He has been paid upto .....

at the following rate :-

Particulars	Rate
	Rs.    P.
Substantive Pay	

Officiating Pay

Exchange Compensation Allowance

.....  
 .....  
 .....

**DEDUCTIONS**

.....  
 .....  
 .....  
 .....  
 .....  
 .....  
 .....

He had made over charge of the office of .....

On the ..... Noon of the .....19.....

Recoveries are to be made from the pay of the Government servant as detailed on the reverse. He has been paid leave salary as detailed below. Deductions have been made as noted on the reverse:

Period			Rate	Amount
From	to	at	Rs.	a month
From	to	at	Rs.	a month
From	to	at	Rs.	a month

He is entitled to draw the following scale of pay .....

.....increment accrues on .....every year.

He is also entitled to joining time for .....days.

The details of the income tax recovered from him up to the date from the beginning of the current years are noted on the reverse.

Dated.....

Head of Office/Deptt.



Last Pay Certificate (Contd...)

**DETAILS OF RECOVERIES**

Name of recovery.....  
 Amount : Rupees.....  
 To be recovered in .....Installments  
 .....  
 .....

**SALARY DEDUCATIONS MADE FROM LEAVE SALARY**

From.....to.....on account of.....Rs.....  
 From.....to.....on account of.....Rs.....  
 From.....to.....on account of.....Rs.....

Head of Office/Deptt.  
 Signature with Stamp

Name of months	Pay	Gratuity Fee	Funds and Other Deductions	Amount of Income-tax recovered	Remarks
April					
May					
June					
July					
August					
September					
October					
November					
December					
January					
February					
March					

He took over/assumed charge of the Office of .....  
on the .....noon of.....

(Signature)  
(Designation)

