



TEA BOARD
14, B.T.M.SARANI
Kolkata-700001

Phone No.033 2235 1411(7 lines)

Fax: 033 2221 5715

LIFE CERTIFICATE
(TO BE SUBMITTED BY THE PENSIONER)

Certified that I have seen the pensioner Shri/Smt..... holder of PPO
NO..... drawing pension from is alive on this date.

.....
(Signature of the Pensioner)

Signature of the Officer:.....

Name :.....

Bank Account No.....

Designation with Seal:

Date:.....

Place:.....

NON EMPLOYMENT / RE-EMPLOYMENT DECLARATION

(A) I declare that have not received any remuneration for serving in any capacity either in a Govt. Department/Office , Company, Corporation, Autonomous Body or Society of Central or State Govt. or Union Territory or in a Nationalized Bank including RBI and the SBI or a Local Fund during the period ended November, 20.....

OR

(B) I declare that I have been employed/Re-employed in the office of
.....which is a part of /financed by.....and
was in receipt of the following emoluments during the year ended November 20.....or during the
month of within the said year:

- (a) Pay...
Special Pay
Allowances
(including DA, ADA etc.)

OR

- (b) Honorarium

(C) I declare that I have not accepted any commercial employment in India

OR

I declare that I have accepted commercial employment in India, after obtaining previous sanction of the govt. and none of the condition, if any, attached thereto by Govt. has been violated.

Signature of the pensioner

Note: Life Certificate shall be obtained from a Govt. Gazetted Officer, Bank Manager, Tehsildar OR
Head of the Local Administration .

(2)

DECLARATION OF NON-MARRIAGE/ RE-MARRIAGE

(Applicable for unmarried /widow family pensioner)

I hereby declare that I am not married/ I have not married during the period from November 20..... to October..20.....

OR

I hereby declare that I have not been re-married and I undertake to report such an event promptly to the concerned Deptt/Bank

Signature of the Pensioner
PPO No.

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

Place:
Date :

Signature of a Responsible Officer or a well known person of the locality.

Name

Designation.....

UNDERTAKING FOR REFUND OF EXCESS PAYMENT

I undertake to refund any amount to which I am entitled or any excess amount which may be paid to me or credit to my account over that to which I am or would be entitled.

(Signature of the pensioner)

Full Address with PIN, Phone No., PAN and Aadhar No.

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