



Saptagiri Grameena Bank
(Public Sector RRB : Sponsored by Indian Bank)

సప్తగిరి గ్రామీణ బ్యాంక్
ప్రభుత్వరంగ సంస్థ : ఇండియన్ బ్యాంక్ చే ప్రాయోజితం

सप्तगिरि ग्रामीण बैंक
(सार्वजनिक क्षेत्र आरआरबी : इंडियन बैंक द्वारा प्रायोजित)

Cir No. 130/2024-25

HO-HRM Department

Date: 28-10-2024

SAPTAGIRI GRAMEENA BANK (EMPLOYEES') PENSION REGULATION, 2018 & PENSION (AMENDMENT) REGULATIONS, 2024

In terms of Letter No.8/4/2024-RRB dt 03.10.2024 of Department of Financial Services, Ministry of Finance, Government of India, Board of Directors of our Bank **vide circular agneda** dated **05.10.2024** approved **Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024**. The regulation has been **published** in Gazette of India, Extraordinary, Part III, Section 4 on **22.10.2024** both in Hindi and English. The extracts of the English version of the **Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024** is enclosed herewith for reference of all concerned. The guidelines are as detailed hereunder:

- Payment of arrears to the existing pensioner/ family pensioners upto 31.03.2018, who retired/died between 01.11.1993 & 31.03.2018
- Giving coverage along with consequential arrears to all eligible left out cases, i.e., resignation, voluntary retirement, compulsory retirement as a measure of penalty, medical incapacitation.
- Compassionate allowance in case of dismissal/ removal/termination from service, etc, from the proposed revised pension scheme, effective from 01.11.1993 (on a case-by-case basis, subject to approval of the competitive authority)
- Payment of 20% of overall pension arrears to eligible pensioners /family pensioners, on provisional basis.

Branches/Offices are advised to be guided by under mentioned operational instructions.

OPERATIONAL INSTRUCTIONS

1. As per regulation 3 of Saptagiri Grameena Bank (Employees') Pension Regulation, 2018 and Pension Regulation Amendment 2024, the eligible existing staff members, the retired staff members and the family of deceased staff members are required to exercise their option in writing in the prescribed format enclosed herewith (Formats 1 to 14) within **15 days from the date of this circular** to become a member of the Saptagiri Grameena Bank (Employees') Pension Fund.

2. Retired staff members who are not currently drawing pay/pension, have been dismissed/deceased/ have taken compulsory retirement/resigned or their legal heirs to apply for pension with necessary documents

Head office : D.No - 19-565/11, 3rd Floor, Sai Yashus, Vellore Road, Chittoor - 517002
Phones : 08572- 233598, 229822

Email : headoffice@sgbank.in, Website : www.saptagirigrameenabank.in





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(ప్రభుత్వ రంగ సంస్థ : ఇండియన్ బ్యాంక్ ద్వారా ప్రాయోజితం)

सप्तगिरि ग्रामीण बैंक

(सार्वजनिक क्षेत्र आरआरबी : इंडियन बैंक द्वारा प्रायोजित)

3. Branches/ Offices are advised to contact immediately all the Retired staff members /family of the deceased staff members who were last attached their Branch/Office and advise them to submit option letter in following annexure in quadruplicate (ie. 4 copies) at their Branch/Office within the stipulated time period of **15 days from the date of this circular** to become a member of the Saptagiri Grameena Bank (Employees') Pension Fund.

Retired Staff Members who are not currently drawing pension	Option to be exercised in Format-2
Family of the deceased staff members	Option to be exercised in Format-3

4. The retired employees are also required to submit a certificate in Format 7 as to acceptance/non-acceptance of commercial employment. Branches/Offices are advised to obtain Format 7 in duplicate along with the option letter as said above from all retired employees.

5. Family members of deceased staff are also required to submit a certificate in Format-8 in duplicate along with Format-3 (Certificate of non-remarriage/non-marriage)

6. All the existing staff and retired staff who are eligible and exercise their option in writing to become a member of Saptagiri Grameena Bank (Employees') Pension Fund are also advised to submit 'Form of Nomination' in Format-11.

7. Branches / Offices are advised to contact all retired staff members and the family of deceased Staff members either in person or over telephone and convey them the provisions of the pension regulation adopted by the Bank. They should put a notice in their Notice Board for information of all concerned. Branches may also resort to any other mode of communication as their convenience to bring to the notice of all retired staff members and the family of deceased staff member about this pension regulation.

8. Branches/Offices should ensure filling up of all columns of annexures and may assist the applicants wherever necessary in filling up the same neatly without any cutting/over writing to avoid any future inconvenience to the pensioners.

9. Signature of the applicants on the option letter should be attested by concerned Branch Manager/Regional Manager/Department Heads at HO with office seal, as the case may be.

10. All annexures along with the relevant documents/papers received at Branch level should be sent to respective Regional Office in bunch through special messenger to avoid any loss in transit.

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(ప్రభుత్వ రంగ సంస్థ : ఇండియన్ బ్యాంక్ ప్రయోజనం)

सप्तगिरि ग्रामीण बैंक

(सार्वजनिक क्षेत्र आरआरबी : इंडियन बैंक द्वारा प्रायोजित)

11. Branches/Offices are also required to submit the salary particulars of retired / deceased staff members of their Branch/Office for last ten months of their service in Bank in Format- 4 after verification of available records with them. Loss of Pay, if any, during the service period should also be mentioned in Format 4.

12. Branches/Offices are also advised to verify their records and incorporate in Format - 5 the particulars of outstanding liabilities, if any, in the name of any of the retired staff members/ deceased staff members at their branch/office. In case there is no outstanding liabilities in their name a NIL report in Format-5 should be submitted.

13. Regional Office are advised to follow up with the Branches under their control and guide them on importance of timely submission of different formats below preferably in A4 size paper. The annexures should be legible and filled in all respect.

14. All annexures received at Regional Office should be promptly submitted to HR Department, Head Office for early disposal of pension matter.

Please bring the contents of the circular to the notice of all staff members working in the Branches/Offices and all the retired staff and family members of the retired staff.


CHAIRMAN





Head office : D.No - 19-565/11, 3rd Floor, Sai Yashus, Vellore Road, Chittoor - 517002

Phones : 08572- 233598, 229822

Email : headoffice@sgbank.in, Website :www.saptagirigrameenabank.in

नोट : सप्तगिरि ग्रामीण बैंक (कर्मचारी) पेंशन (संशोधन) विनियम, 2024 भारत के राजपत्र, असाधारण, भाग-III, खंड 4, उप-खंड (1) में संख्या HO/HRM/DoP-Gol/86/2024-25 दिनांक 09 अक्टूबर, 2024 द्वारा प्रकाशित किए गए और बाद में अधिसूचना संख्या HO/HRM/DoP-Gol/86/2024-25 दिनांक 09 अक्टूबर, 2024 द्वारा संशोधित किए गए।

SAPTAGIRI GRAMEENA BANK

NOTIFICATION

Chittoor, the 9th October, 2024

No. HO/HRM/DoP-Gol/86/2024-25.—In exercise of the powers conferred by Section 30 read with sub-section (1) of section 17 of the Regional Rural Banks Act, 1976 (21 of 1976) the Board of Directors of Saptagiri Grameena Bank, after consultation with Indian Bank being the Sponsor Bank, and the National Bank for Agriculture and Rural Development and with the previous sanction of the Central Government, hereby makes the following regulations to amend the Saptagiri Grameena Bank (Employees') Pension Regulations, 2018, namely:

1. (1) These Regulations May Be Called Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024.

(2) They shall come into force on the date of their publication in the Official Gazette.

2. In the Saptagiri Grameena Bank (Employees') Pension Regulations, 2018 (hereinafter referred to as the said regulations), in regulation 2, in sub-regulation (1), in clause (k), for the figures, letters and words "1st day of April, 2018", the figures, letters and words "1st day of November, 1993" shall be substituted.

3. In regulation 3 of the said regulations, the following regulation shall be substituted, namely:-

"3. Application. – (1) Any employee who –

(a) was in the service of the Bank between the 1st September, 1987 and the 31st March, 2010 and retired or dismissed or removed or terminated from service before the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 and refunded or becomes a member of the Fund and refund within fifteen days from the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette, the entire final amounts received by him (the corpus comprising of Bank's contribution to provident fund under the Employees' Pension Scheme, 1995 and interest accrued thereon till the date of receipt by him of the amount) and the periodic pension, if any, received by him under the Employees' Pension Scheme, 1995 attributable to any period before date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette but without, in either case, requiring to pay interest on such amounts from the date of receipt of such amounts to the date of refund:

Provided that an employee who is required to refund the amounts as per this clause may authorise the Bank to adjust these amounts from the amounts payable by the Bank to the employee:

Provided further that an employee who was eligible to opt for pension under the said regulations but did not opt within the stipulated time or having opted not refunded the money within the stipulated time, the periodic pension, if any, received by him under the Employees' Pension Scheme, 1995, need not be refunded.

(b) was in the service of the Bank between the 1st September, 1987 and the 31st March, 2010 and continue to be in the service of the Bank on or after the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette, and a member or becomes member of the Fund and caused or cause to transfer the entire contribution of the Bank along with the interest accrued thereon, within fifteen days from the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette, to the credit of the Fund constituted in regulation 4 and refund the portion of pension, if any, received by him under Employees' Pension Scheme 1995, and attributable to any period before date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette.

(c) was in the service of the Bank between the 1st September, 1987 and the 31st March, 2010 and exercised an option under clause (b) of sub-section (3) of section 23A of the Act or resigned before the notification of the said Regulations, in either case, after having completed twenty years of qualifying service and by giving proper notice, shall become member of the Fund and refund within fifteen days from the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette, the entire final amounts received by him (the corpus comprising of Bank's contribution to provident fund under the Employees' Pension Scheme, 1995 and interest accrued thereon till the date of receipt by him of the amount) and periodic pension, if any, received by him under the Employees' Pension Scheme, 1995 attributable to any period before date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette but without, in either case, requiring to pay interest on such amounts from the date of receipt of such amounts to the date of refund:

Provided that an employee, who is required to refund the amounts, under this clause may authorise the Bank to adjust these amounts from the amounts payable by the Bank to the employee.

(2) The family of the employee covered under clauses (a) and (c) of sub-regulation (1), shall be entitled to family pension under these regulations when the family of such deceased employee refunded or refunds within thirty days from the date of notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette, the entire final amounts received by the deceased employee or as the case may be the family, the corpus comprising of Bank's contribution to provident fund under the Employees' Pension Scheme, 1995, and interest accrued thereon till the date of receipt of the amount by the deceased employee or, as the case may be, the family of a deceased employee and pension or family pension, if any, received by the employee or the family of the deceased employee under the Employees' Pension Scheme, 1995, but in either case without requiring to pay interest from the date of receipt to the date of refund.

Provided that a family of the deceased employee, who is required to refund the amounts under this clause may authorise the Bank to adjust these amounts from the amounts payable by the Bank to the employee.

(3) Notwithstanding anything contained in this regulation, any employee who joined the service of the Bank on or after the 1st April, 2010 shall be covered by the National Pension System".

4. In regulation 20 of the said regulations, after sub-regulation (1), the following proviso shall be inserted, namely:-

"Provided that there would no forfeiture of service for employees covered under clause (c) of sub-regulation (1) of regulation 3".

5. In regulation 32 of the said regulations, the following regulation shall be substituted namely:-

"Payment of pension or family pension in respect of certain employees.- (1) Employees who have retired from the service of the Bank between the 1st September, 1987 and the 31st October, 1993 shall be eligible for pension from the effective date.

(2) The family of a deceased employee, who was in service between the 1st September, 1987 and the 31st October, 1993 and died before the 31st October, 1993 shall be eligible for payment of family pension from the effective date".

6. In regulation 50 of the said regulations, the following regulation shall be substituted, namely:-

"Date from which pension becomes payable.- (1) Except in the case of an employee to whom the provisions of sub-regulation (1) of regulations 32, or 41, or 44 apply a pension other than the family pension shall become payable from the date following the date on which an employee retires or, as the case may be, resigns or opts not to join the transferee bank under clause (b) of sub-section (3) of section 23A of the Act on refund or refunding or authorising adjustment of the entire amounts specified under sub-regulation (1) of regulation 3 within the time stipulated under Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024.

(2) Except in the case of an employee to whom the provisions of sub-regulation (1) of regulations 32, or 41, or 44 apply, family pension shall become payable from the date following the date of death of the employee, on refunding or authorising adjustment of the entire amounts specified under sub-regulation (2) of regulation 3 within the time stipulated under Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024.

(3) Notwithstanding anything contained in these regulations, in case of an employee, or as the case may be, family of the deceased employee who was eligible to opt for pension, or as the case may be, family pension under the said regulations but did not opt or opted but did not refund the money, but refunds or authorise adjustment of money under clause (a) of sub-regulation (1) of regulation (3), or as the case may be, under sub-regulation (2) of regulation 3 on or after notification of Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 shall be entitled for pension, family pension, or as the case may be, from date of refund or adjustment under clause (c) of sub-regulation (1) of regulation 3, or as the case may be, sub-regulation (2) of regulation 3, or the date of retirement or resignation, or death, as the case may be, whichever is later."

A. S. N. PRASAD, Chairman

[ADVT.-III/4/Exty./622/2024-25]

Note : The Saptagiri Grameena Bank (Employees') Pension (Amendment) Regulations, 2024 were published in the Gazette of India, Extraordinary, Part-III, section 4, sub-section (i) vide number **HO/HRM/DoP-GoI/86/2024-25** dated the 09th October, 2024 and subsequently amended vide notification no. **HO/HRM/DoP-GoI/86/2024-25** dated the 09th October, 2024.

**MODEL FORMAT RELATED TO RRB (EMPLOYEES') PENSION SCHEME, 2018
OF
SAPTAGIRI GRAMEENA BANK**

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FORMAT - 1
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR, Dist. CHITTOOR

Option Form to be filled in by the employees who are in service of the Bank
(To be submitted in quadruplicate through their present Branch / Office)

Date of receipt of application at Branch / Office		FOR HO USE ONLY
Forwarded on		OPTION NOTED IN SERVICE RECORD
Forwarded by		
Signature with office seal (Branch/Office)		
		(Signature of the concerned Authority at HO with date)

The Chairman
Saptagiri Grameena Bank
Head Office

Date: _____

I hereby declare that I have read and understood the Saptagiri Grameena Bank Bank (Employees') Pension Regulations, 2018 and I hereby opt to become a member of the Bank's Pension Scheme and irrevocably authorise the Bank / EPF Trustees / EPFO / RPFC to transfer the entire contribution of the Bank along with the interest thereon to the credit of Pension Fund to be created for this purpose. I understand that I am required to contribute to the Provident Fund Account at the rates determined by the Bank from time to time. I further understand that with effect from _____ (the date of implementation of Pension Scheme), the Bank shall not make any contribution to my Provident Fund Account. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time up to the date of refund.

1. Signature : _____
2. Name in Full (in Block letters): _____
3. Designation: _____
4. E P F No: _____
5. Present Residential Address: _____

6. Date of Birth: _____
7. Date of joining in the Bank' service: _____
8. Present place of posting: _____ Branch / Office.

(Signature to be attested by the Branch/Office Head with Office Seal)

FORMAT - 2
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR, Dist. CHITTOOR

Option Form to be filled in by the Retired Employees of the Bank
(To be submitted in quadruplicate through the Branch / Office from where retired)

Date of receipt of application at Branch / Office		FOR HO USE ONLY
Forwarded on		OPTION NOTED IN SERVICE RECORD
Forwarded by		
Signature with office seal (Branch/Office)		
		(Signature of the concerned Authority at HO with date)

The Chairman
Saptagiri Grameena Bank
Head Office

Date: _____

I hereby declare that I have read and understood the Saptagiri Grameena Bank (Employees') Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorise the EPFO / RPFC to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to me on my retirement. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time.

1. Signature: _____
2. Name in Full (in Block letters): _____
3. Designation (at the time of retirement): _____
4. E P F No: _____
5. Present Residential Address: _____

6. Date of Birth: _____
7. Date of joining in the Bank' service: _____
8. Date of retiring from the Bank' service: _____
9. Branch / Office from where retired: _____ Branch / Office.
10. Branch from where pension to be drawn: _____ Branch

(Signature to be attested by the Branch/Office Head with Office Seal)

FORMAT - 3
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR, Dist. CHITTOOR

Option Form to be filled in by the family of those employees of the Bank who are eligible for family pension (To be submitted in quadruplicate through the Branch / Office from where retired/posted at the time of death)

Date of receipt of application at Branch / Office	Recent photograph of the applicant to be pasted here and then to be attested by the Branch /Office Head	FOR HO USE ONLY
Forwarded on:		OPTION NOTED IN SERVICE RECORD / EPF RECORD OF THE DECEASED EMPLOYEE
Forwarded by:		
Signature with office seal (Branch/Office)		(Signature of the concerned Authority at HO with date)

The Chairman
Saptagiri Grameena Bank
Head Office

Date: _____

I hereby declare that I have read and understood the Saptagiri Grameena Bank (Employees') Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorize the EPFO / RPFC to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to my husband/wife/father/mother/son/daughter (delete whichever is not applicable) on his/her death while in service/ after retirement from Bank's service. I also undertake to refund the non-refundable withdrawal from EPF balance (Bank's contribution component) availed by my husband/wife/father/mother/son/daughter (delete whichever is not applicable), if any, together with interest at EPF rate from time to time up to the date of retirement / death.

1. Name of the applicant/dependent of deceased employee

in Full (in Block letters): _____

2. Name of the deceased employee in Full (in block letter): _____

3. EPF No of the deceased employee: _____

4. Relationship with the deceased employee; _____

5. Name of guardian if applicant is minor; _____

6. Present Residential Address (in block letter): _____

7. Date of death of the deceased employee (Documentary evidence to be attached): _____

8. Date of retirement from Bank's service: _____

9. Branch /Office last served and post held _____

10. Branch from where pension to be drawn: _____ Branch

11. List of documents / evidences to be attached:

- a) Copy of Superannuation / retirement order of the deceased employee (If applicable)
- b) Copy of Death Certificate of the Employee
- c) Copy of Birth certificate of child eligible for pension
- d) Copy of AADHAAR CARD/ KYC document in the name of applicant
- e) Any document in support of the stated relation of the applicant

(Mention the name / nature of document)

I hereby declare that what are stated in the application and documents submitted are true, correct and genuine.

Enclosures: As stated in point 11 above.

(Signature of the applicant)

Date: _____

Place: _____

Signature attested by the Branch/Office Head with Office Seal

FORMAT - 4
SAPTAGIRI GRAMEENA BANK
BRANCH / OFFICE

Ref : _____

The Chief Manager
HRM Department
Saptagiri Grameena Bank
Head Office

Date: _____

Dear Sir,

**Sub: Ten months (prior to death/retirement) average pay & allowances of
Shri/Smt. _____ (EPF No _____)**

We are furnishing below the 10 months (prior to death/retirement) average pay & allowances
of Shri /Smt. _____

Designation (Last) _____, EPF No _____

who retired / died on _____ for calculation of pension under Saptagiri Grameena
Bank (Employees') Regulations, 2018.

1. Basic Pay	
2. Stagnation increment	
3. Pay and Allowances rank for DA	
a) (Mention nature of allowance)	
b)	
c)	
4. Period of Extra Ordinary Leave on Loss of Pay sanctioned by the Competent Authority and enjoyed during the Service Period	
5. Leave Without Pay during Service Period	

Yours faithfully,

Signature with Seal

....., Branch

Note: 1. Delete which is not applicable 2. No columns should be left blank 3. Basic Pay & Stagnation Increment to be reported separately in the columns specified 4. For arriving at the ten months' average please refer to Regulation _____ of Saptagiri Grameena Bank (Employees') Pension Regulations, 2018

FORMAT – 4 (PAGE – 2)

_____ **BRANCH / OFFICE**

DETAILS OF LAST TEN MONTHS SALARY

MONTHWISE BREAK UP YEAR & MONTH →										
1. Basic Pay										
2. Stagnation increment										
3. Pay and Allowances rank for DA										
a) (Mention nature of allowance)										
b)										
c)										
d)										
TOTAL										
AVERAGE										

Note: 1. Delete which is not applicable 2. No columns should be left blank 3. Basic Pay & Stagnation Increment to be reported separately in the columns specified 4. For arriving at the ten months' average please refer to Regulation 36 read with Regulations 2 (c) & 2 (t) of Saptagiri Grameena Bank (Employees') Pension Regulations, 2018

Date _____

Signature with seal

FORMAT - 5
SAPTAGIRI GRAMEENA BANK
BRANCH / OFFICE

Ref : _____

The Chief Manager
HRM Department
Saptagiri Grameena Bank
Head Office

Date: _____

Dear Sir,

Sub: Particulars of Outstanding Liabilities of Shri / Smt _____
(EPF No _____ **)**

We are furnishing below the Particulars of Outstanding Liabilities of Shri / Smt _____

Last Designation _____ EPF No _____retired / died
on _____:

Particulars of Outstanding Loan	Account No	Balance
1. House Building Loan		
2. Housing Loan (Commercial Scheme)		
3. Staff Over Draft		
4. Festival Advance		
5. Education Loan		
6. Conveyance Loan		
7. Others, if any (<i>Mention details</i>)		
TOTAL LOAN BALANCE		

Yours faithfully,

Signature with Seal

Saptagiri Grameena BankBranch

Note: Please submit this certificate preferably after closure of all staff loan accounts. If Housing Loan (Commercial Scheme) and / or Education Loan continue(s) in terms of sanction please furnish the status of the account(s) including compliance of all terms and conditions of sanction. Please provide "N I L" Certificate in case of no outstanding liability.

FORMAT - 6

..... STAFF PENSION* (GENERAL PENSION)		Customer ID	
..... FAMILY PENSION*		S B A/C No	

(*Please ✓ as applicable)

LIFE CERTIFICATE

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

Certified that I have seen the pensioner (name)

.....

.....(address) holder of PPO No..... and that he /she is alive on this
day. His / Her AADHAAR No

(Signature of the Pensioner/Family Pensioner with date)

(Signature with office seal)

Date:..... Name:.....

Place:..... Designation:.....Branch:

FORMAT -7

Acceptance/ Non-acceptance of Commercial Employment

I declare that I have not accepted commercial employment in India.

OR

I declare that I have accepted commercial employment in India w.e.f..... after obtaining previous sanction of the Bank and none of the conditions, if any, attached thereto by the bank has been violated.

OR

I declare that I have accepted commercial employment in India w.e.f..... .. without obtaining the sanction of the Bank

Date:

Signature of the Pensioner

Name of the pensioner: PPO No:

SB (Pension) Account No Mobile :.....

Note: This declaration is required to be submitted for a period of two years from the date of retirement.

FORMAT - 8

CERTIFICATE OF NON- REMARRIAGE / NON-MARRIAGE
(APPLICABLE FOR FAMILY PENSIONERS ONLY)

* I hereby declare that I have not got re-married and I undertake to report the same promptly in the event of my re-marriage. (Applicable for widow / widower Family Pensioner)

* I hereby declare that I am not married and I undertake to report the same promptly in the event of my marriage. (Applicable for un-married daughter Family Pensioner)

(* Please delete which is not applicable)

Signature of the Family Pensioner:

Name of the pensioner:

Place :Date:

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

(Signature of the Bank's Officer or respectable /well known person)

Place :

Date :

Name :

Designation:

Address:

FORMAT - 9

Letter of undertaking by the Pensioner

The Branch Manager

Date : _____

.....**Branch**
Saptagiri Grameena Bank

Dear Sir,

Sub: Payment of Pension under PPO No. _____
through your Branch.

In consideration of your having, at my request, agreed to make payment of Pension due to me every month by credit to my SB Account No _____ with you I, the undersigned, agree and undertake to refund or make good any amount to which I am not entitled or any amount which may be credited to my account in excess of the amount to which I am or would be entitled. I further hereby undertake and agree to bind myself and my heirs, successors, executors, and administrators to indemnify the Bank from and against any loss suffered or incurred by the Bank in so crediting my pension to my account under the scheme and to forthwith pay the same to the Bank to recover the amount due by debit to my said Savings Bank Account or any other account belonging to me in the possession of the Bank.

Yours faithfully,

Signature in full : _____

Address (in block letters) : _____

Phone/Mobile No _____

Witness

Signature		
Name		
E.P.F No		
Address		

FORMAT – 10

Letter of undertaking by the Pensioner and Family Members / Nominees

The Branch Manager

.....**Branch**

Saptagiri Grameena Bank

Date: _____

Dear Sir,

Sub: Payment of Pension under PPO No. _____ through your Branch

In consideration of making payment of Pension as per the ----- Pension Regulations 2018, I / We do hereby solemnly, sincerely and conscientiously declare and say as under

I / We, hereby undertake and agree to bind myself / ourselves and my / our heirs, successors, executors, and administrators to indemnify the Bank from and against any loss suffered or incurred by the Bank in making payment as aforesaid and to forthwith pay the same to the Bank and / or adjust from the pension fund under the aforesaid Regulations and / or from any account maintained with the Bank without any notice to me/ us.

Yours faithfully,

Signature (Pensioner) ; _____

Signature of Family Members / Nominees: _____

Witness

Signature		
Name		
E.P.F No		
Address		

FORMAT - 11**FORM OF NOMINATION**

TO
THE TRUSTEES,

BANK (EMPLOYEES'S) PENSION FUND

I, _____ PPO No/ EPF No _____ hereby nominate the person(s) named below and confer on him / them the right to receive , to the extent specified below , the amount of pensionary benefits under the Pension Regulations in the event of my death before the amount become payable, or having become payable, has not been paid.

Name and address of the Nominee(s)	Relationship with the pensioner	Age	Amount of share (%)	Date of Birth	IF NOMINEE IS MINOR
					Name & address of the person who may receive the said pension during the nominee's minority
(1)	(2)	(3)	(4)	(5)	(6)

Name and address of other Nominee(s) in case the nominee under column 1 above predeceases the pensioner	Age	Relationship with the pensioner	Amount of share (%)	Date of Birth ,if the other nominee(s) is/are minor	Name & address of the person who may receive the pension during other nominee's minority	Contingency on happening of which nomination shall become invalid
(7)	(8)	(9)	(10)	(11)	(12)	(13)

This nomination supersedes the nomination made on _____ which stand cancelled.

Place: _____

Signature / Thumb Impression (if illiterate) of Pensioner/Employee

Date: _____

Name of Pensioner/Employee : _____

WITNESS : 1. _____

2. _____

Address : _____

Address : _____

Signature

EPF No _____

Signature

EPF No _____

ATTESTED by the Pension Disbursing Branch/ Deptt. at H O / Branch

SEAL OF ATTESTING AUTHORITY

NOTE:1. If the employee has a family, the nomination shall not be in favour of any person or persons other than the members of the family. 2. If the employee has no family, the nomination may be made in favour of person or persons, or a body of individuals whether incorporated or not.. 3. Strike out which is not applicable.

FORMAT – 12
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR , Dist. CHITTOOR

Application for grant of Family Pension in the event of death of Employee / Pensioner



The Chairman
Saptagiri Grameena Bank
Head Office

Date: _____

Dear Sir,

I hereby declare that as an eligible family member to receive Family Pension in terms of Saptagiri Grameena Bank (Employees') Pension Regulations, 2018, I am submitting below the requisite particulars for kind favour of sanction of Family Pension to me.

1. Name of the applicant (in block letters) : _____

i) . Relation with the deceased employee/pensioner: _____

ii) . Date of Birth : _____

iii) . Name of the Guardian if the deceased
Person is survived by minor child/children _____

iv) . Religion and Caste : _____

02. Present residential address of the : _____
applicant (in block letters) _____

_____ Cotact No _____

03. Name & age of surviving parent/widow/widower/children of the deceased employee / pensioner:

SI No	N ame	Relationship with the deceased employee/pensioner	Date of Birth (by Christian era)

04. Name of the deceased employee/pensioner _____

05. EPF No of the deceased employee : _____

06. Date of death of the employee /pensioner: _____

07 . Date of retirement (in case of Pensioner): _____

08. a) Branch/Office in which the deceased employee/
Pensioner served last and post held by him/her _____

b) PPO No of the deceased, if any, with the nature
of pension & Disbursing Authority. : _____

09. If the applicant is guardian, date of birth of minor
& relationship with the deceased employee/pensioner _____

10. a) Is the applicant (other than guardian) a pensioner ? **YES / NO**
if so, indicate the amount of monthly pension : _____

b) Is the applicant employed? If so, particulars **YES / NO**
in details with last pay drawn certificate from employer : _____

11. Description of the applicant including (a) Height _____ cm

(b) Personal Identification marks, if any, on hand, face etc. _____

12. Signature/LTI ** of the applicant (Duly
Attested by the Branch head with seal) _____

**SIGNATURE / LTI OF THE APPLICANT
IS ATTESTED**

(Signature of the Branch Head with Seal)

13. a) Name of the Branch of the Bank through which
Family Pension is to be drawn : _____

b) SB Account No : _____

14. List of Documents / evidence attached :

- a) Three copies of passport size recent photograph of the applicant, duly attested in front side
- b) Attested copy of the Death Certificate of the deceased Employee/ Pensioner
- c) Birth Certificate of the children eligible for pension.
- d) Any other document(s) indicating that the applicant is a genuine claimant e.g. AADHAAR Card, Voter Card etc.

15. I hereby declare that what are stated in this application and documents submitted herewith are true,
correct and genuine.

Yours faithfully,

Signature/LTI of the applicant

**** To be furnished in case the applicant is not literate enough to sign his/her name or unable to sign due to poor health condition which also needs submission of Medical Certificate.**

FORMAT - 13
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR, Dist. CHITTOOR

***Clearance / Pre-disbursement formalities to be furnished by
the proposed Pension Paying Branch***

01. Date of Report	
02. Name of the Pension Paying Branch	
03. Branch Code No / SOL ID	
04. Pensioner's name	
05. Pension Type (General or /Family Pension)	
06. PPO No / EPF No (in case of Family Pension , mention EPF No of original pensioner	
07. S B Account No	
08. Date of Certificates	
a) Life Certificate	
b) Non-Marriage/Re-Marriage Certificate (For Family Pensioner only)	
c) Non-Employment/Re-Employment Certificate	
d) Disability Certificate	
09. Whether Undertaking for refund of Excess Payment is taken	YES / NO

Branch Manager
(Please use Branch Seal)

.....**Branch**
.....**Bank**

Date; _____

FORMAT - 14
SAPTAGIRI GRAMEENA BANK
Head Office: CHITTOOR , Dist. CHITTOOR

Option Form to be filled in by the employees who joined the service of the Bank
between 01 April 2010 and 31 March 2018

(in terms of Saptagiri Grammeena Bank (Employees') Pension Regulations, 2018 (Refer Chapter II, Regulation 3(3))
(To be submitted in quadruplicate through their present Branch / Office)

Date of receipt of application at Branch / Office		FOR HO USE ONLY
Forwarded on		OPTION NOTED IN SERVICE RECORD
Forwarded by		
Signature with office seal (Branch/Office)		(Signature of the concerned Authority at HO with date)

The Chairman
Saptagiri Grameena Bank
Head Office

Date: _____

I hereby declare that I have read and understood the Saptagiri Grameena Bank (Employees') Pension Regulations, 2018.

*I am presently covered under EPF Scheme 1995 and hereby irrevocably undertake and opt remain covered under EPF Scheme 1995 only

OR

*I hereby opt to become a member of the National Pension System (NPS) and irrevocably authorise the Bank / EPF Trustees / EPFO / RPFC to transfer the entire contribution of Myself and the Bank along with the interest thereon to the credit of Fund Manager to be appointed for this purpose. I understand that I am required to contribute to the NPS at the rates determined by the Bank/PFRDA from time to time. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time up to the date of refund.

1. Signature : _____

2. Name in Full (in Block letters): _____

3. Designation: _____

4. E P F No: _____

5. Present Residential Address: _____

6. Date of Birth: _____ 7. Date of joining in the Bank' service: _____

8. Present place of posting: _____ Branch / Office.

(Signature to be attested by the Branch/Office Head with Office Seal)

***Strikeout whichever is not applicable.**