



# उत्तर बिहार ग्रामीण बैंक UTTAR BIHAR GRAMIN BANK

ग्रामीण उत्थान के लिए वचनबद्ध

COMMITTED FOR RURAL UPLIFTMENT

**Sponsored by: Central Bank of India**

Letter No. HO/TBC/17/2024-25/674

23/10/2024

Head Office/All Regional Offices/All Branches/All Offices/All Concerned Staff Members/All Retired/Resigned/dismissed/ Removed/Terminated staffs and Family of deceased Staff Members

Circular on Implementation of Amendments in the RRB (Employees') Pension Regulations, 2018 Pension Scheme in Uttar Bihar Gramin Bank in the light of Notification of Uttar Bihar Gramin Bank (Employees') Pension(Amendment) Regulations, 2024 in the Official Gazette of India published on 21<sup>st</sup> October 2024.

DFS vide their letter dated 03.10.2024 provided model Amendment in Uttar Bihar Gramin Bank (Employees') Pension Regulations 2018 and Scheme for getting the same approved from the Board for notification in the Official Gazette, to make regulations for the purpose of giving effect to the provisions under Section 30(1) of RRB Act,1976.

The above regulations were for Amendment in Uttar Bihar Gramin Bank (Employees') Pension Regulations 2018 pension scheme in compliance of the order of Supreme Court passed in SLP (C)-39288/2012 on 12.08.2024. The above regulations have been approved by the DFS, MoF, Gol after consultations with NABARD and Sponsor Bank and are duly vetted by the Ministry of Law.

Board of the bank approved the Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 for publication in the Gazette of India.

Bank submitted the approved copies of above regulations to the Controller of Publications, Government of India, Delhi for publication in the Gazette of India and the same has since been published on 21.10.2024 vide number 646.

In terms of Notification Nos. 646 dated 16.10.2024 published in Gazette of India, Options are invited in respect of the retired/resigned/dismissed/removal/terminated officer/employees and family of deceased officer/employees as per the eligibility in view of the terms of notification.

As such, It has been decided to extend option for pension under Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 to the retired/resigned/dismissed/removal/terminated officer/employees and family of the deceased officers/employees in accordance with the terms and conditions laid down in the notification published on 21.10.2024 in the Gazette of India.

Copy of the Gazette Notification is placed in Bank's website [www.ubgb.in](http://www.ubgb.in) for information and for needful purpose.

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Following action plans for the implementation of Pension scheme in the bank are,

1. Option forms are attached as per eligibility for the pension Scheme shall be submitted by the Retired/Resigned/Dismissed/Removal/Terminated employee/ officer within the stipulated days i.e. 15 days from the date of notification i.e. by 05 November 2024 and 30 days for family of deceased Officer/employees from the date of notification i.e. by 20 November 2024.
2. After submission of option along with submission of requisite documents as per the formats described hereinafter, by the eligible staff members, they will refund 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 Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024.
3. Provided that an employee who is required to refund the amounts as per this clause may authorize the Bank to adjust these amounts from the amounts payable by the Bank to the employee.
4. Option and other formats are attached with this circular.

**Format-2-** (by the Retired/ Resigned/Dismissed/Removal/Terminated staff member)- Staff member, who was in service on or after 01.09.1987, and had been recruited on or before 31.03.2010.

**Format-3-** (by the family of deceased staff member)- Staff member, who was in service on or after 01.09.1987, and had been recruited on or before 31.03.2010 but died before the date of notification i.e. 18.10.2024.

After submission of option and refund of amount as mentioned above (as the case may be) within the date given above following Formats (duly filled in and complete in all respect) are to be submitted subsequently/ as per the due time

**Format-4-** Certificate to be submitted by all eligible staff members/family of deceased staff members, issued by the disbursing Branch/Office for ten months' average pay & allowances

**Format-5-** Particulars of outstanding liabilities to be submitted by all eligible staff members/family of deceased staff members issued by the Branch Office

**Format-6-** Life Certificate duly filled in all respect is to be submitted by the staff member/family of the deceased staff member

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# उत्तर बिहार ग्रामीण बैंक UTTAR BIHAR GRAMIN BANK

ग्रामीण उत्थान के लिए वचनबद्ध

COMMITTED FOR RURAL UPLIFTMENT

**Sponsored by: Central Bank of India**

**Format-7-** Acceptance/non acceptance of commercial employment is to be submitted by the staff member/family of the deceased staff member.

**Format-8** Certificate of Non-remarriage/Non marriage to be submitted by the eligible family of the deceased staff member

**Format-9-**Letter of undertaking to be submitted by the serving/retired/family of deceased staff member inter-alia to repay excess payment made.

**Format-10-** Letter of undertaking to be submitted by the serving/retired/family of Deceased staff member to repay any loss suffered/incurred by the Bank

**Format-11-**Nomination form

**Format-12-**Application for grant to Family pension in the event of death of staff member.

**Format-13-**Pension Paying Branch shall furnish.

-Option formats and other formats (together with certified copies of documents as per details of the formats) duly filled in and no column is left blank to be submitted through proper channel duly attested/certified by the Branch Manager and Regional Manager.

-Recent joint Photograph in Single frame (5CM X 4CM for Uniform application) with spouse (2)/applicant (3- family to be parted) on option forms (as the case may be). and the same is to be attested by the concerned Branch Manager and countersigned by Regional Manager. Extra three photographs also are to be submitted.

-Details of Loss of Pay/Extra ordinary leave Sabbatical leave and Suspension period, if any must be filled.

-Last 10 months' average salary (Regulation 36)- last 10 months to be considered for average salary. In case there is LOP/COL/Sabbatical Leave/Suspension Period during the said period, if any, the equal period prior to 10 months to be considered to arrive at average salary Similarly in case of salary not paid/partially paid during the last 10 months, salary for the equal period/days must be reported prior to the 10 months' period for calculating actual average pay for the pension calculation. (No notional salary to be taken)

The above circular is for the informative guidelines only, rules and regulations what have been provided in Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 and Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 will prevail and final.



# उत्तर बिहार ग्रामीण बैंक UTTAR BIHAR GRAMIN BANK

ग्रामीण उत्थान के लिए वचनबद्ध

COMMITTED FOR RURAL UPLIFTMENT

Sponsored by: Central Bank of India

These circulars with Formats are placed in Bank's website and being circulated in Branch/Office. All Regional Managers, Branch Managers, and all staff members are advised and appealed to display this circular in their notice boards and propagate it to the Retired/Resigned/Dismissed/Removal/Terminated staff member and family of the deceased staff members so that no case is left to be informed.

(D.N. Pandey)  
General Manager

Encl: Copy of Pension Regulation & Formats.



**FORMAT - 2**  
**UTTAR BIHAR GRAMIN BANK**  
**Head Office: Kalambagh Chowk, Muzaffarpur, Dist. Muzaffarpur-842001**

**Option Form to be filled in by the Retired/Resigned/ Dismissed/ Removed/ Terminated  
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  
Uttar Bihar Gramin Bank  
Head Office

Date: \_\_\_\_\_

I hereby declare that I have carefully read and understood the Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. I voluntarily opt to become a member of the Bank's Pension Scheme.

I hereby undertake to refund the final amount of the Bank's Contribution to Provident Fund under the Employees' Pension Scheme, 1995 along with accrued interest thereon and periodic pension, if any received by me under the Employees' Pension Scheme, 1995 attributable to any period before the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette within fifteen days from the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette.

I authorize the Bank to adjust the Final Amount of its contribution to Provident Fund under Employees' Pension Scheme, 1995 along with accrued interest thereon and periodic pension if any received by me under the Employees' Pension Scheme, 1995 attributable to any period before the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette from the amounts payable by the Bank to me. (Tick in the Box if applicable)

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 of Ex-Employee

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



**FORMAT - 3**  
**UTTAR BIHAR GRAMIN BANK**

Head Office: Kalambagh Chowk, Muzaffarpur., P.O. Muzaffarpur., Dist. Muzaffarpur-842001

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/Resigned/ Dismissed/ Removed/ Terminated/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	<b>FOR HO USE ONLY</b>
Forwarded on:		<b>OPTION NOTED IN SERVICE RECORD/EPF RECORD OF THE DECEASED EMPLOYEE</b>
Forwarded by:		
Signature with office seal (Branch/Office)		(Signature of the concerned Authority at HO with date)

The Chairman  
Uttar Bihar Gramin Bank  
Head Office Date: \_\_\_\_\_

I hereby declare that I have carefully read and understood the Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. I voluntarily opt to become a member of the Bank's Pension Scheme.

I hereby undertake to refund the final amount of the Bank's Contribution to Provident Fund under the Employees' Pension Scheme, 1995 along with accrued interest thereon and periodic pension, if any received by the deceased employee or ,as the case may be, the family of deceased employee on his/her death in service/after retirement from Bank's service under the Employees' Pension Scheme, 1995 attributable to any period before the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette within thirty days from the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette.

I authorize the Bank to adjust the Final Amount of its contribution to Provident Fund under Employees' Pension Scheme, 1995 along with accrued interest thereon and periodic pension if any received by the deceased employee or ,as the case may be, the family of deceased employee on his/her death in service/after retirement from Bank's service under the Employees' Pension Scheme, 1995 attributable to any period before the date of notification of Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024 in the Official Gazette from the amounts payable by the Bank. (Tick in the Box if applicable)

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:
- Copy of Superannuation / retirement order of the deceased employee (If applicable)
  - Copy of Death Certificate of the Employee
  - Copy of Birth certificate of child eligible for pension
  - Copy of AADHAAR CARD/ KYC document in the name of applicant
  - 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  
UTTAR BIHAR GRAMIN BANK  
BRANCH/OFFICE

Ref: \_\_\_\_\_

The Chief  
Manager/In charge  
Terminal Benefit Cell  
Uttar Bihar Gramin  
Bank  
Head Office

Date: \_\_\_\_\_

Dear Sir,

**Sub: Ten months (prior to death/retirement/dismissed/removed/terminated/resigned) average pay & allowances of**

**Shri/Smt. \_\_\_\_\_ (EPF No \_\_\_\_\_)**

We are furnishing below the 10 months (prior to death /retirement /dismissed /removed /terminated /resigned) average pay & allowances of Shri/Smt. \_\_\_\_\_

Designation (Last) \_\_\_\_\_, EPF No \_\_\_\_\_

who retired / died on \_\_\_\_\_ for calculation of pension under Uttar Bihar Gramin Bank (Employees') Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024.

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 36 of Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 read with Uttar Bihar Gramin





**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)										
<b>TOTAL</b>										
<b>AVERAGE</b>										

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 Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024.

Date \_\_\_\_\_

Signature with seal



FORMAT - 5  
UTTAR BIHAR GRAMIN BANK  
\_\_\_\_\_ BRANCH /  
OFFICE

Ref: \_\_\_\_\_  
The Chief Manager/In charge  
Terminal Benefit Cell  
Uttar Bihar Gramin 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 (Mention details)		

**TOTAL LOAN BALANCE**

Yours faithfully,

Signature with Seal

..... Bank ..... Branch

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 "NIL" 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  
.....Branch  
Uttar Bihar Gramin Bank

Date:

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		
EPF No		
Address		





*Letter of undertaking by the Pensioner and Family Members / Nominees*

The Branch Manager

.....Branch

**Uttar Bihar Gramin Bank**

Date: \_\_\_\_\_

Dear Sir,

**Sub: Payment of Pension under PPO No. \_\_\_\_\_ through your Branch**

In consideration of making payment of Pension as per the Uttar Bihar Gramin Bank (Employees') Pension Regulations 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. 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, UTTAR BIHAR GRAMIN 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
			(3)	(4)		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

Signature

EPF No \_\_\_\_\_

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 favor 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 favor of person or persons, or a body of individuals whether incorporated or not. 3. Strike out which is not applicable.





FORMAT-12

UTTAR BIHAR GRAMIN BANK

Head Office: Kalambagh Chowk, Muzaffarpur, P.O. Muzaffarpur, Dist. Muzaffarpur

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



The Chairman  
Uttar Bihar Gramin Bank  
Head Office

Date: \_\_\_\_\_

Dear Sir,

I hereby declare that as an eligible family member to receive Family Pension in terms of Uttar Bihar Gramin Bank (Employees') Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. 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 : \_\_\_\_\_

2. Present residential address of the: \_\_\_\_\_  
applicant (in block letters) \_\_\_\_\_

\_\_\_\_\_ Contact No \_\_\_\_\_

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

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

4. Name of the deceased employee/pensioner \_\_\_\_\_

5. EPF No of the deceased employee: \_\_\_\_\_

6. Date of death of the employee /pensioner: \_\_\_\_\_

(Documentary evidence to be attached) Contd. PAGE - 2



7. Date of retirement (in case of Pensioner): \_\_\_\_\_
8. 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. \_\_\_\_\_
9. 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

UTTAR BIHAR GRAMIN BANK

Head Office: Kalambagh Chowk, Muzaffarpur, P.O. Muzaffarpur, Dist. Muzaffarpur-842001

**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  
Uttar Bihar Gramin Bank

Date; \_\_\_\_\_



**UTTAR BIHAR GRAMIN BANK**  
 HEAD OFFICE :KALAMBAGH CHOWK, MUZAFFARPUR

Application for grant Superannuation Pension  
 (To be submitted in Duplicate)

Passport size Photograph of  
 Pensioner  
 (Self - Attested)

The Chairman  
 Uttar Bihar Gramin Bank  
 - Head Office, Kalambagh Chowk  
Muzaffarpur

Dear Sir,

Date :-

I hereby declare that as an eligible staff member to receive Pension in terms of Uttar Bihar Gramin Bank (Employees) Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. I am submitting below the requisite particulars for kind favour of sanction of Pension to me.

1	Name of Pensioner		11	Last Basic	
2	Father / Husband Name		12	EPF No.	
	Address		13	ADHAR No.	
			14	PAN	
			15	Mobile No	
			16	Gender	
3	Date of Birth		17	E mail ID	
4	Date of Joining		18	LOP (Days)	
5	Date of Retirement				
6	Designation		19	Scale	
7	Retirement Mode				
8	Retired from		20	Region	
9	Identification Mark		21	Religion	
10	Height		22	Cast	General / OBC / SC / ST

23	Is pensioner desire to commute their pension ? If yes, please submit Form VI (retirement within one year ) or Form VII (retirement above one year) as per para 39 of Uttar Bihar Gramin Bank (Employees') Pension Regulation 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. Commutation ratio is maximum of 1/3 of basic Pension		YES / NO	
24	Name of the Nominee (As in Format - 11)	Relation:- Age :-		
25	Is the applicant a pensioner? If so, indicate the amount of monthly pension.	YES / NO	Rs:-	
26	SB Account No. of UBG Bank	PPO No of EPS:-		
27	Pension Payment Branch:-	SOL ID:-		
28	Particulars of Refund towards Employer's contribution to EPF. Mode of Refund (i) Demand Draft OR (ii) NEFT	DD. No.:-	UTR No.	
		DD. Date:-	UTR Date:-	
		Rs.		
29	Refund towards EPS Pension (i) Demand Draft (ii) NEFT	DD. No.:-	UTR No.	
		DD. Date:-	UTR Date:-	
		Rs.		





**UTTAR BIHAR GRAMIN BANK**  
HEAD OFFICE :KALAMBAGH CHOWK, MUZAFFARPUR

30	Name & Age of surviving parent / spouse / children			
SN	Name	Relationship with the Employee	Age	Date of Birth
a				
b				
c				
d				
e				
f				

31	Signature of the Applicant (Duly Attested by the Branch Head with Seal, Pension Paying)	
	Signature of the Applicant	Signature of the Branch Head with Seal (Pension Paying)

32	List of Documents / evidence attached (Tick <input type="checkbox"/> / <input type="checkbox"/> Appropriate)	
a	Five Copies of recent Joint Passport size photographs with Spouse of the Applicant.	
b	Proof of Address	
c	Proof of Identity of applicant and family eg:	
d	Copy of Aadhar Card (Self Attested)	
e	Copy of PAN Card (Self Attested)	
f	Bank Passbook of UBGB in which Pension to be credited	
g	Copy of PPO (EPS)	
h	Updated statement of A/c (last 1 year) in which EPS Pension is credited	
i	Updated EPFO Statement	
j	Please Specify if any other: _____	
k	Demand Draft refund towards Employer's contribution to EPF	
l	Receipt of NEFT with UTR details	

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

Yours faithfully,

Signature of the Applicant

Name :-



**UTTAR BIHAR GRAMIN BANK**  
 HEAD OFFICE :KALAMBAGH CHOWK, MUZAFFARPUR

Application for grant Family Pension  
 (To be submitted in Duplicate)

Passport size Photograph of  
 Pensioner (Self-  
 Attested)

The Chairman  
 Uttar Bihar Gramin Bank  
 Head Office, Kalambagh Chowk  
 - **Muzaffarpur**

Dear Sir,

Date :-

I hereby declare that as an eligible staff member to receive Pension in terms of Uttar Bihar Gramin Bank (Employees) Pension Regulations, 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. I am submitting below the requisite particulars for kind favour of sanction of Pension to me.

1	Name of Deceased Staff		14	Name of Applicant	
2	Father / Husband Name		15	Father / Husband Name	
3	Address at the time of death		16	Address	
4	EPF No. of Deceased Staff				
5	Last Basic of Deceased Staff		17	DOB of Applicant	
6	DOB of Deceased Staff		18	Gender	
7	DOJ of Deceased Staff		19	ADHAR No.	
8	DOR of Deceased Staff		20	PAN	
9	DOD of Deceased Staff		21	Mobile No	
10	Designation of Deceased staff		22	E mail ID	
11	Last Serving Br. / Office		23	Identification Mark	
12	Region		24	Religion	
13	LOP (Days)		25	Cast	General / OBC / SC / ST

26	Is pensioner desire to commute their pension ? If yes, please submit Form VI (retirement within one year ) or Form VII (retirement above one year) as per para 39 of Uttar Bihar Gramin Bank (Employees') Pension Regulation 2018 read with Uttar Bihar Gramin Bank (Employees') Pension (Amendment) Regulations, 2024. Commutation ratio is maximum of 1/3 of basic Pension		YES / NO	
27	Name of the Nominee (As in Format - 11)		Relation:-	Age :-
28	Is the applicant a pensioner? If so, indicate the amount of monthly pension.		YES / NO	Rs:-
29	SB Account No. of UBGB		PPO No of EPS:-	
30	Pension Payment Branch:-		SQL ID:-	
31	Particulars of Refund towards Employer's contribution to EPF. Mode of Refund (i) Demand Draft (ii) NEFT	DD. No.:-	UTR No.	
		DD. Date:-	UTR Date:-	
		Rs.		
32	Refund towards EPS Pension (i) Demand Draft (ii) NEFT	DD. No.:-	UTR No.	
		DD. Date:-	UTR Date:-	
		Rs.		





33	Name & Age of surviving parent / spouse / children			
SN	Name	Relationship with the Employee	Age	Date of Birth
a				
b				
c				
d				
e				
f				

34	Signature of the Applicant (Duly Attested by the Branch Head with Seal, Pension Paying)	
	Signature of the Applicant	Signature of the Branch Head with Seal (Pension Paying)

35	List of Documents / evidence attached (Tick v Appropriate)	
a	Five Copies of recent Joint Passport size photographs with Spouse of the Applicant.	
b	Copy of Death Certificate	
c	Proof of Address	
d	Proof of Identity of applicant and family eg:	
e	Copy of Aadhar Card (Self Attested)	
f	Copy of PAN Card (Self Attested)	
g	Copy of Passport etc (Self Attested)	
h	Copy of PPO (EPS)	
i	Updated statement of A/c (last 1 year) in which EPS Pension is credited	
j	Please Specify if any other: _____	
k	Demand Draft refund towards Employer's contribution to EPF	
l	Receipt of NEFT with UTR details	

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

Yours faithfully,

Signature of the Applicant

Name :-





# उत्तर बिहार ग्रामीण बैंक UTTAR BIHAR GRAMIN BANK

ग्रामीण उत्थान के लिए बचनबद्ध

COMMITTED FOR RURAL UPLIFTMENT

Sponsored by: Central Bank of India

## CLEARANCE CERTIFICATE FOR PENSION PAYMENT

Branch/Office \_\_\_\_\_

Regional Office \_\_\_\_\_

1. Name of the Retired/Resigned/Dismissed/Removed/Terminated /Deceased Staff::
2. Last Designation (Grade) ::
3. Date of Birth ::
4. Date of Joining in the Bank ::
5. Date of Retirement ::
6. Date of reporting at the Branch ::
7. Dues (if any) in his name::
8. Details of extraordinary leave on loss of pay (sanctioned/ unsanctioned)::
9. Any Deptt. Enquiry/Pending/ :: (Yes/No)  
Contemplated against him. Attach copy of Punishment Order/other related Papers in case of Yes.
10. Any irregularities against him in detail::
11. IBR Position (No. of entries & Amt. not Liquidated) ::
12. Last Basic Pay (Attach copy of Last salary increment/Fitment) :
13. Guarantor to any advance::
14. Any Remarks/Comments received from other Branch/RO:: Yes/No (Attach details, if any)
15. Last 10 months' salary details: -

Month-Year	Basic Pay	Other Pay and Allowances rank for D.A. and H.R.A.		Total	Remarks (If any)
		F.P.P.	Others Pay/ Allowances		

Recommendation/Remarks of Branch Manager

Recommendation/Remarks of Regional Manager

Signature of Branch Manager  
Date:-

Signature of Regional Manager  
Date:-





सेवा में,

Trustee

उत्तर बिहार ग्रामीण बैंक (कर्मचारी) पेंशन फंड

प्रधान कार्यालय, उत्तर बिहार ग्रामीण बैंक

प्रधान कार्यालय, मुजफ्फरपुर

घोषणा पत्र

में ..... पुत्र/पुत्री / पति/पत्नी ..... PF No .....

शाखा ..... क्षेत्रीय कार्यालय ..... सेवानिवृत्त तिथि .....

यह घोषणा करता/करती हूँ कि :

1. मैं उत्तर बिहार ग्रामीण बैंक (कर्मचारी) पेंशन (संशोधन) विनियम, 2024 के तहत योग्य हूँ।
2. मुझे EPFO से Employer Share कि राशि व्याज सहित रु .....(रु .....) सेवानिवृत्त तिथि उपरांत प्राप्त है जिससे सम्बंधित Statement of Member Passbook की एक सत्यापित प्रति संलग्न है।
3. संलग्न Statement of Member Passbook में वर्णित Employer Share कि कुल राशि व्याज सहित रु..... (रु.....) Uttar Bihar Gramin Bank (Employee's) Pension Fund, Muzaffarpur शाखा स्थित खाता संख्या 1000011130000476 में जमा हेतु Cheque / DD / NEFT, Cheque / DD / UTR No..... दिनांक ..... संलग्न कर रहा/रही हूँ।
4. भविष्य में EPFO कार्यालय से बैंक को उपलब्ध कराए गए Statement of Member Passbook की राशि तथा मेरे द्वारा उपलब्ध कराए गए Statement of Member Passbook की राशि में कोई भी अंतर होने कि स्थिति में बैंक द्वारा निर्धारित / मान्य राशि के भुगतान / वापसी / समायोजन की सहमती देता/देती हूँ।
5. घोषणा करता/करती हूँ कि मैंने नियोक्ता शेर से किसी प्रकार का ऋण नहीं लिया है। भविष्य में यदि प्रकाशमें आता है कि नियोक्ता शेर से ऋण प्राप्त किया हूँ तथा नियोक्ता के शेर की पूरी रकम जमा नहीं की गई है तो मैं इसकी भरपाई करूंगा तथा बैंक प्रबंधन नियमानुसार मेरे विरुद्ध कानूनी कारवाई के लिये स्वतंत्र होगी।
6. मेरे खिलाफ कोई सतर्कता दृष्टिकोण / आपराधिक मुकदमा पुलिस अथवा किसी न्यायालय में लंबित है अथवा नहीं है। यदि हैं तो पूर्ण विवरण दें।
7. EPFO पेंशन की प्राप्त राशि में हमने Commutation के मद में रु..... की राशि Commute नहीं करवाया है / करवाया है तथा रु ..... की राशि प्राप्त की है। यह Commutation दिनांक ..... को पुनर्स्थापित होगी।
8. उत्तर बिहार ग्रामीण बैंक (कर्मचारी) पेंशन (संशोधन) विनियम, 2024 के आलोक में EPFO से प्राप्त पेंशन/ फंड की राशि नियमानुसार मैं प्रबंधन को वापस करने का वचन देता/देती हूँ।

विश्वासभाजन



