



The New India Assurance Co. (Employees') Pension Fund

New India Assurance Bldg., Ground Floor, 87 M. G. Road, Fort, Mumbai 400001

Phone : 022-22708254/285 Fax No. : 022-22700473

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Pension Cell/ / /2017-18

December 15, 2017

Dear Sir,

Re. : Submission of Life Certificate in January 2018

You are aware that as per the Pension Scheme, you are required to submit a Life Certificate every year. We are enclosing a form of Life Certificate to be executed by you after taking into account the instructions stated therein. **The form should be dated January 01, 2018 or any subsequent date thereafter so as to reach Pension Cell on or before January 20, 2018 in order to enable us to release the Pension from Feb-18. Further, kindly provide us PAN No & Aadhar No (if not submitted earlier).**

**This certificate should be certified by :

- Class I Officer of the Company from which the employee retired alongwith seal (or)
- Gazetted Officer alongwith Seal (or)
- Registered Medical Practitioner alongwith Seal (or)
- An Officer of any Bank where an account is maintained by the pensioner / family pensioner alongwith seal.
- In case of pensioner / family pensioner residing aboard it should be attested by Indian Consulate / Embassy.

Thanking you,

Yours faithfully,

Sd/-

Chief Manager

Computer generated letter does not require signature

FORM OF LIFE CERTIFICATE

LIFE CERTIFICATE TO BE SUBMITTED BY A PENSIONER AS ON 1st JANUARY EVERY YEAR

Annuity No. :

Aadhar No:

PAN Number :

Certified that I have seen the pensioner **Shri / Smt. / Kum.**
below in my presence and that **he/she** is alive on this date.

(whose specimen signature is appended)

Existing Address	Change in Address, if any
Telephone No :	Telephone No :
Mobile No. :	Mobile No :
EMAIL ID:	

IN CASE OF CHANGE IN BANK - ENCLOSE CANCEL CHEQUE

Bank Account No.		Bank Name	
Bank Branch			
MICR No.		IFSC Code	

Issued at _____ on _____ day of January 2018.

(Specimen signature of Pensioner)

**Witness Signature & Seal

Name	
Occupation / Designation	
Address	

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GENERAL INSURANCE EMPLOYEES PENSION SCHEME 1995

To be submitted alongwith Life Certificate by Family / Child Pensioners.

Annexure 26 - A

Certificate of Non-marriage* / Re-marriage**

Name of Pensioner : _____

Annuity No. : _____

I hereby declare that I am not married / re-married.

(Select appropriate from the above)

I hereby declare that I undertake to report such an event to the Corporation / Company immediately.

Signature / Left Hand Thumb Impression

Date : _____ Place : _____

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

Witness Signature

Name : _____

Occupation / Designation : _____

Address : _____

Seal : _____

* Applicable in the case of daughter of employee in case of Child Pension.

** Applicable in the case of wife of the employee.

Non Employment Declaration to be given by Child Pensioner

Name of Child Pensioner : _____

Annuity No. : _____

I hereby solemnly declare that I am not employee in any institution, Govt. Corporation or Company. I also authorize you to recover the child pension amount paid to me in case of misinformation / wrong information.

Signature of Child Pensioner

Date : _____ Place : _____

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

Witness Signature

Name : _____

Occupation / Designation : _____

Address : _____

Seal : _____

(Note : Any addition / alteration in the text of the form will make the declaration invalid)