

8. Are you willing to accept Scheme Certificate in lieu of withdrawal benefits (a) Yes (b) No

9. Particulars of Family (Spouse, Children & Nominee)

Name	Date of Birth	Relationship with Member	Name of the Guardian of Minor
(a) Family Members			
(b) Nominee			

10. In case of death of member after attaining the age of 58 years without filing the claim:-

- (a) Date of death of the member :
- (b) Name of the Claimant(s) / and relationship with the members :

11. MODE FOR REMITTANCE [PUT A TICK IN THE BOX AGAINST THE ONE OPTED]

- (a) By postal money order at my cost to address given against item No. 7
- (b) Account payee cheque sent direct for credit to my SB A/c (Scheduled Bank) under intimation to me

S.B. Accounts No. _____

Name of the Bank (in block letters) _____

Branch (in block letters) _____

Full Address Of the Branch (in block letters) _____

12. Are your availing pension under EPS-95 ?

If so indicate : PPO NO. _____ By Whom Issued _____

Certified THAT THE PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE

Date _____

Signature or left Hand
Thumb Impression of the
Member / claimant(s)