		From:	
(Photo of			
Applicant)			
		Mobile No	
		Date:	
To, Accounts Officer (PDA) O/o CCA, Mumbai, 3 <sup>rd</sup> floor, Currey Road T Currey Road (E), Mumb	el. Exchange Bldg.,		
Respected Sir,			
Shri/Sn	nt	on Pension to Family Pension due to D Staff no who Expired on	
		•	
=		y Husband/Wife Shri/Smt	
		PPO/PC No	
I request you t me being eligible mem		perannuation Pension to Family Pensi	ion and transfer to
I hereby under Bank account will be re		of excess/wrong payment of pension ctions.	ո, if credited to my
Thanking you,		V 6 W	1.6.11
		Yours fait	ntully,
		(	)
Encl:			
<ol> <li>Original / attes</li> </ol>	ted copy of Death Cer		

- ECS Mandate from duly signed by Authorised Bank Officer.
   Pensioner Letter of Authority & undertaking duly signed by Authorised Bank Officer.
- 4. Photocopy of Self Attested PAN Card and Aadhar Card

- 5. Photocopy of PPO Book (1 to 8 pages)
   6. Photocopy of 1<sup>st</sup> page of Family Pensioners Pass Book or Cancelled Cheque
   7. Photocopy of 1<sup>st</sup> page & last pension credit entry of pensioners Passbook

## **MANDATE FORM**

## BENEFICIERY/CUSTOMER'S OPTION TO RECEIVE PAYMENT THROUGH E-PAYMENT

1.	Beneficiary Name			
2.	Beneficiary address & Telephone/ Mobile No.			
3.	Beneficiary Account no.			
4.	Account Type (Saving/Current /Cash Credit with code 10/11/13)			
5.	Nine digit code number of the bank & branch appearing on the MICR cheque issued by the bank (if available)			
6.	Bank Name			
7.	Branch Name & address with Telephone No.			
8.	IFSC Code			
9.	Photocopy of the cancelled cheque to confirm correctness of IFSC code and Account no. given			
delay	reby declare that the particulars given yed or not effected at all for reasons of ir s above, i would not hold the user institu	ncompleteness or incorr		
MTNL PPO NO				
Date	d <b>(S</b> i	ignature of Spouse)	(Signature of the Beneficiary)	
Certified that the particulars furnished above are correct as per the record.				
Date	d	(Signature of Authori	sed Officer with Bank Stamp)	

## PENSIONER'S LETTER OF AUTHORITY AND UNDERTAKING

Mumba 3 <sup>rd</sup> floo	incipal Controller of Communication Acco ai Circle, or, Currey Road Tel. Exchange Bldg., Road (E), Mumbai – 400012.	ounts,		
Sir,				
author		nk Account under the New Banking Scheme. I hereby sion on my behalf and credit the same to my account		
1. I have to draw my pension/family pension through the bank as per details given below.				
	Name of the Bank:-			
	Branch:-			
	Account No.:-			
	IFSC Code:-	MICR Code:-		
2.	I hereby undertake that any amount of Bank Account will be refunded on your	excess/wrong payment of pension, if credited to my instructions.		
3.	This authority undertakes and agrees to bind myself and my heirs, successors, to indemnify the Bank/PDA in so crediting my pension to my account under the scheme and to forthwith pay the same to the Bank/PDA and also irrevocably authorise the Bank/PDA to recover the amount due by debit to my said account or any other account/deposits belonging to me in possession of the bank.			
	Place :			
	Date:	Signature of Pensioner/ Family Pensioner		

I.	Personal detail.	
	1. Name of the Pensioner	:
	2. Designation	:
	3. Date of Retirement	:
	4. Address of the Pensioner	:
	Family Pensioners only	
	5. Relationship with deceased	:
	6. Name of the deceased Government Servant Pensioner	:
II	Bank Details	
	1. Saving/Current Account No	:
	2. Name of the Bank	:
	3. Name of the Branch	:
III	Bank Certificate:	
credite	ures given overleaf agree with the specimered in the account of the pensioner will be ree. O/o Pr. CCA, Mumbai, Currey Road Tel. Ex	are correct. The account of pensioner and his /her a signature held in our records. Any excess amount funded immediately as and when called for by the exchange Bldg., Currey Road(E), Mumbai 400012) or
Place :		
Date:		Signature of the Bank Manager (Bank Address seal)

 $\label{eq:Note:PartI} \textbf{Note: Part I \& II to be filled in by the Pensioner and Part III by Bank}$