GOVERNMENT OF ORISSA
FINANCE DEPARTMENT
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DEFENCE PERSONNEL RELIEF FUND, ORISSA.
FORM - 1

Application and Sanction of Pension to the family member of the deceased Defence Personnel of Orissa (to be submitted in duplicate)

PART – I

1. Name & Address of the applicant (in Block Letters) :-
2. Name & Designation of the deceased Defence Personnel :-
3. Relationship of the applicant With the deceased personnel :-
4. Date of Death of the Personnel :-
5. Details of surviving members of the Family of the deceased personnel :-

Sl. No.	N A M E	Date of Birth.	Relationship with the Personnel.
1.	2.	3.	4.
1.			
2.			
3.			
4.			
5.			
6.			
7.			

6. Bank A/c No. :-
7. Name and address of the Bank Where the above Bank A/c is in Operation and where he/she desires to Get his/her monthly pension :-
8. List of enclosures (in duplicate) :-
   i) Attested Copy of death certificate.
   ii) Attested Copy of legal heir certificate.
   iii) Attested Photograph of the applicant.

PLACE :-
DATE :-

SIGNATURE OF THE APPLICANT.

PART – II

Forwarded to Finance Department with recommendation to the effect that State Government Pension of Rs. 1275/- per month may be granted to Shri/Smt._____ wife/father/mother of the deceased personnel Late_____ with effect from_____.

Bhubaneswar
Date:-

Signature & Seal of
Special Secretary to Govt.
Home Department.

PART -III

State Government Pension of Rs. 1275/- per month is sanctioned in favour of Shri/Smt_____ wife/father/Mother of Late_____ with effect from_____.

Bhubaneswar
Date:-

SECRETARY TO GOVT.
FINANCE DEPARTMENT

GOVERNMENT OF ORISSA
FINANCE DEPARTMENT
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DEFENCE PERSONNEL RELIEF FUN, ORISSA

FORM-2

Part-I

LIFE CERTIFICATE

(To be submitted in January & July to a Bank where the pension is disbursed)

I have seen today Shri/Smt._____
wife/father/mother of Late_____
resident of _____
is in good health.

Place :-
Date:-

Signature of
Gazetted Officer
With Designation.

OR

Signature of important
person of the locality
with address.

Part-II
I am in good health/and not remarried.

Place :-
Date:-

SIGNATURE OF THE PENSIONER
WITH ADDRESS.

Instructions to the Disbursing Bank : The death or re-marriage of a pensioner, shall be intimated to the UCO Bank, Secretariat Branch, Bhubaneswar & Finance Department, Orissa Secretariat, Bhubaneswar immediately.