ANNEXURE-I

APPLICATION FOR FINAL SETTLEMENT OF CONTRIBUTORY PENSION SCHEME ACCOUNT

[Vide G.O.Ms.No.59,Finance (PGC) Department, Dated 22nd February, 2016.]

(Please ensure that all the relevant Particulars are given with certificates where necessary to avoid delay in settlement of claim)

(To be sent in Triplicate)

1	Name of the Subscriber (in BLOCK LETTERS)	:	
2	Designation	:	**P.G. Assistant**
3	Contributory Pension Scheme Account Number with Departmental Suffix	:	
4	Date of Birth	:	**10-06-1988**
5	Religin	:	**Hindu**
6	Date of Entry into Service	:	**22-02-2014**
7	Office in which Attached	:	**Govt. Hr. Sec. School, Thellar -604406 Vanadavasi Taluk, Tiruvannamalai Dist.**
8	Treasury / Sub-Treasury where bills of the Office are presented	:	**1607, Sub Treasury, Vandavasi, Tiruvannamalai Dist.**
9	Residential Address after Retirement	:	
10	Event Necessitating Closure Of Account	:	**Death**
	a) Retirement on Superannuation (attach a copy of order)	:	**---**
	b) Voluntary Retirement (copy of orders to be enclosed)	:	**---**
	c) Resignation(attach a copy of the orders of acceptance of resignation)	:	**---**
	d) Dismissal/Removal/Compulsory Retirement/Invalidation Date	:	**---**
	i) Have you preferred an appeal?	:	**---**
	ii) If yes, date of its disposal / withdrawal	:	**---**
	iii) If no, date of expiry of appeal time	:	**---**
	iv) If no appeal has been preferred give an undertaking that no appeal will be preferred in future.	:	I hereby undertake that no appeal shall be preferred by me against my dismissal / removal / Compulsory retirement / invalidation (Strike out whichever is not applicable)
	e) Date of Death	:	10-04-2017
	i) Has Subscriber filled any nomination (if yes, enclose nomination in original)	:	Enclosed
	ii) If No or if the nomination has been rendered null and void who are the surviving family members on the date of death of the subscriber (Enclose a Legal heir ship Certificate):	:	---

Sl. No	Name	Relationship with the Subscriber	Date of Birth & Age	Marital Status
1	S.RAJENDIRAN	Father	61	Married
2				
3				

	iii) If any of the nominee die after the subscriber but before receiving payment. Please furnish details thereof	:	---
	iv) If there is no nomination and if the Subscriber has left no family to whom should the money be paid? (Enclose Letters of Probate or Succession Certificate)	:	---
	f) Transfer of Balance	:	---
	i) Date of absorption on permanent basis Organization to which transferred / joined on permanent basis	:	---
	Is absorption on permanent basis?	:	---
	ii)Is the absorption with the approval of State Government? If so, details of orders may be furnished?	:	---
	iii) Accounts Officer to whom the balance is to be transferred	:	---
11	Name and Address of Offices served during the last 3 years		

Sl. No	Name of the office	Address	Period of Service	Designation
1				

12	Particulars of Last CPS Deductions:	:	

Sl. No.	Payment for month	CPS Subscription	CPS Arrear	Gross Amount of Bill	Net Amount of Bill	Date of Encashment	Place of Payment	Head of Account	Voucher Number
1	Feb-2017	5290	0	628970	352099	28.02.2017	STO, Vandavsi	2202	2188
2	Mar-2017	3577	0	764503	549645	04.04.2017		2202	2269
3	Apr-17	1213	0	12256	4773	12.07.2017		2202	1259
4	Apr-17 DA	0	185	1851	1666	12.07.2017		22020	1260

13	Period during which subscriber was on EOL / Suspension or any other leave period during which no subscription was recovered	:	---
14	Whether a Self Drawing Officer Drawing Pay in the Scale of Pay of	:	---
	If Yes		
	a) Treasury / PAO at which CPS payment is desired	:	1607, Sub Treasury, Vandavasi, Tiruvannamalai Dist.
	b) Enclose the following	:	
	i) Personal Marks of Identification	:	
	ii) Specimen Signature or left/right hand thumb and fingers impression	:	
17	I hereby undertake that I will not claim any further due for pension / family pension settlement / benefits in future under Contributory Pension Scheme		
18	I hereby undertake to refund any excess payment arising out of clerical errors in the settlement of C.P.S. claims.		

Station : Signature of the Claimant

Date : (S.RAJENDIRAN)

FOR THE USE BY HEAD OF OFFICE / DEPARTMENT

Certified that all the particulars furnished above have been fully verified with reference to office records and are found correct.

Station : Signature of Head of Office

Date : G.HEMALATHA

mDg;Gjy;

Ñœek©o »uhk«
tªjthÁ t£l« - 604501

ngWjy;

jiyikahÁça® mt®fŸ
muR nkšãiy¥ gŸë
bjŸshW

m«ikp®

bghUŸ : vdJ kf‹ ---------- KJfiy MÁça®(jäœ) v‹gh®
Ïwª Jé£likahš- gq;fspg;G Xa;T+jpa epjp (CPS) vz; :
7247112/ EDN fzf;F Kbj;J ,Ug;G njhifia toq;f gzpe;J Ntz;Ljy; rhu;ghf.

ghu;it : murhiz gyif vz; : 59 epjp **[PGC]** Jiw ehs; : 22.02.2016

vdJ kf‹ ----------, ---------- Kjš KJfiy jäHhÁçauhf bjŸshW muR nkšãiy¥ gŸëæš gâah‰¿ tªjh®. flªj 10-04-2017 m‹W vÂ®ghuhjéjkhf rhiy ég¤Âš kuzkilª Jé£lh®. mt® gâah‰¿a fhy¤Âš ---------- v‹w fz¡F v©âš g§fë¥ò XŒñÂa Â£l¤Âš(CPS) bjhif khjªnjhW« brY¤Â tªJŸsh®. j‰nghJ tH§f¥g£LŸs gh®itæš fhQ« murhizæ‹go vdJ kfå‹ g§fë¥ò XŒñÂa Â£l fz¡if Ko¤J cça bjhif tH§f Mtz brŒÍkhW j§fis gâÎl‹ nt©L»nw‹

,q;qdk;
jq;fs; cz;ikAs;s

,lk; :
ehs; :

,izg;G: -

1. G+u;j;jp nra;j cupa tpz;zg;g gbtk;
2. 2017-2018 Mk; Mz;bd; fzf;F Kbj;j mwpf;if

From	To
GOVT. HR. SEC. SCHOOL, THELLAR VANDAVASI TALUK TIRUVANNAMALAI DIST 604406	THE PRINCIPAL SECRETARY / COMMISSIONER OF TREASURIES AND ACCOUNTS OFFICE OF THE COMMISSIONER OF TREASURIES AND ACCOUNTS (CPS CELL) KOTTURPURAM, CHENNAI 600 025,

RC. NO. /2018 DATED : .2018

Sir,

Sub : Final Settlement of the Contributory Pension Scheme (CPS) to ----------, P.G. Assistant (Deceased). HEADMASTER, GOVT. HR. SEC. SCHOOL, THELLAR, VANDAVASI TALUK, TIRUVANNAMALAI DISTRICT Sanctioned Order – Reg.

Ref: 1. G.O.Ms.No. 59/Finance (Pension) Department/ Dated. 22.02.2016.
2. Govt. Letter No. 185[S(E)]/Fin (PGC) / 2016-1, Dated . 01.04.2016
3. CPS Subscriber's Nominee Sri. S. RAJENDIRAN, CPS NO. 7247112/EDN Application Dated : .2021

****

I am submit necessary action to R. JAYAPRAKASH the particulars in respect of whom are furnished below has retired / proceeded on leave preparatory to retirement / been dismissed / beed discharged / resigned with effect from on 31.07.2013 the below particulars furnished have been duly verified & correct.

1	Name of the CPS subscriber	:	
2	CPS Account Number allotted to the subscriber with departmental suffix	:	
3	Post held by the subscriber / Department	:	P.G. Assistant (Deceased)
4	Date of Birth of the subscriber	:	SCHOOL EDUCATIONAL DEPARTMENT
5	Date of the Superannuation	:	
6	The payment is desired sub-Treasury	:	**1607-SUB-TREASURY,VANDAVASI-604408**
7	The payment is desired District-Treasury	:	TIRUVANNAMALAI DISTRICT
	CPS last fund deduction was made from pay in this office Bill No. 25 Gross and Net amount of the bill	:	
	Date of Encashment	:	
	Voucher Number & Dated	:	
	Name of the Drawing officer Whom the CPS claim's	:	HEADMASTER GOVT. HR. SEC. SCHOOL, THELLAR VANDAVASI TALUK TIRUVANNAMALAI DIST 604406
	Residential Address for Subscriber	:	NO. 234, NADU STREET, KILNAMANDI VILLAGE VANDAVASI TALUK TIRUVANNAMALAI DIST 604501

I request that Contributory Pension Scheme Final Settlement with drawal Sanctioned Order sent by this Office, may kindly final settlement sanctioned order may be issued at an early date.

Enc : 1. Application for final settlement (Annesure-I) in 3 Copies
2. Service Register of the Subscriber
3. Legal Here Certificate

GOVT. HR SEC. SCHOOL,
THELLAR

APPLICATION FOR FINAL SETTLEMENT OF CONTRIBUTORY PENSION SCHEME ACCOUNT

From,

VANDAVASI TALUK,
TIRUVANNAMALAI DIST.
PINCODE: 604501.

To,

The Principal Secretary / Commissioner
of Treasuries and Accounts
office of the Commissioner of Treasuries and Accounts
(CPS CELL)
Kotturpuram, Chennai - 600 025, Tamil Nadu.

Through : - Proper Channel

Sir,

Sub :- Final Settlement of the Contributory Pension Scheme (CPS) Sanctioned Order – Reg.
Ref : - 1. G.O.MS.No.59/Finance (Pension) Department / Dated : 22.02.2016.
2. Govt. Letter. No. 185[S(E)]/Fin (PGC) / 2016-1, Dated : 01.04.2016
3. CPS Account Number : 7247112/EDN

****

With reference to I request that arrangements may kindly be made for the payment of accumulations in the Contributory Provident Fund Account of R. JAYAPRAKASH, Connection are given the necessary particulars required in this connection are given below.

1	Name of the CPS subscriber	:	
2	CPS Account Number allotted to the subscriber	:	
3	Post held by the subscriber / Department	:	P.G. Assistant (Deceased)
4	Date of Birth of the subscriber	:	10-06-1988
5	Date of the Superannuation / Dismissed		10-04-2017 (Death)
6	Payment claim's Drawing officer/Office Address		HEADMASTER GOVT. HR. SEC. SCHOOL THELLAR VANDAVASI TALUK TIRUVANNAMALAI DIST 604406
7	The payment is desired sub-Treasury		1607-Sub Treasury, Vandavasi
8	The Payment is desired District-Treasury		Tiruvannamalai

Station : KILNAMANDI

Your's Faithfully

Date :

Signature of Claimants