

UNIVERSITY OF ENGINEERING & TECHNOLOGY, PESHAWAR

NOTIFICATION

No. 217/25/1/Estt-I/Vol-V

Dated 24/5/2023

In pursuance of adoption of Government of Khyber Pakhtunkhwa, Civil Servants Pension Rules, 2021 for University employees by the Syndicate in its 127th meeting held on 18th & 19th June 2022, the Vice Chancellor is pleased to approve the specimen of "Indemnity Bond" and "Undertakings" related to University pensioners (Copies enclosed).

Further, all pensioners of the University are requested to fill "Indemnity Bond" and "Undertaking" on Judicial stamp paper (duly attested) and submit to the Pension Section, UET Peshawar within one month positively.



Establishment Officer-II

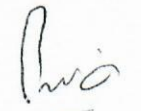
No. 4628-32/25/1/Estt-I/Vol-V

Copy to: -

1. The Treasurer, UET Peshawar
2. The Supdt: Pension
3. The P.S to Vice Chancellor
4. The P.S to Registrar
5. The Manager IT Center with the directives to upload the relevant specimens on University website



Establishment Officer-II
University of Engineering
& Technology, Peshawar


23/5/23

o/c

UNDERTAKING

1. I hereby declare that I am not in receipt of any other pension, military or otherwise except PPO No. _____ dated _____ amount _____ department _____, retired on _____.
2. I do hereby undertake that the pension sanctioning authority may, within one year from the issue of Pension Payment Order, recover any of its dues from the pension granted to me.
3. I hereby declare that I shall not take part in any elections or engage myself in political activities of any kind within two years from the date of retirement.
4. I do hereby declare that I have neither applied for nor received any pension/commutation/gratuity in respect of any portion of the service included in this application and in respect of which pension/gratuity/commutation is claimed herein, nor shall I submit any application hereafter without quoting a reference to this application and to the order which may be passed thereon.
5. I hereby undertake to refund if the amount of pension granted to me afterwards found to be in excess of that to which I am entitled under regulations.
6. I do hereby declare that I have not received any pension or commutation/gratuity in respect of any portion of the service included in this application.
7. I hereby opt for commutation @ _____ (subject to a maximum of 35%) of my gross pension.

DATED _____

NAME AND SIGNATURE OF
RETIRING CIVIL SERVANT
(PENSIONER)

Certificate by the head of department under sub rule (7) of rule 23 of these rules

HEAD OF OFFICE/DEPARTMENT

Note: Pension to be verified by pension sanctioning authority/DDO

Important: Every pensioner/family pensioner is bound to provide life certificate/Non-marriage certificate to his/her bank on or before 10th March and 10th September of each year.

"INDEMNITY BOND"

To

THE MANAGER,

_____ (Name of Bank)

_____ (Branch)

_____ (City)

In compliance with the SBP's instructions for payment of pension through your Bank branch I/we agree to indemnify you and keep you indemnified about liabilities with all sums of money whatsoever including mark-up of my Pension Account. I/we further undertake that my/our legal heirs, successors, executors shall be liable to refund excess amount, if any, credited to my/our Pension Account either in full or in installments equal to such excess amount.

Co-Indemnifier/Nominee/Successor/

Signature _____

Next of Kin: _____

Name of Pensioner _____

CNIC: _____

Date of Retirement: _____

Address: _____

PPO No: _____

Signature: _____

Bank Account No: _____

CNIC: _____

WITNESS - 1

WITNESS - 2

CNIC: _____

CNIC: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Pension Form - I
[see rule 6(1)&(2)]

MEDICAL CERTIFICATE

Certified that I (we) have carefully examined Mr./Mst: _____
Son of/Daughter of _____ working as _____
_____ in the _____ (Department).
His age by his own statement is _____ years.

I (we) consider that Mr./Ms. _____ (name of civil servant) to be completely and permanently incapacitated for further service of any kind (or in the Department to which he belongs) in consequence of _____ (here state disease or cause).

Note: (1) If the incapacity does not appear to be complete and permanent, the certificate should be modified accordingly and the following additional should be made:

I am (we) are of opinion that Mr./Ms: _____ is fit for further service of a less laborious character than that which he has been doing (or may after resting for _____ months, be fit for further service of a less laborious character than that which he has been doing).

(Signature) _____
Name _____
Designation _____
Address _____
Stamp _____

(Signature) _____
(Name) _____
Designation _____
Address _____
Stamp _____

Pension Form -II
[sec rule 15 (11)]

OPTION FOR PENSION

(in case of eligibility for a second pension of a pensioner receiving his own pension)

I, _____ son of/daughter of/wife of _____ retired
as _____ (designation with BPS) on _____ (date of retirement)
from the _____ (department), and drawing pension, of Rs.
_____ Per month from _____ (Name of Bank) _____ (Name of
Branch) _____ (Account No), become eligible for family pension in
respect of my deceased Husband/wife/father/mother _____ (give
relationship) who died on _____. At the time of death, he was working/retired
as _____ (designation with BPS) from _____ (department).

I, therefore, opt to draw the family pension of my
Husband/wife/father/mother _____ Mr. /Ms. _____ and not to
receive my own pension.

It is certified that I am not drawing any kind of other pension

Date _____

(Signature)

Name _____

Address _____

CNIC No. _____

Pension Form – III
[see rule 15(11)]

OPTION FOR PENSION

(in case of eligibility for a second pension of a pensioner already receiving a family pension)

I, _____ son of /daughter of/wife of _____ states that I am receiving family pension of my deceased _____ (give relationship), who was retired as _____ (designation with BPS) from the _____ (department) and died _____, I, become eligible for another family pension of my deceased _____ (give relationship) Mr. Ms. _____ (give name), who has been working/retired as _____ (give designation with BPS) from the _____ (name of department) and died on _____.

I, therefore, opt to receive the pension of my deceased _____ (give relationship) Mr. Ms. _____ (give name).

It is certified that I am not drawing any kind of other pension.

Date

(Signature)

Pension Form - IV
Affidavit

[see Explanation-I under rule 15(11)]

I, _____ (name) _____
C.N.I.C.No. _____ Resident of _____,
husband of Mst: _____ (name of deceased civil servant), who has been
working as _____ (post with BPS) in the
_____ (indicate the name of the office/department, or retired as
from _____ (name of department/office) and has been expired
on _____, do solemnly affirm on oath that I have no source of income nor I am
holding a pensionable post or receiving any other pension. I was residing with and
wholly dependent upon my deceased wife.

Thumb impression _____ (Signature)

Name _____

Father's name _____

Pension Form - V
Affidavit

[see Explanation-I under rule 15(11)]

I, _____ son of/daughter of _____ CNIC
No. _____ Resident of _____

_____ (address),
entitled for family pension of Mr./Mst: _____ (name of deceased civil
servant) who was my _____ (indicate relationship) and has been working
as _____ name of post and BPS _____ or retired as
_____ from the department _____ and has been expired on

_____, do solemnly affirm on oath, that I have no source of income nor I
am holding a pensionable post or receiving any other pension. I was residing with and
wholly dependent upon the deceased.

Thumb impression _____ (Signature)
(Name) _____

PENSION PAPERS

Name: _____

Father/Husband Name: _____

CNIC No: _____

Designation: _____

Department: _____

Personal No: _____

Date of Retirement/Death: _____

For Retiring Pension ✓

Pension Form – VI
[see rule 23(1),(7),(9),(11) & (14)]

APPLICATION /CERTIFICATES TO BE GIVEN BY THE PENSIONER FOR
PENSION/COMMUTATION.

(To be given by retiring civil servant for grant of pension in case of
superannuation/retiring/invalid/compensation/compulsory retirement)

To

Sir/Madam,

It is submitted that I, _____ Son of/daughter of/wife
of _____
Designation/post held _____ BPS _____ (please indicate kind of
appointment i.e. Regular/Officiating or Acting Charge/Current Charge
w.e.f. _____ . CNIC No. _____ (copy enclosed).
Nationality _____ Personnel No. _____ Cell No. _____ Email
_____ Postal address _____

That I have retired/ have been permitted to retire from Government service. I am due to
retire has been retired compulsorily on _____.
My pension/commutation/gratuity may be transferred/ credited by the Accounts Office in
the Bank _____ Branch _____ City _____
Account No. _____ DCS Form (where applicable) and list of my
family members, is enclosed).

UNDERTAKING

1. I hereby declare that I am not in receipt of any other pension, military or otherwise except PPO No. _____ dated _____ amount _____ department _____, retired on _____.
2. I do hereby undertake that the pension sanctioning authority may, within one year from the issue of Pension Payment Order, recover any of its dues from the pension granted to me.
3. I hereby declare that I shall not take part in any elections or engage myself in political activities of any kind within two years from the date of retirement.
4. I do hereby declare that I have neither applied for nor received any pension/commutation/gratuity in respect of any portion of the service included in this application and in respect of which pension/gratuity/commutation is claimed herein, nor shall I submit any application hereafter without quoting a reference to this application and to the order which may be passed thereon.
5. I hereby undertake to refund if the amount of pension granted to me afterwards found to be in excess of that to which I am entitled under regulations.
6. I do hereby declare that I have not received any pension or commutation/gratuity in respect of any portion of the service included in this application.
7. I hereby opt for commutation @ _____ (subject to a maximum of 35%) of my gross pension.

DATED _____

NAME AND SIGNATURE OF
RETIRING CIVIL SERVANT
(PENSIONER)

Certificate by the head of department under sub rule (7) of rule 23 of these rules

HEAD OF OFFICE/DEPARTMENT

Note: Pension to be verified by pension sanctioning authority/DDO

Important: Every pensioner/family pensioner is bound to provide life certificate/Non-marriage certificate to his/her bank on or before 10th March and 10th September of each year.

**PENSION SANCTION ORDER TO BE USED IN CASE OF
SUPERANNUATION/RETIRING/INVALID/ COMPENSATION/COMPULSORY
RETIREMENT.**

(To be issued by the Pension Sanctioning Authority)

Subject: SANCTION OF PENSION OF
SUPERANNUATION/RETIRING/INVALID/COMPENSATION AND
COMPULSORY RETIREMENT.

On attaining the age of superannuation/having applied for retiring/invalid/compensatory pension vide application dated _____ Or has been retired compulsorily vide Notification/Order No. _____ Dated _____ issued by _____ Mr./Miss/Ms: _____ S/O, W/O, D/O _____ Designation _____ drawing pay/emoluments Rs. _____ PM (reckonable towards pension), in BPS _____ on _____ (please indicate nature of appointment i.e. Regular /Officiating/Acting charge /Current charge basis, w.c.f. _____ Personnel No. _____ presently posted as _____, has retired/has been permitted to retire/is due to be retired/has been retired compulsorily from the Government service (tick where applicable) on _____ date, after availing LPR for _____ days/Leave encashment in lieu of LPR Rs. _____.

PENSION CALCULATION.

Gross pension Rs. _____
Commutation Rs. _____
Net Pension Rs. _____

OTHER BENEFITS:

i) _____ Rs. _____
ii) _____ Rs. _____
iii) _____ Rs. _____

1). His/her date of birth is _____ Date of 1st entry into government service is _____ and Extra Ordinary Leave availed _____ days. Total length of qualifying service for pension is _____ years _____ months _____ days _____.

2) Certified that no inquiry is pending against him/her.

3) Certified that no recovery is outstanding against him.

4). Certified that:

(i) Advances drawn (if any) stand fully repaid, along with interest.

(ii) An amount of Rs. _____ on account _____ (HBA/MCA/etc: principal amount along with interest is outstanding which may be recovered from the pension.

5) Anticipatory pension up to (_____ %) of full pension is sanctioned as admissible to him/her.

6). Certified that deficiency/disciplinary/criminal case pending against the aforementioned retired government servant has been finalized. Therefore, final pension payment @ (_____ %) (After adjustment of already paid amount of anticipatory pension) and commutation _____ % of full pension is sanctioned.

7). Undersigned is satisfied that the service of retiring employee has been satisfactory. Administrative and financial sanction for grant of pension/commutation @ _____% up to maximum of 35% of gross pension, if so opted by the retiring government servant, to be determined by the Accounts Office, is here by accorded in favour of Mr./Mrs./Ms. _____ and may be paid through Bank _____ Branch _____ City _____ Account No. _____ (mentioned in DCS Form enclosed) as admissible under the rules.

8). Undersigned is satisfied that the services of Mr./Mrs./Ms. _____ has not been satisfactory and it has been decided that the full pension/gratuity/commutation found to the Accounts Officer to be admissible under the rules should be reduced by the specific amount or percentage given below:

- i) Amount or percentage of reduction in pension _____
- ii) Amount or percentage of reduction in gratuity/commutation _____

Sanction is hereby accorded to the grant of pension/gratuity/commutation as so reduced.

9). The payment of pension and/or gratuity/commutation may commence w.e.f. _____

Following documents attached.

1. Pension application.
2. Notification/Order of retirement.
3. Last Pay Certificate(LPC)/Last Pay Slip
4. Pension contribution certificate in case of foreign service
5. Original Service Book with its attested copy or service statement in case of officers.
6. NOC from Estate Office in case the civil servant was provided government accommodation otherwise a certificate by the civil servant that he has not been provided the government accommodation.
7. Three attested photographs of the pensioner
8. List of dependent family members
9. Specimen signature/ Left and Right hands thumb and finger impressions.
10. Option for commutation.
11. Bank account's details.

SIGNATURE WITH STAMP OF
PENSION SANCTIONING
AUTHORITY/HEAD OF
OFFICE/DEPARTMENT

APPLICATION FOR FAMILY PENSION

(in case of death while in service)

(To be filled in and signed by applicant himself/herself)

To

Dear Sir/Madam

It is submitted that my Husband/wife/Mother/Father/Son/Daughter
(name of the civil servant) working as _____ in the
(name of department) has expired on _____
(Death certificate is attached). I therefore request that the family pension admissible
under the rules may kindly be sanctioned to me.

List of family members is as under:

S.#	Name	Relationship with the deceased	CNIC No.	Age/DoB	Marital status	Any disability

It is hereby informed that my gratuity/commutation/family pension may be transferred/credited by the Accounts Office in the Bank _____
Branch _____ City _____ Account No. _____

(DCS form, where applicable is enclosed).

It is hereby informed that the family member Mr./Miss/ _____ son of/daughter of the deceased is disabled. Disability certificate from the competent authority is enclosed.

The disabled CNIC issued by NADRA for the above disabled child is enclosed.

UNDERTAKINGS

I do hereby undertake that pensioning sanctioning authority may, within one year of pension payment order, recover any of its dues from the pension granted to me.

I do hereby declare that I have neither applied for nor received any family pension or gratuity/commutation in respect of any portion of the service included in this application and in respect of which family pension/ gratuity/commutation is claimed herein, nor shall I submit any application hereafter without quoting a reference to this application and to the order which may be passed thereon.

I hereby undertake to refund if the amount of family pension granted to me afterwards found to be in excess of that to which I am entitled under the regulations.

I do hereby declare that I have not received any family pension or gratuity/commutation in respect of any portion of the service included in this application (in case of anticipatory pension only).

I do hereby declare that neither I nor any of the family members mentioned above are working against any pensionable post in any department/office OR

I do hereby declare that the following members of the deceased family are working against pensionable posts:

S. #	Name	Relationship with deceased	Name of office wherein appointed	Designation with BPS	Date of appointment

I do hereby declare that I am or any eligible member of the deceased family not receiving any kind of pension from Government or a local fund; OR

I do hereby declare that the following members of the deceased family are drawing pension:

S. #	Name	Relation-ship with deceased in this case	Nature of pension being drawing	Amount of pension	Name of deceased in whose case family pension is drawing	Deptt./ office wherein he was working	Relation-ship with deceased

SIGNATURE _____
 THUMB IMPRESSION _____
 NAME OF APPLICANT _____
 CNIC NO _____
 ADDRESS _____
 RELATIONSHIP WITH DECEASED _____

HEAD OF OFFICE/
 DEPARTMENT

Note: Pension to be verified by pension sanctioning authority/DDO.
 Important: Every pensioner/family pensioner is bound to provide life certificate/Non-marriage certificate to his/her bank on or before 10th March and 10th September of each year.

FAMILY PENSION SANCTION

(To be issued by the Pensioning sanctioning authority in the event in-service death of the civil servant)

Subject: SANCTION OF FAMILY PENSION IN CASE OF IN-SERVICE DEATH OF A CIVIL SERVANT

1. It is mentioned that Mr./Mrs./Ms. _____ S/O _____ D/O _____ W/O _____ working as _____ (please indicate the post held and kind of appointment i.e regular/officiating/Acting charge/Current charge _____ in BPS _____ w.e.f. _____ posted in the _____ (please indicate the name of office/department), drawing pay/emoluments (reckonable towards pension) Rs. _____, personal No. _____ CNIC No. _____ has expired on _____ while in service.

2. His/her date of birth is _____. Date of 1st entry into government service is _____. Extra Ordinary Leave availed during service _____. His/her total length of qualifying service for pension comes to _____ years _____ months _____ days.

3. Family pension calculation:

Emoluments last drawn _____
Length of service. _____
Gross Pension of the deceased _____
Family pension @ 75% of gross pension _____
Gratuity @ 1/4th of gross pension. _____

Other benefits

i) _____ Rs. _____
ii) _____ Rs. _____

It is certified that:

4. No inquiry is pending against the deceased civil servant
5. No demand/recovery is outstanding against the deceased.
6. Advances drawn by the deceased (if any) have been fully repaid or waived off.
7. As per record, it is verified that Mr./Mrs./Ms/ _____ CNIC No. _____ is bonafide family member entitled to family pension of Mr./Mrs./Ms _____ (late) and his/her gratuity and family pension may be transferred/credited in Bank _____ Branch _____ City _____ Account No. _____ as opted.
8. Administrative and financial sanction for grant of family pension/gratuity is hereby accorded.

Following documents are attached.

- Pension application along with three attested photographs
- Death certificate.
- Death notification/order
- Last pay certificate
- Pension notification

- Original service book with its attested copy or service statement (in case of Officers.
- NOC from Estate Office in case the civil servant was provided government accommodation, otherwise a certificate by the applicant that the deceased civil servant has not been provided the government accommodation.

The Accounts Office is requested to grant family pension/gratuity and endorse a copy of family pension payment order to this department/office.

SIGNATURE WITH STAMP OF
PENSION SANCTIONING
AUTHORITY /HEAD OF
OFFICE/DEPARTMENT.
Date _____.

Mr./Mrs/Ms _____ . You are hereby informed that your gratuity and first monthly pension shall be transferred/credited by the Accounts Office in the Bank _____ Branch _____ City _____ Account No. _____ as opted by you.

SIGNATURE WITH STAMP OF
PENSION SANCTIONING
AUTHORITY/ HEAD OF
OFFICE/DEPARTMENT
Dated _____.

Important: As per requirements every pensioner is bound to provide life certificate/Non-marriage certificate to his/her bank on or before 10th March and 10TH September of each year.

APPLICATION FOR FAMILY PENSION
(in case of death of pensioner after retirement)
(To be filled and signed by the applicant himself/herself).

To _____

Dear Sir,

It is submitted that my Husband/Wife/Father/Mother/Son/daughter, who has been retired as _____ from _____ (please indicate the name of department), and drawing pension from _____ Bank _____ Branch _____ City, has expired on _____ (date).

2. I, therefore request, that the family pension admissible under the rules may kindly be sanctioned and transferred into my name.

3. It is declared that:

- i) Neither I nor any family member holding any pensionable post in any department/office. OR
- ii) The following members of the family are holding pensionable posts as under:

S.No.	Name of family member	Relationship with the deceased	Post held with BPS	Department/Office

- iii) Neither I nor any family member is drawing any kind of pension from government or local fund. OR

The following members of the family are drawing pension:

S.No.	Name	Relation-ship with deceased in this case	Nature of pension being drawing (Self or family)	Amount of pension	Name of deceased in whose case family pension is drawing	Deptt:/ office wherei n he was work-ing	Relation-ship with deceased

- iv) I have neither received nor applied for any family pension.
- v) Any amount of the family pension granted to me, afterwards found to be in excess of that to which I am entitled under the rules, I hereby undertake to refund any such excess.

- i) he has no source of income and was wholly dependent upon his deceased wife. OR
- ii) (ii) he is applying for family pension of his deceased wife on behalf of children who are minor.
5. The following documents duly attested are attached:
- Three specimen signatures of the undersigned.
 - Three sets of thumb and finger impressions of the undersigned.
 - Three photographs of the undersigned.
 - Three sets of List of particulars of family members of my deceased _____ (indicate relationship with deceased).
 - Three sets of descriptive roll
 - Death certificate
 - Non-marriage certificate
 - Non separation certificate on stamp paper duly attested by the Oath Commissioner.
 - Disability certificate from the District Health Officer or the Medical Superintendent.
 - Three copies of CNIC of the undersigned.
 - In case of widow daughter, Nikahnama and death certificate of her husband.
 - In case of divorced daughter, Nikah name and divorced paper.
 - Option for Direct Credit System (DCS) and Indemnity Bond on stamp paper.

Yours faithfully,
(Signature) _____ (Name)
_____ (Relationship)
with
deceased _____ (widow/husband/son/daughter/father/mother).

FAMILY PENSION SANCTION

(To be issued by the Pension sanctioning authority in the event of death after retirement)

Subject: SANCTION OF FAMILY PENSION IN CASE OF DEATH AFTER RETIREMENT.

1. It is mentioned that./Mrs/Ms. _____ S/O _____
D/O _____ W/O _____ working as _____ (please indicate the post held and kind of appointment i.e regular/officiating/Acting charge/Current charge _____ in BPS _____ posted in the _____ (please indicate the name of office/department), retired on _____ has expired on _____.

2. Family pension @ 75% of net pension, the deceased has been drawing immediately before his/her death is sanctioned in favour of the following family member (s).

S.No.	Name	Age	Relationship with the deceased pensioner	Marital status	Share out of family pension	Any disability

3. Family pension calculation:

Net Pension of the deceased _____
Family pension @ 75% of gross pension _____

Other benefits

i) _____ Rs _____
ii) _____ Rs _____

It is certified that:

4. No inquiry is pending against the deceased civil servant
5. No demand/recovery is outstanding against the deceased.
6. Advances drawn by the deceased (if any) have been fully repaid or waived off.
7. As per record, it is verified that Mr./Mrs./Ms/ _____ CNIC No. _____ is bonafide family member entitled to family pension of Mr./Mrs./Ms _____ (late) and his/her gratuity and family pension may be transferred/credited in Bank _____ Branch _____ City _____ Account No. _____, as opted.
8. Administrative and financial sanction for grant of family pension/gratuity is hereby accorded.

Following documents are attached.

- Pension application along with three attested photographs
- Death certificate.
- Death notification/order
- Last pay certificate
- Pension contribution receipt in case of foreign service
- Original service book with its attested copy or service statement (in case of Officers.
- NOC from Estate Office in case the civil servant was provided government accommodation, otherwise a certificate by the applicant that the deceased civil servant has not been provided the government accommodation.

Dated _____ SIGNATURE WITH STAMP OF _____

POST PENSION LIFE CERTIFICATE

(This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank (pension payment office) in person or through representative or by postal/courier service).

This is to certify that Mr./Mrs/Ms _____
S/O. W/O. D/O _____ retired as _____ from
_____ holder of PPO No. _____

CNIC No. _____ whose specimen signature/thumb impression and
address are appended below is alive till date _____.

Date _____ Pensioner's signature or thumb
impression.

Address. _____

Phone No. _____

Attested by:

Signature _____

Name _____

Designation _____

Address _____

Date _____

CNIC No. _____

Phone No. _____

Stamp _____

Note: This certificate is to be attested by a Gazetted Government officer/Military
Commissioned Officer/MNA/MPA/Bank Manager.

NON MARRIAGE CERTIFICATE

(This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank (pension payment office) in person or through representative or by postal/courier service).

I, _____ Widow/daughter of the deceased
Mr./Mrs/Ms _____, retired as _____ from _____
holder of PPO No. _____ CNIC No. _____ hereby
declare that I have not been married during the last six months.

Date _____

Pensioner's signature or thumb
impression.

Address _____

Phone No. _____

Attested by:

Signature _____

Name _____

Designation _____

Address _____

Date _____

CNIC No. _____

Phone No. _____

Stamp _____

Note: This certificate is to be attested by a Gazette Government officer/Military
Commissioned Officer/MNA/MPA/Bank Manager

SECRETARY TO
GOVERNMENT OF THE KHYBER PAKHTUNKHWA
FINANCE DEPARTMENT.