

**Form No 4**  
**Nomination for Arrears of Pension**  
**[ See Rule 5 (1) of the Payment of Arrears of Pension (Nomination) Rules, 1983 ]**

Pension Disbursing Authority / Head of Office  
 (Name of Bank / Treasury / Post Office / Accounts Officer, etc)  
 Place \_\_\_\_\_

I, \_\_\_\_\_ hereby nominate the person named below under Rule 5 of the Payment of Arrears of Pension (Nomination) Rules, 1983.

Name and address of the nominee	Relationship with the pensioner	If nominee is minor		Name and address of other nominee in case the nominee under column (1) predeceases the pensioner	Relationship with the pensioner	Date of Birth if the other nominee is minor	Name & address of person who may receive the pension during the other nominee's minority.	Contingency on the happening of which nomination shall become invalid
		Age	Name and address of person who may receive the said pension during the nominee's minority.					
1	2	3	4	5	6	7	8	9

**Place:** \_\_\_\_\_  
**Date :** \_\_\_\_\_

**Signature (or thumb-impression if illiterate)** \_\_\_\_\_  
**Name of the Pensioner** \_\_\_\_\_  
**Address** \_\_\_\_\_

Witness : Signature : \_\_\_\_\_  
 Name & Address \_\_\_\_\_

Signature of Pension Disbursing Authority / Head of Office  
 Acknowledgement to be sent by the Pension Disbursing Authority / Head of Office

Certified that application / nomination has been received from \_\_\_\_\_ whose address is \_\_\_\_\_  
 \_\_\_\_\_

**Place** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Signature of Pension Disbursing Authority** \_\_\_\_\_  
**Bank/ Treasury / Post Office / Accounts Officer** \_\_\_\_\_  
**Head of Office** \_\_\_\_\_  
**Full Address** \_\_\_\_\_

**Form No 5**  
**( Revised ) Nomination for Arrears of Pension**  
**[ See Rule 5 (5) of the Payment of Arrears of Pension (Nomination) Rules, 1983 ]**

Pension Disbursing Authority / Head of Office  
 (Name of Bank / Treasury / Post Office / Accounts Officer, etc)  
 Place \_\_\_\_\_

I, \_\_\_\_\_ hereby make the following alternate nomination in cancellation of the previous nomination made on \_\_\_\_\_ under Rule 5 of the Payment of Arrears of Pension (Nomination) Rules, 1983.

Name and address of the nominee	Relationship with the pensioner	If nominee is minor		Name and address of other nominee in case the nominee under column (1) predeceases the pensioner	Relationship with the pensioner	Date of Birth if the other nominee is minor	Name & address of person who may receive the pension during the other nominee's minority.	Contingency on the happening of which nomination shall become invalid
		Age	Name and address of person who may receive the said pension during the nominee's minority.					
1	2	3	4	5	6	7	8	9

**Place:** \_\_\_\_\_  
**Date :** \_\_\_\_\_

Witness : Signature : \_\_\_\_\_  
 Name & Address \_\_\_\_\_

**Signature (or thumb-impression if illiterate)** \_\_\_\_\_  
**Name of the Pensioner** \_\_\_\_\_  
**Address** \_\_\_\_\_

**Signature of Pension Disbursing Authority** \_\_\_\_\_  
**Date Stamp :** \_\_\_\_\_

Certified that application / nomination (Form B ) has been received from \_\_\_\_\_ whose address is \_\_\_\_\_  
 \_\_\_\_\_ Form 'A' has been cancelled and returned to him.

**Place** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Signature of Pension Disbursing Authority** \_\_\_\_\_  
**Bank/ Treasury / Post Office / Accounts Officer** \_\_\_\_\_  
**Full Address** \_\_\_\_\_

