



PBGB



PASCHIM BANGA GRAMIN BANK
HEAD OFFICE: Natabar Paul Road,
Chatterjee Para More, Tikiapara,
Howrah- 711 101, Phone No.: 18003450222

REF. NO.:- PBGB/HO/GM(PAD)/348/2024-25

DATED:- 23.09.2024

EXTENSION OF DATE FOR SUBMISSION OF OPTION FORM

1. This has reference to the implementation of pension option in respect of legal heirs of deceased staff members who died in harness, compulsorily retired staff members, resignee staff members, dismissed staff members, legal heirs of deceased staff members whose services has been terminated on account of compulsory retirement/resignation and or dismissal prior to 01.04.2018 and who are not drawing any pension in terms of PBGB Pension Regulations, 2018, shall exercise their option for claiming of pension, in accordance with the directions of Hon'ble Supreme Court of India passed in Contempt Petition No. 1798 of 2018, on or before 30.09.2024.

2. With respect to the payment of arrears of pension, to, those retired staff members who superannuated from service prior to 01.04.20218 and are currently being covered under the PBGB Pension regulations, 2018; the legal heirs of retired staff members who, are currently drawing family pension on and from 01.04.2018, shall also exercise their option for claiming of pension, in accordance with the directions of Hon'ble Supreme Court of India passed in Contempt Petition No. 1798 of 2018, on or before 30.09.2024

A.K.MURMU
GENERAL MANAGER

PLACE:- HOWRAH
DATE:- 23.09.2024



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ANNEXURE- 1

STANDARD OPERATING PROCEDURE

Action Points:- (By Applicant)

The Resignees' / Compulsorily Retired/Dismissed/ Eligible Family members (in case of death of the Resignee) to visit any Branch of PBGBank within the five districts of West Bengal, from where they wish to draw pension (if sanctioned) and submit the Pension Option, Undertaking along with following documents, as the case may be i.e. self-pension / family pension within 25.09.2024

LIST OF DOCUMENTS IN CASE OF SELF PENSION:

- a) Documentary evidence Of Employee Number OR Employee ID Card issued by Bank.
- b) Option cum Application Form (ANNEXURE-2)
- c) Undertaking (ANNEXURE-3)
- d) Identification Form (ANNEXURE-4)
- e) Pay details of resignee employee of last 10 months (ANNEXURE-5)
- f) Nomination for Pension dues (ANNEXURE -7)
- g) Letter undertaking by resignee staff to repay excess payments made (ANNEXURE-8)
- h) Copy of KYC Documents including PAN of the applicant
- i) Savings Account (proposed for availing pension) to be invariably maintained with PBG Bank.
- j) Details of Bank's Contribution to PF (along with accumulated interest thereon received at the time of resignation from service or later duly supported by documentary evidence.
- k) At least one Pay Slip not more than 0 months old from the date of resignation.



LIST OF DOCUMENTS IN CASE OF FAMILY PENSION:

- a) Documentary evidence of Employee Number of Resignee staff OR Employee ID Card of Resignee / Compulsorily Retired/Dismissed staff issued by Bank.
- b) Family Pension Option cum Application Form (ANNEXURE-6)
- c) Nomination for Pension dues (ANNEXURE-7)
- d) Letter of undertaking by Family Pensioner to repay excess payments made (ANNEXURE-8)
- e) Declaration regarding non-marriage / remarriage by family pensioner (ANNEXURE-9) Bank's Provident Fund (PF) contribution received at the time of resignation service duly supported by documentary evidence.
- g) At least one Pay Slip not more than 10 months old from the date of resignation.
- h) Death Certificate of Resignee Staff
- i) KYC Documents including PAN Card of family pensioner.
- j) Savings Account (proposed for availing family pension) to be invariably maintained with Paschim Banga Gramin Bank.
- g) In case of Family Pension applied by Child / Disabled Child — Along with above documents, following additional documents to be submitted:-
 - I. Death Certificate of Resignee/ Compulsorily Retired/Dismissed Staff
 - II. *Death Certificate of Spouse of Resignee / Compulsorily Retired/Dismissed Staff.*
 - III. *Legal heir certificate of Resignee/ Compulsorily Retired/Dismissed staff* issued by competent authority along with KYC documents of all such legal heirs.
 - IV. In case of disabled child - Disability certificate of child (Not more than 03 years old).
 - V. Declaration for non-employment by family pensioner (child) or Income Certificate

The Resignees'/Compulsorily Retired/Dismissed/eligible family members to submit dully filled and signed Annexures (complete in all aspect) along with set of mandatory



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documents as mentioned above in quadruplicate (4) in original with any Branch of Paschim Banga Gramin Bank within the five district of West Bengal(Howrah, Hooghly, Birbhum , Purba and Paschim bardhamman) from where they wish to draw pension (if sanctioned).

Action Points:-(By HO-PAD)

On receipt of Resignee Pension Option form from resignee/ Compulsorily Retired/Dismissed staff at HO-PAD the claim documents will be scrutinized and HO-PAD will convey the following:

a) In case of sanction-

i. The sanction letter will be conveyed mentioning the details of Bank's PF contribution amount (along with accumulated interest thereon) received by them at the time of their resignation or later to be refunded in Pension Trust Account for joining the Pension Option Scheme from the date of retirement.

ii. Subsequent to sanction, wherein the resigned staff / family member refuses to deposit the Bank's PF contribution amount. the same shall be obtained in whiting and refusal letter shall be enclose via return mail for intimation to our department under copy to respective RO.

iii. Once the refusal for Pension Option received at HO-PSD, no request shall be entertained for re-consideration of request.

b) In case of rejection-

In case of rejection the same will be conveyed to resignee/ Compulsorily Retired/Dismissed applicant / family pensioner applicant under proper acknowledgement.

NOTE - Only on receipt of confirmation from HO-PAD and fulfilment of other terms and conditions shall be treated as Opt for Pension.

Release of Pension:-

Upon approval by the competent Authority and fulfilment of other terms and conditions, Pension Cell, HO-PAD will finalize the pension claim and the pension will be paid prospectively from the month following the month in which the Bank receives the Bank's contribution towards Provident Fund (along with accrued interest thereon) refunded by resigned staff/ Family members.

Note-

i. Pension shall be computed as per the applicable provisions of the Pension Regulations, as applicable to relevant Bi-partite settlement/ Joint Note in which he/she resigned and,

ii. The commutation of pension will not be extended to them and they will not demand in terms of Settlement.

For any clarification in SOP / Guideline / Scheme - Branches / Zonal Office should contact :-

Head Office, Pension Cell in Charge, Chief Manager-
ho.pad@pbgb.co.in and ho.pension@pbgb.co.in



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ANNEXURE-2

OPTION CUM APPLICATION FORM

(Where the Ex-Staff is alive)

To
The Trustees,
PBGB Bank Employees' Pension Fund Trust
Howrah

**JOINT PHOTO OF PENSIONER
SPOUSE**

Photo to be sealed and signed by Branch

REG: APPLICATION FOR PENSION

I, _____ (Name of the Employee) Emp No. _____
resigned/compulsorily retired/dismissed from the Bank's services w.e.f. _____.

I opt to draw my pension through Branch mentioned below. The necessary particulars are furnished below:

A- PERSONAL DATA:		
1.	EMPLOYEES P.F. NO as per PF statement	
2.	FULL NAME (in capital letter) as per PF statement	
3.	FULL NAME (in capital letter) as per PAN CARD	
4.	FATHER/HUSBAND NAME:	
5.	GENDER	
6.	DATE OF BIRTH: (DD/MM/YYYY)	
7.	DATE OF JOINING BANK'S SERVICE	
8.	DATE OF Reliving from Bank's Service	
9.	MODE OF RETIREMENT	





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10.	a.	Designation at the time of Resignation/Dismissal/Compulsory Retirement)			
	b.	Scale/Grade			
11.	In case of Sub-Staff		Details as under		
	a.	Joined bank as (tick of appropriate box)	Office Attendant (Multipurpose)		
	b.	Date of Joining Provident Fund			
12.	Personal Identification Marks:				
13.	Last Place of Posting	NAME OF BRANCH/OFFICE /DEPT	SOL ID	NAME OF REGION	
14.	Present Address				
			City		
			District		
			State	Pin	
	Permanent Address				
			City		
			District		
			State	Pin	
15.	Communication Details		Mobile No.		
			E-Mail ID		
16.	Branch from where Pension Payment is desired	NAME OF BRANCH/OFFICE /DEPT	SOL ID	NAME OF ZONE	
17.	SAVINGS Account No maintained with PASCHIM BANGA GRAMIN BAN designated for credit of Pension				





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18.	Total Number of Days of Loss of pay Leave Availed throughout the career. (Please give year-wise details from the beginning)			
19.	Suspension period (if any)	From	To	No of Days
20.	Details of Bank's PF received, any	Amount in Full:		
		Date of Received:		
B: PERSONAL DATA OF SPOUSE				
21.	a) Full Name			
	b) Gender;			
	c) Date of Birth:			
	d)Address			
	e) Mobile No.			
	f) E-Mail Id:			
22.	Identification Marks			





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C. DETAILS OF CHILDREN : (in Descending order of age)

SN	Name of the Child	Relationship	Date of Birth	Occupation	Income p.m.	Disability type (if any)	Disability % (any)
1							
2							
3							
4							

I hereby declare that the above information is true and correct. I undertake to produce necessary documentary evidence, if required by the Management.

PLACE:
DATE:

**SIGNATURE OF RESIGNED EMPLOYEE/COMPULSOR
RETIRED/DISMISSED**

NAME:-
EMP No-





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ANNEXURE-3

To
The Trustees
PBGB Employees Pension Fund Trust
Howrah

UNDERTAKING

Sub:- Exercise of option for Pension in terms of the direction of Hon'ble Supreme Court of India in Contempt Petition No. 1798 of 2018

In accordance with the direction of Hon'ble Supreme Court in Contempt petition No. 1798 of 2018 and subsequent direction from NABARD, an announcement for exercising an option has been made by the Bank on _____ and I am eligible for exercising the option for pension as I satisfy all the conditions stipulated in the above mentioned directions, which also require that I have to submit an undertaking for exercising the option and hence I am submitting the undertaking as under:

1. I hereby unequivocally and unconditionally agree to withdraw any pending legal proceedings initiated by me either individually or along with others where in my right, to opt for pension, though I had resigned from the services of the Bank, is directly or indirectly one of the issues for consideration by the concerned court or Authority, having jurisdiction and powers to adjudicate or decide such issue and take necessary steps to ensure that I cease to be party to such pending proceedings and my right, to opt for pension is no longer Res Integra in such proceedings and also agree not to initiate any proceedings concerning such right in future.
2. In the event of the breach of the undertaking on my part the Bank shall be entitled to suspend payment of pension until I submit necessary evidence to establish that I have complied with the undertaking.

Yours faithfully

Signature:-

Name in Full:-

Staff Id:-

PPO No.:-



NOTE:- Additions/alternations in the text of the above form will render the option invalid.



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ANNEXURE-4

IDENTIFICATION FORM

1.	NAME			
2.	EMP NO.			
3.	DESIGNATION AT THE TIME OF RESIGNATION/COMPULSORY RETIREMENT/DISMISSAL			
4.	LAST OFFICE WORKED WITH	BRANCH	SOL ID	Region
5.	GENDER			
6.	IDENTIFICATION MARK			
7.	PRESENT ADDRESS	City		
		District		
		State	Pin	
	PERMANENT ADDRESS	City		
		District		
		State	Pin	
8.	PAN NO.			
	AADHAR NO.			
9.	PHOTOGRAPH (JOINT WITH SPOUSE, IF ALIVE) (Photograph should bear the signature & seal of the Branch Manager) If spouse not alive, Attach Death Certificate (duly attested)	AFFIX PHOTO HERE		
10.	SPECIMEN SIGNATURE			
11.	LEFT/RIGHT HAND THUMB IMPRESSION OF THE EMPLOYEE (in case illiterate applicant)			





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12.	DATE		
VERIFIED BY (BRANCH HEAD)			
Signature		Name	
Designation		EMP ID	
SOL ID			



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ANNEXURE-5

PAY DETAILS

Statement of Salary of Resigned/Compulsorily Retired/Dismissed Employees drawn in the last 10 months of Service

S. No.	Month & Year	Basic Pay	Officiating	Spl. Pay (Excluding DA)	PQP	FPP	Total	Remarks (if any)
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								

I hereby declare that the above information is true and correct. I undertake to produce necessary documentary evidence, if required by the Bank.

PLACE:
DATE:

**SIGNATURE OF RESIGNED EMPLOYEE/COMPULSORI
RETIRED/DISMISSED**

NAME:-
EMP No-





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ANNEXURE-6

FAMILY PENSION OPTION CUM APPLICATION FORM

(PLEASE FILL UP IN BLOCK CAPITALS)

PHOTO OF THE
APPLICANT

To
The Trustees
PBGB Employees Pension Fund Trust
Howrah

REG:- APPLICATION FOR FAMILY PENSION

I _____ hereby inform you that Sri/Smt _____ Employee No. (as per the PF Statement) _____ who was working as _____ (Designation) at _____ Branch/Office resigned/retired/compulsorily retired/dismissed on _____ and expired on _____. As on 01.11.1993 Sri/Smt _____ was in the service of the Bank. I being the Spouse/Family Member of the Deceased employee, I opt for Bank's pension Scheme .

I opt to draw my pension through Branch mentioned herewith and my particulars for payment of family pension are furnished below:-

SECTION A: PERSONAL DATA OF THE DECEASED RESIGNEE					
1.	Employee ID/PF No.				
2.	Employee Name in Full				
3.	Employee's Father's /Husband's name				
4.	Employee Gender				
5.	Employee's Cadre/Scale/Designation	Cadre (Tick mark relevant option)	Office Attendant (Multipurpose)	Office Assistant (Multipurpose)	Officer
		Designation			
		Scale (in case of Officer)			



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12.	Income Details	Monthly Income		
		Source of Income		
13	Present Address	City		
		District		
		State	Pin	
	Permanent Address	City		
		District		
		State	Pin	
14.	If the applicant is a minor, furnish the additional details:	a.	Date of Birth of Minor	
		b.	Date of attaining majority	
		c.	Name of the Guardian	
		d.	Relationship with the Minor	
		e.	Birth Certificate copy of minor applicant to be enclosed	
15.	Branch from where Pension is desired	Name of the Branch/Office/Dept	Name of the Zone	
16.	Savings Account no. maintained with PBG Bank (designated for credit of pension)			

C. DETAILS OF CHILDREN: (IN DESCENDING ORDER OF AGE)

SN	Name of the Child	Relationship	Date of Birth	Occupation	Income P.M	Disability type (If any)	Disability % (If any)





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ANNEXURE -7

PENSION NOMINATION FORM

To
**The Trustees,
PBG Bank Employees' Pension Fund Trust
Howrah**

I _____ hereby nominate and appoint the following person/s to be my nominee/s under the Pension Fund rules.

Names of Nominee /s (in block letters)	Relationship with Pensioner/ Family	Age	Percentage of share of amount
IN CASE THE NOMINEE IS A MINOR GIVE:			
Natural Guardian's Name:			
Guardian's relationship with the minor nominee:			

Place:
Date

SIGNATURE / THUMB IMPRESSION OF THE APPLICANT

DECLARATION BY WITNESSES (required in case of Thumb Impression) We declare that the nomination has been signed/thumb impressed before me/us.

	1 ST WITNESS	2 ND WITNESS
NAME		
SIGNATURE		
DESIGNATION/ADDRESS		





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ANNEXURE-8

LETTER OF UNDERTAKING TO REPAY EXCESS PAYMENTS MADE

To
The Trustees.
PBGB Employees Pension Fund
Trust, Howrah

Dear Sir/Madam,

Reg: EXCESS PAYMENTS MADE TO ME

I hereby authorize you to debit my SB A/c No. _____
Or alternatively recover from my future pension the amount of excess payments made to
me (if any) while disbursing pension.
Thanking you,

Yours faithfully

Signature of Pensioner / Family Pensioner

applicant Name:-

EMP No:-

ACCOUNT NO:-



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ANNEXURE- 9

Declaration regarding Non-marriage / Re-marriage to be submitted by Surviving spouse / Unmarried Daughter / Son (To be used in case of Family Pension)

The Branch Manager

_____ Branch

I am / will be drawing Family Pension through your Branch. As required under the PBG Bank (Employees') Pension Regulations, 2018 (As amended), I hereby declare that, I am not married/re-married till date. Further, in case I get married/remarried at any future date, I undertake to advise you / the Pension disbursing Branch immediately.

Signature/ _____
Thumb Impression

Place:

Date:

Certificate from Branch Officer

I hereby certify that to the best of my knowledge and belief the above declaration made by _____ is correct.



Signature of Bank Officer
with EMP No. _____

Name:

Designation:

Date:

PASCHIM BANGA GRAMIN BANK HEAD OFFICE			
I. LIFE CERTIFICATE OF STAFF PENSIONER			
Certified that I have seen the pensioner Sri / Smt (Name of the Pensioner) holder of Pension Payment Order No and that he / she is alive on this date. His/Her present address is:..... Phone No.....			
Place:	Name	Seal of Branch	
Date:	PBG Bankbranch		
	Seal of the Chief Manager/Senior Manager/Manager		
II . NON-EMPLOYMENT CERTIFICATE			
I declare that I have not received any remuneration for serving in any capacity in an establishment of the Central Government or a State government or a Union Territory of a Government Undertaking of a local Fund during the period November to April...../ May to October.....			
I declare that I have not been employed / re-employed			
I have been employed /re-employed in the Office of.....and received the following emoluments during the period.....within the said year.			
I declare that I have accepted Commercial employment after obtaining / without obtaining sanction of the Bank.			
I declare that I have / have not accepted any employment under the Government outside India after obtaining / without obtaining sanction of the Bank. (Delete whichever of the above is Not Applicable)			
Place:	Name of the Pensioner:.....	<i>Signature</i>	
Date:	On the left column please Mark X or ✓ where applicable		
III. CERTIFICATE OF RE-MARRIAGE / NON MARRIAGE:			
I hereby declare that I have not been married / remarried during the past six months.			
Place:	Name of the Pensioner	<i>Signature</i>	
Date:		
I CERTIFY that to the Best of my Knowledge and Belief that the above declaration is correct.			
Place:	Name of the Pensioner	<i>Signature</i>	
Date:		
ACKNOWLEDGEMENT			
We hereby acknowledge receipt of Life Certificate of Sri.....Staff Pensioner Smt / Sri..... Family Pensioner holding Pension Payment Order No on(Date)			
Signature of authorised Bank Officer.....		SEAL OF THE BRANCH	
Name of the Branch with Seal.....			
Date:.....			





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STANDARD OPERATING PROCEDURE

Action Points:- (By Applicant)

With respect to the payment of arrears of pension, to, those retired staff members who superannuated from service prior to 01.04.20218 and are currently being covered under the PBGB Pension regulations, 2018; the legal heirs of retired staff members who, are currently drawing family pension on and from 01.04.2018, shall also exercise their option for claiming of pension, in accordance with the directions of Hon'ble Supreme Court of India passed in Contempt Petition No. 1798 of 2018, on or before 30.09.2024.

The documents that needs to be submitted by those retirees are as under:-

1. Annexure -11
2. Annexure -12



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ANNEXURE-11

To
The Chief Manager(PAD)
Paschim Banga Gramin Bank
Head Office
Howrah

Dear Sir,

Sub:- Particulars of outstanding liabilities of Shri/Smt _____
EMP No. _____ PPO No. _____

I/We _____, (in case of deceased staff name of legal heirs of Sri/Smt _____ should be mentioned) staff id _____ PPO No. _____, last designation _____, am furnishing herewith the particulars of my/his current outstanding liabilities with _____ Branch.

I further declare that my date of superannuation is _____

We further declare that Sri _____ (since deceased) expired on _____ i.e prior to 01.04.2018.

Particulars of outstanding loan	Account no.	Balance (in Rs.) with upto date interest
1. House Building Loan, wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
2. Housing Loan (Commercial Scheme), wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
3. Staff Over draft, wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
4. Fectival Advance, wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
5. Education Loan (in the capacity of co-borrower), wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
6. Conveyance Loan, wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
7. Others, if any (Mention details) wherein the retiree is either a borrower/co-borrower/guarantor(whether availed prior to/after retirement)		
	TOTAL	Rs.

Yours faithfully

Signature retired/compulsorily retired/
dismissed/legal heir of deceased staff member

EMP NAME:- _____

EMP No. _____

PPO No. _____



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ANNEXURE-12

IRREVOCABLE AUTHORISATION TO RECOVER OUTSTANDING LIABILITIES

NJS Rs. 100

To
The Branch Manager
_____ Branch
Paschim Banga Gramin Bank
At _____

Dear Sir/Madam,

Sub:- Irrevocable Authorisation

I/We, _____, S/D/W/o _____, (Pan NO. _____)
and Sri/Smt _____, S/D/W/o _____ (PAN
No. _____) jointly residing
at _____

_____ solemnly declare and state as follows:-

1. That we _____ along with _____, availed one _____ (describe the nature of loan) vide Loan A/c No..... from Branch of Paschim Banga Gramin Bank on..... vide sanction advice no. _____ dated _____
2. That the aforementioned loan account has been availed for a period of _____ years, commencing on and from _____ till _____.
3. That as on date _____ an amount of Rs. _____ is due and outstanding together with unapplied interest.
4. That, I/We through this irrevocable authorization in favour of the Bank, hereby authorizes Bank to recover in full either in lump sum or in equated monthly installments the outstanding liabilities together with unapplied interest, outstanding principle amount, unapplied interests from my pension payable account no. _____/commutation benefits/ex gratia/arrears accrued there under or which may be accrued and or due at any point of time without any further intimation to me/us.
5. . I/We further confirm that I/we shall maintain sufficient balance in the account designated by us for the purpose of recovery of dues, failing which Bank shall be at liberty to proceed against me in accordance with law. I



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hereby authorize PBGBank to raise a further demand on above account from my Pension Payable Account no.....till the payments for that month is realized.

6. I/We undertake to ensure that in the event NACH/ECS mandate is dishonored for insufficient fund or it exceeds the amount arranged to be paid from that account by an agreement made with a Bank, PBGBank shall be at liberty to invoke the provisions of The Payment & Settlement Systems Act, 2007 or may be at liberty to recover the said outstanding due for the month from the Pension Payable Account No.....

7. I/We further declare and state that I/we shall not challenge the recovery before any Court of Law and if I/We do so, Bank shall be at liberty to proceed against us through appropriate forum in accordance with law, at my/our cost and expenses.

We further declare the statements made herein are true to knowledge and belief and without any element of undue influence or coercion and shall not be revoked and or diminished by the death and or disability of either parties.

Thanking You

Yours faithfully

_____ (To be signed by the account holder(s) whose account will be debited- Signature should match in both the places)

Details of Account to be debited:-	
Name of First Holder:- _____	Signature _____
Name of Second Holder:- _____	Signature _____
SB Account No.:- _____	
Branch:- _____	
Region:- _____	