



र्यालय प्रधान महालेखाकार (लेखापरीक्षा) असम, बेलतला, गुवाहाटी-29  
OFFICE OF THE PRINCIPAL ACCOUNTANT GENERAL (AUDIT), ASSAM,  
BELTOLA, GUWAHATI -29



CIRCULAR

No.Admn./Estt.-I/Audit/28

Date 03/9/2021

In pursuance of Headquarter office letter No.106-Staff Entt.(Rule)/A.R./17-2011 dated 11/05/2021 and in accordance with Central Civil Services (Implementation of National Pension Scheme) Rules, 2021, all the officers/officials covered under NPS are requested to exercise the option in the prescribed **Form 1** (enclosed) to avail benefits under the NPS or under the CCS (Pension) Rules, 1972 or the CCS (Extraordinary Pension) Rules, 1939 in case of his/her Death or Discharge on invalidation or disability during service. Further, they are also requested to furnish the details of family in prescribed **Form 2** (enclosed) latest by **17 SEPTEMBER 2021** to **Establishment Section** failing which case(s) will be regulated in accordance with the provisions of the CCS (Pension) Rules, 1972 or the CCS (Extraordinary Pension) Rules, 1939 or the Pension Fund Regulatory and Development Authority (Exits and Withdrawals under National Pension System) Regulations, 2015 as the case may be, as default option as specified *vide* Para 10(6) of Department of Pension and Pensioners' Welfare, Ministry of Personnel, Public Grievances, Government of India Notification G.S.R.227(E) dated 30<sup>th</sup> March 2021. The Notification can also be downloaded from the website of the concerned Ministry.

No hard copy will be circulated.

*Sd/-*

Dy. Accountant General (Admn.)

Memo. Admn./Estt/Au/4-8/NPS/2021-22/1032-38

Date 03/9/2021

Copy to :

1. All Group Officers,
2. The Secretary to Pr. Accountant General (Audit),
3. The B.O./IS&DA for uploading the same to the office website,
4. All BO/Controlling,
5. Hindi Officer, Hindi Cell for translation,
6. Notice Board,
7. Office order file.

*Sd/-*  
03/09/21  
Senior Audit Officer (Estt.)

Form 1

OPTION TO AVAIL BENEFITS IN CASE OF DEATH OR DISCHARGE ON INVALIDATION OR DISABILITY OF GOVERNMENT SERVANT / SUBSCRIBER DURING SERVICE

(See Rule 10)

\* I, ....., hereby exercise option that in the event of my discharge from service on the account of disability or retirement from service on account of invalidation or Death during service, benefits under CCS(Pension) Rules, 1972 or CCS(Extraordinary Pension) Rules, 1939 as the case may be, may be paid to me or my family.

OR

\* I, ....., hereby exercise option that in the event of my discharge from service on the account of disability or retirement from service on account of invalidation or Death during service, benefits may be paid to me or my family, as the case may be, based on the accumulated pension corpus in the Individual Pension Account under the National Pension System in accordance with the CCS (Implementation of National Pension System) Rules, 2021.

Signature of Government Servant/ Subscriber

Name-----

Designation-----

Office in which employed-----

Telephone No.-----

Place and date:

This option supersedes any other option made by me earlier.

\*Completely strike out the benefits for which option is not intended to be made.

(To be filled in by the Head of Office or authorised Gazetted Officer)

Received the option dated....., under CCS (Implementation of National Pension System) Rules, 2021 made by Shri/Smt./Kumari ....., Designation..... Office.....Entry of receipt of option has been made in Page.....Volume.....of Service Book.

Signature,

Name and Designation of Head of Office or authorized Gazetted Officer with seal

Date of receipt .....

The receiving Officer will fill the above information and return a duly signed copy of the complete Form to the Government servant who should keep it in safe custody so that it may come into the possession of the beneficiaries in the event of his/her death/invalidation.

**FORM 2**  
**Details of Family**  
[see Rule 10(3)]

Name of the Government Servant/ Subscriber : .....

Designation : .....

Nationality : .....

S. N.	Name (please see notes below before filling)	Date of Birth (DD/MM/YYYY)	Aadhar No.* (optional)	Relationship with Govt. Servant/ retired Government Servant/ Subscriber	Marital Status	Remarks	Dated signature of Head of Office
	1	2	3	4	5	6	7
1							
2							
3							
4							
5							
6							

I hereby undertake to keep the above particulars up to date by notifying to the head of Office any addition of alteration.

E-mail:(optional)  Place:

Mobile:(optional)  Date:

(Signature)

1. The original Form submitted by the Government servant/Subscriber is to be retained. All additions or alteration are to be communicated by the Government servant/retired Government servant/Subscriber alongwith the supporting documents and the changes shall be recorded in this Form under the signature of Head of Office in Col.7. No new Form will substitute the original Form. However, the retiring Subscriber should submit the details of family afresh at the time of retirement.
2. The details of spouse, all children and parents (whether eligible for family pension or not) and disabled siblings (brothers and sisters) may be given.
3. The Head of Office shall indicate the date of receipt of communication regarding addition or alteration in the family in the 'Remarks' column. The fact regarding disability or change of marital status of a family member should also be indicated in the 'Remarks' column.
4. Wife and husband shall include judicially separated wife and husband.
5. The retired Government servant shall attach the details of change in family structure after retirement in the proforma prescribed under Dept. of P&PW, O.M. No.1(23)-P&P.W/91-E dated the 4<sup>th</sup> November, 1992.
6. Copies of birth certificates to be attached. Copies of any other relevant certificates, if available, should be attached.

\* Providing Aadhar No. is optional. However, if it is provided consent to link it to Bank Account and also for authentication of identity from UIDAI for pension related purpose only, is presumed.