

FORMAT - 2
HIMACHAL PRADESH GRAMIN BANK
 Head Office: Jail Road, Mandi, Distt. Mandi, H.P.

Option Form to be filled in by the Retired Employees of the Bank
(To be submitted in quadruplicate through the Branch / Office from where retired)

Date of receipt of application at Branch / Office		FOR HO USE ONLY
Forwarded to RO on		OPTION NOTED IN SERVICE RECORD
Forwarded by		
Signature with office seal (Branch/Office)		

The Chairman
 Himachal Pradesh Gramin Bank
 Head Office, Jail Road, Mandi, H.P.

Date: _____

I hereby declare that I have read and understood the Bank (Employees') Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorize the EPFO / RPFC to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to me on my retirement. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time.

1. Signature: _____
2. Name in Full (in Block letters): _____
3. Designation (at the time of retirement): _____
4. E P F No: _____
5. Present Residential Address: _____

6. Date of Birth: _____
7. Date of joining in the Bank' service: _____
8. Date of retiring from the Bank' service: _____
9. Branch / Office from where retired: _____ Branch / Office.
10. Branch from where pension to be drawn: _____ Branch
11. Contact Details: _____

(Signature to be attested by the Branch/Office Head with Office Seal)