

FORMAT - 13
HIMACHAL PRADESH GRAMIN BANK
Head Office: Jail Road, Mandi, Distt. Mandi, H.P.

*(Clearance / Pre-disbursement formalities to be furnished by
the proposed Pension Paying Branch)*

01. Date of Report	
02. Name of the Pension Paying Branch	
03. Branch Code No / SOL ID	
04. Pensioner's name	
05. Pension Type (General or /Family Pension)	
06. PPO No / EPF No (in case of Family Pension , mention EPF No of original pensioner	
07. S B Account No	
08. Date of Certificates:	
a) Life Certificate	
b) Non-Marriage/Re-Marriage Certificate (For Family Pensioner only)	
c) Non-Employment/Re-Employment Certificate	
d) Disability Certificate	
09. Whether Undertaking for refund of Excess Payment is taken	YES / NO

Branch Manager

(Please use Branch Seal)

.....**Branch**

.....**Bank**

Date; _____