## Declaration by Nodal Office

be declared by the nodal office where family pension is granted to the family member(s) of deceased subscriber or to the subscriber (in case of disability)}

PRAN	Her actives contest to the contest of the contest o	or	to	the	subscriber	Sh/Smt/Ms
per Pension Paymen	t Order No	(PRAN)	issu	ued date	ed	on disability as
Name of the family m	anharla de	. maile m. m				
Name of the family m Relationship of family						
In this respect, a No NPS account of the omember(s) of the decommendation, now, in Regulations, 2015, to deceased subscribe	leceased subsolution accordance he amount	bscriber to this of criber/ Subscriber.  with Regulation of accumulated	fice/Go Same i n 6(e) pension	vt are s is enclos of PFF n wealth	submitted by the along with the RDA (Exits & Iving in the	ne above family his declaration  Withdrawals
released to this Dodal	office bank	account as per the	details	given as	s under:	may be
Name of the Beneficia	ry :			·····		ellelen normhyr registermannen a
Bank Account <mark>N</mark> umbe	* *************************************		***************************************	antalagicalantalantoisetalantistoonistoonistoonistoonistoonistoonistoonistoonistoonistoonistoonistoonistoonisto	Mod Percent commissional and all conference of the conference and the conference of	elle diagnoscopione anno consecutore.
Bank Name	*					
3ranch Name						handighandir kranniganganggapanagar
FS Code						and the second s
wealth from to been collecte  I/We hereby or records. PFF information futo PAO bank	ne NPS accord from the fadeclare that DA/ NPS rnished in the account or required to	No Objection Ce count of the decear amily member(s) of details furnished Trust/CRA shall his regard. Further authorisation of the forwarded to all request.	sed subsets the description of the control of the c	eceased series true and response true true and response true true and tree and required tree and requi	subscriber to the subscriber/subsend correct as ible in case of the funds will be uest by office	nis office have scriber. per our office of any wrong be transferred and physical
		Stamp & Signature	- с с с с с с с с с с с с с с с с с с с	er og 1900-000 ett til en		

Countersigned by L	OTO/PAO/CDDO/DTA/PrAO		
			 Name of Street and Associated Aso
Date	Stamp & Signature of DTO/PAO/CDD	\	
1 Tree 4 to 20	Name	U/DTA/PrAC	

## No objection for Settlement of Accumulated Pension Wealth in NPS

Sh./Smt/Ms	me of the claimant/s/subscriber) , hereby confirm that I/we accumulated pension wealth lying in PRAN of subscribution with PRANor in my	er Lat
to Noda	I Office/Department where I/he/she was employed as I/we	am/ar
receiving the family pension u	nder Pension Payment Order no	_ date
	Han many a C. Pharatta	
Details of pension being paid  1. Name of the Family membe	(in case of Death):	
Pension Payment Order (PF	PO) No:	
·		
Signature/Thumb impression	n of Claimant	
Relationship with deceased:		_
Address:		**
Phone/Mobile Number/E-ma	All automorphisms and the second seco	
Place:	Date:	
Details of pension being paid (	in case of Disability):	
2. Name of the Subscriber		
Brown a	O) No:	
Pension Payment Order (PP		
Pension Payment Order (PP		
Pension Payment Order (PP Signature/Thumb impression	of Subscriber:	
Pension Payment Order (PP Signature/Thumb impression Address:	of Subscriber:	
Pension Payment Order (PP Signature/Thumb impression Address:	of Subscriber:	
Pension Payment Order (PP Signature/Thumb impression Address:  Phone/Mobile Number/E-mai Place:	of Subscriber:	
Signature/Thumb impression Address: Phone/Mobile Number/E-mai Place:  ttestation by Nodal Office: is certified that the above de	Date:  claration and details have been entered and signed / to family member(s) of deceased subs	humb
Signature/Thumb impression Address: Phone/Mobile Number/E-mai Place:  ttestation by Nodal Office: is certified that the above denpressed by the n./Smt/Ms.	Date:  Claration and details have been entered and signed / t family member(s) of deceased subs	humb

- I/We hereby declare that No Objection Certificate to transfer the accumulated pension wealth from the NPS account of the deceased subscriber/subscriber to this office have been collected from the family member(s) of the deceased subscriber/subscriber.
- I/We hereby declare that details furnished above are true and correct as per our office records. PFRDA/ NPS Trust/CRA shall not be responsible in case of any wrong information furnished in this regard. Further, I understand that funds will be transferred to PAO bank account on authorisation of withdrawal request by office and physical

documents is required to be forwarded to CRA for record keeping within 60 days of authorization of withdrawal request.

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AND		
Vocazia de la constanta de la	Stamp & Signature of DDO/	
Date	Name of the DDO/DTO/PAO	
Place	Regn No.	