**OPTION FORM FRO DIRECT CREDIT OF PENSION THROUGH BANK ACCOUNT**

Pensioner Information (To be filled in by the pensioner)

|  |  |
| --- | --- |
| **PPO No.** |  |
| **SAP Personal No.** |  |
| **Accounts Office (form where PPO originally issued)** |  |
| **Name of Pensioner** |  |
| **Father Name** |  |
| **Family Pension Name** |  |
| **Spouse / Father / Mother Name** |  |
| **Pensioner NIC old No.** |  |
| **Pensioner CNIC No.** |  |
| **Family Pensioner CNIC No.** |  |
| **Residential Address (Current)** |  |
| **Residential Address (Permanent)** |  |
| **Designation & Grade at the time of Retirement** |  |
| **Ministry / Division / Department / Office** |  |
| **Present Bank Address & Code No.** |  |
| **I hereby opt to draw pension through direct credit system and have also submitted** **\* Indemnity Bond to the bank.**\* The pensioner shall produce ad indemnity Bond to keep the bank indemnified about liabilities with all sums of money whatsoever including mark-up of his / her Pension Accounts. The pensioner would further undertake that his / her legal heirs, successors, executors shall be liable to refund excess amount, if any, credited to his / her pension Account either in full or in instalments (as agreed mutually) equal to such excess amount \_\_ |
| Pensioner’s Signature / Thumb impressionDate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Account verification (To be verified by the Bank)

|  |  |  |
| --- | --- | --- |
| Account Title (Name) |  | Signature / Stamp of Bank Manager |
| Account No. |  |
| Branch Name / Address |  |
| Branch Code |  |
| Indemnity Bond / Lien submitted by the pensioner |

**……………………………………………………………………………………………**



To be issued by Accounts Office

Acknowledgment Receipt No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_