FORM

	FOR IDENTIT	Y-AND-PENSION CARD
		(Signature of the applicant in the box abo
1.	T	LED IN BY THE APPLICANT)
1.	Name of the applicant (IN CAPITAL LETTERS)	
2.	Father's/Husband's Name	
3.	Date of Birth	
4.	Date of Retirement	
5.	Ministry/Department	
6.	Residential Address	
7.	Residential Telephone No.	
8.	Blood Group	
9.	Mark of Identification	
10.	Pay Level (as per 7 th CPC)	
11.	Last Basic Pay	
12.	Post from which Retired	
13.	Qualifying Service	
14.	Pension Originally Sanctioned	
15.	PPO No. & Date	

(Signature of the applicant) Dated:

PART-II

File No				. Date	ed:			
					ne applicant h			
Special	Seal	Authority	is	attached	herewith. d in his pensio	Identity	Card	No.
				UNDEF	SECRETAR	Y TO THE G	OVT. OF I	NDIA.
				(Signatur	e of the Under	r Socratary in	the boy s	hovo)

FORM

FOR PENSIONERS IDENTITY CARD

(Signature of the applicant in the box above)

PART-I (TO BE FILLED IN BY THE APPLICANT)

1.	Name of the applicant	
2.	(IN CAPITAL LETTERS) Father's/Husband's name	
3.	Date of Birth	
4.	Date of retiremet	
5.	Ministry/Department	
6.	Residential Address	
7.	Posidontial Tolonhono No	
	Residential Telephone No.	
8.	Blood Group	
9.	Mark of Identification	
10.	Pay Level	
11.	Last Basic Pay	
12.	Post from which Retired	
13.	Qualifying Service	
14.	Pension Originally Sanctioned	
15.	PPO No. & Date	
	The state of the s	which attached herewith/lost and Police vide Receipt No.
	enclosed herewith. (Delet	

(Signature of the applicant) Dated:

PART-II (To be certified by the Sponsoring Authority)

File No	Dated:
found correct A photocopy of PPO No	furnished by the applicant has been verified and boundary dated issued nority is attached herewith. Identity Card No. by him is attached in his pension file.
Secret Seal of the Ministry/Departmen	under secretary to the govt. of India.

MHA(SSO-PASS CELL) RETURNED IN ORIGINAL WITH REMARKS THAT-

The requisition form is incomplete (Sl. No.---- of Part-I). 1.

The requisition form is not accompanied by the bank challan of Rs. 25/-photo of 2. 3x3 cms the old photo pass in case of mutilation/copy of police report in case of loss.

INCHARGE/PASS CELL

PLEASE NOTE:

- The residential telephone no. to be printed on the card should be mentioned only. 1.
- Kindly give identification mark which is easily visible and can be shown without 2. discomfort.

Please indicate basic pay exclusive of DA. 3.

- Enclose one copy of Bank Challan for Rs. 25/- which should be paid under Head 4. of Account 0070-OAS-COS-OR in SBI, Central Sectt., North Block, New Delhi and adjustable with Pay and Accounts Office, Ministry of Home Affairs.
- In the case of outstation pensioners Demand Draft for Rs. 25/- in favour of 5. P&AO, Ministry of Home Affairs, payable at SBI, Central Sectt., New Delhi along with a self addressed and stamped registered envelope may be sent.