

FORM 1-A

Application for grant of Family Pension.

To

The Secretary,  
J&K Legislative Assembly/  
Legislative Council Secretariat,  
Jammu/Srinagar.

1. Name of the applicant.
2. (i) Name of the Guardian in case the applicant is minor.  
(ii) Relationship of the guardian with the applicant.
3. Name of the deceased member/pensioner.
4. Relationship of the applicant with deceased member/pension.
5. Date of death of the member/pensioner.
6. House from which deceased retired.
7. Period of service.
8. (i) Date of birth of the applicant.  
(ii) Date of birth of the guardian in case the applicant if minor.
9. Full address of the applicant/guardian.
10. Amount of the pension.
11. Number of P.P.O.
12. Treasury from which pension was drawn.
13. Name of the treasury or sub-treasury at which payment is desired.
14. (i) No demand certificate.  
(ii) Three specimen signatures.  
(iii) Three copies of passport size photograph.  
(iv) Present Address.

Signature of the applicant

Certified that the entries contained above are correct.

(Gazetted Officer)  
Seal

Certified that the entries at 10, 11 and 12 are correct.

Treasury Officer  
\_\_\_\_\_  
Treasury.

**APPLICATION FOR REVISION OF FAMILY PENSION IN TERMS OF THE  
JAMMU AND KASHMIR STATE LEGISLATURE MEMBERS PENSION  
(AMENDMENT) ACT, 2011**

To,

The Secretary,  
J&K Legislative Council,  
Jammu/ Srinagar.

1. Name of the applicant : \_\_\_\_\_
2. (i) Name of the Guardian : \_\_\_\_\_  
in case the applicant is minor : \_\_\_\_\_  
(ii) Relationship of the guardian : \_\_\_\_\_  
with the applicant : \_\_\_\_\_
3. Name of the deceased : \_\_\_\_\_  
member/pensioner : \_\_\_\_\_
4. Relationship of the applicant : \_\_\_\_\_  
with deceased member/pensioner : \_\_\_\_\_  
(i) Date of birth of the applicant : \_\_\_\_\_  
(ii) Date of birth of the guardian : \_\_\_\_\_  
in case the applicant if minor : \_\_\_\_\_
5. Full address of the : \_\_\_\_\_  
applicant/guardian : \_\_\_\_\_
6. Amount of the family pension : \_\_\_\_\_  
drawn at present : \_\_\_\_\_
7. Copy of P. P. O : \_\_\_\_\_
8. Treasury from which : \_\_\_\_\_  
family pension is being drawn : \_\_\_\_\_
9. Two copies of recent passport size photographs duly attested by a : \_\_\_\_\_  
Gazetted Officer : \_\_\_\_\_
10. Present address : \_\_\_\_\_
11. Living Certificate duly attested by a Gazetted Officer in case of : \_\_\_\_\_  
widow/widower: \_\_\_\_\_
12. Present martial status : \_\_\_\_\_  
duly verified by a Gazetted Officer : \_\_\_\_\_

(Applicant)

Certified that the entries contained above are correct.

Treasury Officer  
\_\_\_\_\_ Treasury.

FORM I

APPLICATION FOR PENSION

[ See Rule 3 ]

FROM : Shri/Smt./Kumari -----

Ex-Member-----

To

The Secretary,  
Jammu and Kashmir Legislative Council,  
Legislature Secretariat,  
Jammu/Srinagar

Subject : Sanction of pension under the Jammu and Kashmir State Legislature Members Pension Act, 1984

Sir,

I, -----

S/o-----

R/o----- am entitled to receive pension under the Jammu and Kashmir State Legislature Members Pension Act, 1984 having been a Member of :-

- a) Constituent Assembly            From-----to-----
- b) Legislative Assembly      -- 1. From-----to-----
- 2. From-----to-----
- 3. From-----to-----
- 4. From-----to-----
- c) Legislative Council        -- 1. From-----to-----
- 2. From-----to-----
- 3. From-----to-----
- 4. From-----to-----

2. I request that steps may kindly be taken to sanction the pension in my favour. I desire to draw my pension from ----- treasury.

3. I enclose the following documents duly attested by a Gazetted Officer of the Central/State Government/a sitting member of the Jammu and Kashmir Legislature or Member of Parliament:

- i. No Demand Certificate
- ii. Three specimen Signatures.
- iii. Three copies of passport size photographs.
- iv. Permanent address.
- v. Present address.

4. I hereby declare that :-

- i) I am not holding the elected office of the President/Vice-President of India or am appointed to the office of the Governor of my State or the Administrator of any Union Territory.
- ii) I am not a member of the Council of States or the House of People or the Legislative Assembly of any State or Union Territory or the Legislative Council of a State.

iii) I am not employed on a salary under the Central Government or any State Government or any Corporation owned or Controlled by the Government of India or any State Government or any local authority or become otherwise entitled to any remuneration from such Government, Corporation or Local authority.

iv) I am not in receipt of any pension from the Central Government or any State Government, or any Corporation owned or controlled by the Central Government or the State Government, or any local Authority, under any law or otherwise.

v) I am holding the office ----- or employed as ----- and the total remuneration received by me is Rs. ----- (p.m.) (A certificate from the competent authority of the office where employed to be attached).

vi) I am in receipt of Rs. ----- (p.m.) as pension being drawn from the Central Government/State Government/Corporation owned or controlled by the Central Government/State Government or local authority under ----- law or otherwise.

Yours faithfully.

Signature

Name in Block letters... ..  
Station: ... ..  
Date: ... ..

FOR USE BY THE LEGISLATIVE ASSEMBLY/COUNCIL SECTT.

The total period for which the applicant has been Member of the Legislative Assembly/Council is verified as under:-

- 1. From... ..to... ..
- 2. From... ..to... ..
- 3. From... ..to... ..

The facts recorded in the application having been verified and found correct. The applicant is entitled to a pension of Rs. ... .. p. m. from ... ..

Secretary,  
Legislative Council.