

NSC Emp. Defined Contribution Superannuation Pension Trust

Beej Bhawan, Pusa Complex, New Delhi – 110 012

APPLICATION OF PENSION ON

(Retirement/ Resignation/ Pre-matured retirement/ VRS/ Leaving service on account of Total Permanent Disablement or Sudden Disappearance/ Completion of tenure of Board Level Appointees)

* Delete whichever is not required.

1. Name :
2. EPF code No. :
3. Address :
4. Date of Appointment :
5. Date of entry into the Scheme :
6. Date of exit:
7. Mode of exit (Specify) :
*(Retirement/ Resignation/ Pre-matured retirement/ VRS/ Leaving service on account of Total Permanent Disablement or Sudden Disappearance/ Completion of tenure of Board Level Appointees)
8. Date of Birth :
9. Details of Nominee :

Sl. No.	Name of Nominee	Address of Nominee	Relationship with Member	Date of Birth of Nominee \$	Proportion by which Pension will be shared

\$ (attach self-attested copy of date of birth of nominee)

10. Option to choose pension

- i) Annuity for life
- ii) Annuity for life with return of Capital (ROC)
- iii) Annuity for 5 years certain & Life thereafter
- iv) Annuity for 10 years certain & Life thereafter
- v) Annuity for 15 years certain & Life thereafter
- vi) Annuity for 20 years certain & Life thereafter
- vii) Annuity for life increasing at a simplest rate of 3% p.a.
- viii) Annuity for life with a provision for 50% of the annuity payable to the spouse on death of the annuitant
- ix) Annuity for life with a provision for 100% of the annuity payable to the spouse on death of the annuitant

x) Annuity for life with a provision for 100% of the annuity payable to the spouse on death of the annuitant with return of purchase price on death of last annuitant

11. Mode of payment of pension: _____ (Monthly/Quarterly/Half-Yearly/Yearly).

12. If you wish to transfer your annuity servicing to your nearest LIC Divisional Office please specify the area :

13. Mode of Annuity Payment: * By Bank transfer or by Cheque.
If by Bank transfer – attach ECS mandate form.

Encls: 1. DOB Certificate of Nominee
2. ECS Mandate form

(Signature of Member)

To be completed by Head Office/Regional Office /Farms

14. Remittance particulars after last schedule i.e. as on 31st March of the Preceding Year)

Month	Year	Employer Share of Contribution	Employee Share of Contribution
April			
May			
June			
July			
August			
September			
October			
November			
December			
January			
February			
March			

Asst Manager /AO/AAO (A/cs)

The particulars at Sl. No. 1 to 10 have been verified at our end and we certify that these are correct.

Regional Manager/ Director Incharge Farms/ DGM(HR)

Forwarded to:-

Secretary,
NSC Emp. Defined Contribution Superannuation Pension Trust.

PENSION TRUST - FORM No. 4

The Secretary,
NSC DCS Pension Trust,
National Seeds Corporation Limited
Head Office
New Delhi -110012.

Sub:- Cash lump sum of commuted value of benefits fund under Rule 4.1.6 of the NSC DCSP Scheme.

Sir,

I _____ having EPF A/c o. _____ working / worked
as _____ and superannuating/superannuated
on _____ from NSC _____ (last place of posting and region).

I am a member of the NSCDCS Pension Scheme. It is requested that a amount of
Rs. _____ Or _____% (if not opted, mention NIL) as
share of my pension amount as per the provision of scheme may please be
commuted and remitted in my Bank Account number _____
of _____ (Bank Name)
Branch _____ IFS Code: _____ .

Thanking You

Yours Sincerely,

Signature _____

Encl: Cancelled Cheque

Name of Employee:

Designation :

Region :

EPF No. :

Address :

Contact No. :

Date :-

Place:-

Note:

1. Maximum 1/3rd of the total value of corpus can be commuted.
2. Enclose a cancelled cheque for RTGS purpose.
3. Enclosed duly filled in Annuity Purchase Form.

Bank Authorization Letter

I, Son/Daughter/Wife of
....., would like to receive the sums paid
by LIC under Policy No. to me electronically in my Bank account,
the details of which are as under:

Name	
Policy No.	
* Pan Card No.	
Permanent Address of the Member	
District	
Pin code	
State	
Telephone Number with STD Code	
Mobile No.	
Email Address	

Bank Details

Name of Bank	
Bank Branch (Full Address)	
\$Bank Account No.	
IFSC Code	

Encls: 1. *Photo copy of Pan Card duly self attested.

2. ** Cancelled cheque.

(If cheque facility is not available, kindly get the above authorization letter attested from concerned Bank).

Signature _____
Name of Member _____
Emp. Code _____

SERVICE PARTICULARS OF THE EMPLOYEE

(To be provided by HR Section of RO/Farms/HO)

- i) Name & Designation of the employee :
- ii) Date of birth :
- iii) Date of Joining in NSC :
- iv) Date of retirement/death, while in service /Resignation/VRS etc. :
- v) Vigilance status :
- vi) Confirmation of 15 years of service. :
- vii) In case of death, attested copy of death

Certificate & succession certificate (if applicable):

In-charge HR Section
(With seal)

**Details of Pension Contribution in respect of Ex-employees who retired during the period
from 01.04.2015 to 31.07.2016**

Name of the Employee			
Designation		EPF No.	
Name of the Region / Farm/ Centre			
Date of Joining NSC		Date of Retirement/Resignation	
In case of Death, name of the Successor / Claimant with relation			

Details of Pension Contribution and Corporation's share thereon

Month	Basic Pay	% of IDA	IDA Amt.	Total BP+DA	Ex-Employees Share of Pension Cont.@ 5% BP+DA	Remarks if any
April-2015						
May-2015						
June-2015						
July-2015						
Aug-2015						
Sep-2015						
Oct-2015						
Nov-2015						
Dec-2015						
Jan-2016						
Feb-2016						
Mar-2016						
April-2016						
May-2016						
June-2016						
July-2016						
Total						

Please find enclosed herewith Ch./DD No._____ dated_____ amounting to Rs._____ drawn on _____ towards my pension contribution from the period 01.04.2015 to 31.07.2016 / date of retirement as per details given above. I further declare that I hereby understand and undertake to comply with the rules of the NSC Employees Defined Contributory Superannuation Pension Scheme as amended from time to time and the applicable law in force administered by the Trust created by NSC for this purpose and decision of the Trustees shall be final and binding on the member of the scheme.

Signature of ex-employee_____

Date _____

Place _____

CERTIFICATE

It is certified that above referred Pension Contribution particulars are correct and no recovery is due against the ex-employee.

CERTIFICATE

It is certified that above referred service particulars are correct and no recovery is due against the ex-employee.

Signature Incharge (Accounts)_____

Signature Incharge (HR)_____

Name:-

Name:-

Designation:-

Designation:-

PENSION TRUST - FORM NO. 6

The Secretary,
NSC DCS Pension Trust,
National Seeds Corporation Limited
Head Office
New Delhi - 110012.

Subject: - Lump sum Contribution under rule 1(X)(g) of Pension Scheme .

Sir,

I _____ (Name & Designation) having EPF A/c o. _____ working / worked
as _____ and _____ superannuating/superannuated
on _____ from NSC _____ (last place of posting and region).

I am a member of the NSC Pension Scheme and wish to deposit Lump sum Voluntary Contribution under rule 1(X)(g) of Pension Scheme amounting to Rs. _____ vide Ch. No. _____ dated _____ drawn on _____.

Thanking You

Yours Sincerely,

Signature_____

Encl: As-above

Name of Employee :

Designation:

Region :

EPF No. :

Address :

Contact No. :

Date :-

Place:-

**NSC EMPLOYEES DEFINED CONTRIBUTORY SUPERANNUATION PENSION
TRUST
BEEJ BHAWAN, PUSA COMPLEX, NEW DELHI-110012.**

No. NSC/EPF-NSCDCSPS/2016-17

Date

**Unconditional Consent of the employees for joining National Seeds
Corporation Defined Contribution Pension Scheme.**

I _____ employee of the National Seeds Corporation
working at _____ having EPF no. _____ hereby give my
unconditional consent for joining the NSC Employees Defined Contributory
Superannuation Pension Scheme as amended from time to time. I further
authorize the NSC to deduct employee share from my salary from the date of
joining NSC at the rates decided from time to time.

I further declare that I hereby understand and undertake to comply with the
rules of the NSC Employees Defined Contributory Superannuation Pension
Scheme as amended from time to time and the applicable law in force
administered by the Trust created by NSC for this purpose and decision of the
Trustees shall be final and binding on the member of the scheme.

Voluntary Contribution:-

I further authorize the NSC to deduct and remit _____% of the BP + DA
from my salary as Voluntary Contribution to the Scheme.

Signature _____

—
Name:-

Designation:-

EPF No. _____

Place of Posting:-

Witness:-

1. _____

2. _____

PENSION TRUST- FORM No. 1

NSC EMPLOYEES DEFINED CONTRIBUTION SUPERANNUATION PENSION TRUST
Beej Bhawan, Pusa Complex, New Delhi-110012.

FORMAT FOR REGISTRATION OF EMPLOYEES IN PENSION SCHEME

(All entries in capital letters only)

Name of the Employee					
Designation				EPF No.	
Name of the Region / Farm/ Centre					
Date of Birth		Date of Joining in NSC			
Address for communication					
Contact no. /Phone/Mob. No.					
E-Mail ID					
Bank A/C No.					
IFSC Code					
Name of the bank & Branch					
<u>NOMINATION</u>					
I hereby nominate the person(s)/cancel the nomination made by me previously and nominate the person(s) mentioned below to receive the NSC DCS Pension/Balance amount standing to my credit in the aforesaid Pension A/C, in the event of my death.					
S.No.	Name of the Nominee(s)	Nominee's relationship with the member	Date of birth in case of minor	Share of accumulations to be paid to each nominee	If the nominee is minor name and address of the guardian who may receive the amount during the minority of the nominee

(Signature of the employee)

Witness:- 1. _____

2. _____

Date _____

Place _____

CERTIFICATE BY THE RM/HEAD-FARM/HOD

Certified that the details given above / signature of the above employee has been verified by me.

Signature
(Name & Desgn. of immediate superior with office seal)