



**APPLICATION FOR OPTION OF PENSION**

(Option form to be filled in by the Officer/Employee/  
Surviving spouse/ Eligible family member)

To,  
Assistant General Manager/Chief Manager/Manager,  
\_\_\_\_\_ Branch/Office

I \_\_\_\_\_ former employee/officer /surviving spouse /eligible family member agree to exercise the pension option provided to former employees/officers (resignees) and their surviving spouse or eligible family members as per 12<sup>th</sup> Bi-partite settlement/ 9<sup>th</sup> Joint Note dated 08.03.2024 and applying for the same.

2. I hereby declare that I have read and understood the terms of 12<sup>th</sup> Bi-partite settlement/ 9<sup>th</sup> Joint Note dated 08.03.2024 for extending another option of pension to former employees/officers (resignees) and their surviving spouse or eligible family members with certain terms and conditions. I am agreeable to refund to the Bank the entire Bank's contribution to Provident Fund (along with accumulated interest thereon) received by me or by former employee/officer (resignee) at the time of my/ former employee/officer resignation or later from the Bank and hereby voluntarily opt for Bank's pension scheme as per the provisions of the said Settlement/Joint note. I undertake to refund the total amount due to me will be refunded to the Bank on or before 14.08.2024.

- a. I confirm that I have not filed any case in any court of law against the Bank in connection with Pension option.
- b. I have filed case in \_\_\_\_\_ Court for pension option; however, I have withdrawn the same.(copy of relevant order is enclosed)

Please tick a or b of the above)

3. Further, I hereby declare that I am aware that pension payable to me is subject to the provisions of BOI (Employees') Pension Regulations, 1995 and as per terms and conditions under 12<sup>th</sup> Bi-partite settlement/ 8<sup>th</sup> Joint Note dated 08.03.2024.

4. I declare that, PF amount of Rs.\_\_\_\_\_ received by me/ by former employee/officer (resignee) and hereby authorise the Bank to debit my saving account number \_\_\_\_\_with BOI \_\_\_\_\_Branch the amount of Rs.\_\_\_\_\_towards Bank's contribution to Provident Fund (along with accumulated interest thereon) to be paid by me.

5. Also, I am aware that once I exercised pension option and refunded the requisite fund, if eligible the pension option cannot be revoked.

Signature :  
Name in full:  
PF NO. :

Ref No S \_\_\_\_\_

ANNEXURE - II



Pensioner's  
Joint Photograph  
with Wife

ORIGINAL

**PENSIONER'S PROFILE (Please submit in duplicate)  
(PLEASE FILL UP IN BLOCK CAPITALS)**

- (1) Full Name \_\_\_\_\_  
(FIRST NAME) (MIDDLE NAME) (SURNAME)
- (2) Sex. Male/Female \_\_\_\_\_
- (3) Identification Mark (if any) \_\_\_\_\_
- (4) Date of Birth -- PAN NO.
- (5) Date of Joining Bank service \_\_\_\_\_
- (6) Date of Ceasing to be in service \_\_\_\_\_
- (7) Mode of cessation from service Superannuation /VRS/Compulsory/any other \_\_\_\_\_
- (8) Category at Retirement Officer (Scale Grade) \_\_\_\_\_ / Clerk / Sub-ordinate Staff
- (9) Provident Fund Account No.
- (10) Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- E-mail address:- \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_  
\_\_\_\_\_ State \_\_\_\_\_ PIN Code \_\_\_\_\_
- Tel No.  M O B I L E
- (11) Branch / Office of last posting \_\_\_\_\_ Branch \_\_\_\_\_ Zone \_\_\_\_\_
- (12) Branch from where pension payment is desired \_\_\_\_\_ Branch \_\_\_\_\_ Zone \_\_\_\_\_
- (13) **Pension a/c no.(Sch.Code.SB121)**
- (14) Have you obtained Commercial Employment Yes/ No. If "Yes" please state date of Permission by the Competent Authority \_\_\_\_\_
- (15) If "No" do you intend to take up Commercial Employment? Yes/ No. If "Yes" please give reference of your application for Permission from the Competent Authority \_\_\_\_\_
- (16) If was on Sabbatical leave for \_\_\_\_\_ years from \_\_\_\_\_ to \_\_\_\_\_

I. PERSONAL DATA OF THE SPOUSE :-

- (1) Full Name \_\_\_\_\_  
(FIRST NAME) (MIDDLE NAME) (SURNAME)
- (2) Relationship with the Pensioner Wife / Husband
- (2) Date of Birth -- Pan No.
- (3) Identification Mark (If any visible) \_\_\_\_\_
- (4) Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. PARTICULARS OF FAMILY MEMBERS OTHER THAN SPOUSE (Family as defined under Regulation No. Bank of India (Employees) Pension Regulations, 1995

Name	Relationship	Date of Birth
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____

I declare that the above information is true and correct. Should you however require any documentary evidence, I shall produce the same on demand.

Date:

Signature

Note : Please enclose 2 passport sized Self and 2 joint photographs of the pensioner with the spouse.

Classification: Internal

Ref No S \_\_\_\_\_

ANNEXURE - II



Pensioner's  
Joint Photograph  
with Wife

**DUPLICATE**  
**PENSIONER'S PROFILE (Please submit in duplicate)**  
**(PLEASE FILL UP IN BLOCK CAPITALS)**

- (1) Full Name \_\_\_\_\_  
(FIRST NAME) (MIDDLE NAME) (SURNAME)
- (2) Sex. Male/Female \_\_\_\_\_
- (3) Identification Mark (if any) \_\_\_\_\_
- (4) Date of Birth \_\_\_\_\_ PAN NO. \_\_\_\_\_
- (5) Date of Joining Bank service \_\_\_\_\_
- (6) Date of Ceasing to be in service \_\_\_\_\_
- (7) Mode of cessation from service Superannuation /VRS/Compulsory/any other \_\_\_\_\_
- (8) Category at Retirement Officer (Scale Grade) \_\_\_\_\_ / Clerk / Sub-ordinate Staff
- (9) Provident Fund Account No. \_\_\_\_\_
- (10) Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- E-mail address:- \_\_\_\_\_
- \_\_\_\_\_ **City** \_\_\_\_\_
- \_\_\_\_\_ **State** \_\_\_\_\_ **PIN Code** \_\_\_\_\_
- Tel No. \_\_\_\_\_ M O B I L E \_\_\_\_\_
- (11) Branch / Office of last posting \_\_\_\_\_ Branch \_\_\_\_\_ Zone \_\_\_\_\_
- (12) Branch from where pension payment is desired \_\_\_\_\_ Branch \_\_\_\_\_ Zone \_\_\_\_\_
- (13) **Pension a/c no.(Sch.Code.SB121)** \_\_\_\_\_
- (14) Have you obtained Commercial Employment Yes/ No. If "Yes" please state date of Permission by the Competent Authority \_\_\_\_\_
- (15) If "No" do you intend to take up Commercial Employment? Yes/ No. If "Yes" please give reference of your application for Permission from the Competent Authority \_\_\_\_\_
- (16) If was on Sabbatical leave for \_\_\_\_\_ years from \_\_\_\_\_ to \_\_\_\_\_

**I. PERSONAL DATA OF THE SPOUSE :-**

- (1) Full Name \_\_\_\_\_  
(FIRST NAME) (MIDDLE NAME) (SURNAME)
- (2) Relationship with the Pensioner Wife / Husband
- (2) Date of Birth \_\_\_\_\_ Pan No. \_\_\_\_\_
- (3) Identification Mark (If any visible) \_\_\_\_\_
- (4) Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. PARTICULARS OF FAMILY MEMBERS OTHER THAN SPOUSE (Family as defined under Regulation No. Bank of India (Employees') Pension Regulations, 1995**

Name	Relationship	Date of Birth
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____

I declare that the above information is true and correct. Should you however require any documentary evidence, I shall produce the same on demand.

Date:

Signature

Note : Please enclose 2 passport sized Self and 2 joint photographs of the pensioner with the spouse.

Classification: Internal

Ref No. S \_\_\_\_\_

**ANNEXURE -III**

The Assistant General Manager,

**BANK OF INDIA**

HEAD OFFICE:

Terminal Benefits Division, HR Department

Star House, 3<sup>rd</sup> floor, (West) wing,

C-5, "G" Block, Bandra-Kurla Complex,

P.B. No.8135, Bandra (East), Mumbai – 400 051.

**NOMINATION FOR PENSION ARREARS**

**YOUR REF.NO.** \_\_\_\_\_

I, \_\_\_\_\_ hereby nominate the person / persons mentioned below under Regulation 51 of the Bank of India(Employees) Regulations,1995 who is / are members of my family, and confer on him / them the right to receive, to the extent specified below, any amount of pension arrears in the event of my death without receiving the pension which having become admissible may remain unpaid upon my death.

Name & address of nominee/ s	Relationship with the pensioner	Age (date of birth in case of minor)	Amount of the share of pension arrears to each
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Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Signature \_\_\_\_\_

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mobile : \_\_\_\_\_

PF A/c.No. \_\_\_\_\_

**Note :**

- (i) The share of the pension arrears value of pension should cover the whole amount.
- (ii) In case the nominee is minor, his / her share should be payable to the Guardian.

**Name of witness**

**Signature of Witness**

(1) \_\_\_\_\_

\_\_\_\_\_

(2) \_\_\_\_\_

\_\_\_\_\_



To,  
The General Manager  
Bank of India,  
Human Resources Department  
Head Office, Mumbai - 400051  
Mumbai

Dear Sir/Madam,

**UNDERTAKING**

**Exercise of option for pension as provided by the Bi-partite Settlement/Joint Note dated 08.03.2024**

1. In accordance with provisions of the captioned Bi-partite Settlement/Joint Note dated 08.03.2024 an announcement for exercising the option has been made by the Bank on 17.05.2024 and I am eligible for exercising the option for pension as I satisfy all the conditions stipulated in the above mentioned Bi-partite Settlement/Joint Note dated 08.03.2024 which also require that I have to submit an undertaking for exercising the option and hence I am submitting the undertaking as under:
2. I hereby unequivocally and unconditionally agree to withdraw any pending legal proceedings initiated by me either individually or along with others wherein my right, to opt for pension, though I had resigned from the services of the bank, is directly or indirectly one of the issues for consideration by the concerned Court or Authority, having jurisdiction and powers to adjudicate or decide such issue, and take necessary steps to ensure that I cease to be a party to such pending proceedings and my right, to opt for pension is no longer Res Integra in such proceedings and also agree not to initiate any proceedings concerning such right in future.
3. In the event of breach of the undertaking on my part the Bank shall be entitled to suspend payment of pension until I submit necessary evidence to establish that I have complied with the undertaking.

Your faithfully,

(Name & Signature)

**IDENTIFICATION FORM OF RESINEES' OFFICER/ EMPLOYEE/ SURVIVING SPOUSE/ELIGIBLE FAMILY MEMBER**

1.	NAME	
2.	PF NO.	
3.	PENSION (SELF/FAMILY)	
4.	GENDER (MALE/FEMALE)	
5.	CORRESPONDENCE ADDRESS	
6.	AADHAAR NO.	
7.	PAN NO.	
8.	PHOTOGRAPH (Jointly with spouse, if alive)  [Affix Seal & Signature of Branch Manager/Officer on Photograph]	Photograph
		Photograph
9.	Death Certificate copy (duly attested) - (Y/N) (In case of family pension)	
10.	Specimen Signature	
11.	Left/Right Thumb impression of resignees' officer/employee/surviving spouse/eligible family member.	

**Place :**

**Date :**

**FOR OFFICE USE ONLY:** Above given details/documents to be verified with original and attested by Branch/ Office with seal and signature of Branch/Office/Division Head.

( )  
**Assistant General Manager/Chief Manager/Manager**

Ref No. S \_\_\_\_\_

**ANNEXURE - VI**

REF NO.S- \_\_\_\_\_

**TO BE SENT TO TERMINAL BENEFITS DIVISION, HR DEPT. HEAD OFFICE  
THROUGH YOUR ZONAL OFFICE**

(Please use for all categories of Pensions EXCEPT Family Pension)

**I. SERVICE PARTICULARS OF THE EMPLOYEE (PENSIONER)**

- (A) FULL NAME \_\_\_\_\_  
(B) CATEGORY : OFFICER / CLERK / SPL.ASST./SUBSTAFF (FULL TIME / PART TIME)  
(C) DATE OF BIRTH \_\_\_\_\_  
(D) DATE OF JOINING \_\_\_\_\_ (as \_\_\_\_\_)  
(E) EDUCATIONAL QUALIFICATIONS \_\_\_\_\_  
(F) DATE OF PROMOTION \_\_\_\_\_  
(G) MODE OF RETIREMENT: SUPERANNUATION / VOLUNTARY /  
COMPULSORY / INVALID / PREMATURE  
(H) DATE OF RETIREMENT : (LAST DAY OF EMPLOYMENT): \_\_\_\_\_  
(I) TOTAL SERVICE IN THE BANK : \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_ DAYS  
LESS NON-QUALIFYING SERVICE: \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_ DAYS (U/A leave if any)  
SERVICE QUALIFYING FOR PENSION : \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS

**II. LAST 10 MONTHS EMOLUMENTS DRAWN**

Month Year	Basic Pay (Including Stagnation Increments) (Rs.)	Special Pay (Only For Award Staff) (Rs.)	ALLOWANCES DRAWN			Officiating Allowance (If Any) (Rs.)
			Graduation Pay / PQP Reckoned for PF only Rs.	Fixed Personal Pay Reckoned for PF & DA Rs.	CCA (Reckoned For PF Award Staff only) (Rs.)	
<b>TOTAL</b>						

**III.**

**CERTIFICATE  
(strike off what is not applicable)**

- (1) As per our records, the employee has sought / has not sought Bank's permission to take up commercial employment.  
(2) As per our records no disciplinary action is contemplated / pending / initiated against this employee.  
(3) We certify that the employee has exercised a valid option in favour of Pension and is eligible to draw Pension under the Bank of India (Employees) Pension Regulations, 1995.

VERIFIED AND RECOMMENDED

BRANCH RECOMMENDATIONS ENDORSED

SIGNATURE : \_\_\_\_\_  
(CODE No.) \_\_\_\_\_  
AGM / CHIEF MANAGER  
BRANCH : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_  
(CODE No.) \_\_\_\_\_  
C.M./A.G.M. /D.G.M. / **Z.M.**  
\_\_\_\_\_ **ZONE**

DATE :

DATE :

APPLICATION FORM FOR FAMILY PENSION

To,  
The Trustees  
Bank of India Pension Fund Trust,  
Mumbai.

Affix latest  
Passport size  
Photo of the  
Applicant

Dear Sir,

I regret to inform you that Shri / Smt. \_\_\_\_\_,  
Employee ID \_\_\_\_\_ who was employee of the Bank expired on  
\_\_\_\_\_. After his / her death, I am the first / next family member being wife /  
son / daughter of deceased employee eligible for family pension. I therefore request you to grant  
me family pension as per Bank of India (Employees') Pension Regulations, 1995. I submit the  
required particulars as under:-

1. Full Name of the Applicant : \_\_\_\_\_

2. Relationship with the deceased pensioner : \_\_\_\_\_  
(Unmarried Son/Daughter not over 25 years of age except Minor/ Divyang Child)

3. Gender : \_\_\_\_\_ 4. Marital Status : \_\_\_\_\_

5. Date of birth: \_\_\_\_\_ 6. Whether Employed: YES / NO

7. Permanent address of the applicant : \_\_\_\_\_

\_\_\_\_\_ PIN \_\_\_\_\_  
Email id \_\_\_\_\_ Mobile Number: \_\_\_\_\_

8. Pension Account Number (SB121) : \_\_\_\_\_  
Branch: \_\_\_\_\_ Zone \_\_\_\_\_

9. PARTICULARS OF FAMILY MEMBERS OTHER THAN SPOUSE (Family as defined under  
Regulation No.2 (o) of Bank of India (Employees') Pension Regulations, 1995

Name	Relationship	Date of Birth
1. _____	_____	_____
2. _____	_____	_____

I submit herewith:-

- A certified copy of death certificate of the pensioner
- Proof of Date of Birth (in case family applicant is child)
- Latest Passport size photograph of self and Latest Passport size photograph of the next family member eligible for family pension
- Other relevant documents establishing identity such as photocopy of election identity card, PAN Card, AADHAR Card, Passport etc.
- In case of family pension for son or daughter who are physically crippled or suffering from disorder or disability of mind-certificate from the Doctor approved by the Bank to the effect that the disability or handicap is of such a nature as to prevent him / her from earning livelihood, stating exact mental or physical condition of a child (such certificate is to be produced every three years to the Bank).

I hereby declare that : -

- I have not again married / remarried
- I have been appointed / not appointed by the Bank on compassionate grounds
- I declare that the above information is true and correct.

Yours faithfully,



Signature / Thumb impression  
of the applicant / legal guardian

Witness :

(1) Signature : \_\_\_\_\_ (2) Signature : \_\_\_\_\_  
Name : \_\_\_\_\_ Name : \_\_\_\_\_  
Address : \_\_\_\_\_ Address : \_\_\_\_\_



**FOR BRANCH USE ONLY****PERSONNEL DATA OF THE DECEASED EMPLOYEE**

1. Name of the employee : \_\_\_\_\_
2. Employee ID : \_\_\_\_\_ 3. Category/Grade \_\_\_\_\_
4. Date of Birth : \_\_\_\_\_ 5. Date of Joining \_\_\_\_\_
6. Date of Cessation : \_\_\_\_\_ 7. Date of Demise \_\_\_\_\_
8. Last posting Branch & Zone: \_\_\_\_\_
9. Amount of excess pension recovered, if any: Amount: \_\_\_\_\_ (Editable) \_\_\_\_\_  
Transaction Number: \_\_\_\_\_ (Editable) \_\_\_\_\_ Date : \_\_\_\_\_ (Editable) \_\_\_\_\_
10. Details of Emoluments Actually Drawn / payable for the month prior to the date of retirement/ demise

ALLOWANCES DRAWN						
Last Month / Year	Basic Pay (Including Stagnation Increments) (Rs.)	Special Pay (Only For Award Staff) (Rs.)	Graduation Pay / PQP (Rs.)	Fixed Personal Pay (Rs.)	TPA reckoned for PF Award Staff only (Rs.)	Officiating Allowance (Rs.)
Actual Salary Drawn						
Payable for the last month						
<b>TOTAL</b>						

This is to certify that:

- The employee has opted for Pension
- No disciplinary action was initiated / contemplated/ Pending against the employee at the time of Retirement / Demise
- The information given in the sheet are verified and found correct.

**Verified and Recommendation**

**Branch recommendation Endorsed**

**Branch Manager**

**Zonal Manager/Deputy Zonal Manager**

Name: \_\_\_\_\_

\_\_\_\_\_ Zone

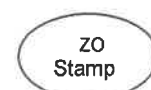
Employee ID: \_\_\_\_\_

Employee Id: \_\_\_\_\_

Branch : \_\_\_\_\_

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

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



**DECLARATION**

The Assistant General Manager /  
The Chief Manager / Manager

\_\_\_\_\_ Branch

1. I am / will be drawing Family Pension through your Branch. As required under the Bank of India (Employees') Pension Regulations, 1995 I hereby declare that till date I am, after the death of my spouse/Father/ Mother, not re-married. Further, in case I get remarried at any future date, I undertake to advise you / the Pension disbursing Branch immediately.
2. I, hereby declare that I am not employed / re-employed under Government / Public Sector Undertakings / Autonomous Body. I further declare that I am not employed / re-employed or absorbed in a Central / State Government / Corporation Undertakings or in an Autonomous Body. In the event of my employment / re-employment I shall intimate the Bank as required in Pension Regulation No.40 (1) (b) / 50.

Place :  
Date :

Signature / Thumb Impression  
(Name of the Pensioner)

**Certificate from Branch Officials**

This is to certify that to the best of my knowledge and belief the above declaration is correct and signed in my presence.

(Signature of Bank Official)

Place :  
Date :

Name:  
Employee Id:  
Designation



[ Note : This certificate is to be retained at the Branch and the Branch to inform the Head Office, Terminal Benefits Department to STOP the Pension, if the Family pensioner declares that he/she has got married, which renders him/her ineligible to draw family pension ]

## CHECK LIST

SUBMISSION OF DOCUMENTS BY FORMER EMPLOYEES/OFFICERS (RESIGNEES) AND THEIR SURVIVING SPOUSE OR ELIGIBLE FAMILY MEMBER:

Sr. no.	Document	Yes/No
<b>A.</b>	<b>In case of self-pension:</b>	
	(i) Application for option of Pension ( <b>Annexure – I</b> )	
	(ii) Pensioner's Profile ( <b>Annexure – II</b> in duplicate)	
	(iii) Nomination for Pension arrears ( <b>Annexure – III</b> )	
	(iv) Undertaking ( <b>Annexure – IV</b> )	
	(v) Identification Form ( <b>Annexure – V</b> )	
	(vi) Copy of Aadhaar Card of applicant	
	(vii) Copy of PAN Card of applicant	
	(viii) Details of last posting Branch/Office	
<b>B.</b>	<b>In case of family pension:</b>	
	(i) Application for option of Pension ( <b>Annexure – I</b> )	
	(ii) Nomination for Pension arrears ( <b>Annexure – III</b> )	
	(iii) Undertaking ( <b>Annexure – IV</b> )	
	(iv) Identification Form ( <b>Annexure – V</b> )	
	(v) Application Form for family pension ( <b>Annexure – F1</b> in duplicate)	
	(vi) Declaration regarding non-marriage/remarriage/ non-employment ( <b>Annexure- F3</b> )	
	(vii) Death certificate of former employee/Officer(resignee)	
	(viii) Copy of Aadhaar Card of applicant	
	(ix) Copy of PAN Card of applicant	
	(x) Details of last posting Branch/Office	
<b>C.</b>	<b>In case of former employee/officer (resignee) and their surviving spouse or eligible family member residing abroad</b>	
	(i) Above documents as applicable from above A or B	
	(ii) Documents attested ( by officer of Bank of India/ Authorised officer of Indian embassy/High Commission of India/Counsel of Indian Consulate of the country, Notary of the Country )	

Date:

Name :

Signature:

PF No. :