

GSCA/GS/DC

(Applicable for pension on retirement or leaving the services of employer. In case of death, another form to be used)

Manager (P&GS),  
of India, Divl. Office-I,  
C.G. Marg, New Delhi-110001

Sir,

Re. : Master Policy No. GSCA/GS \_\_\_\_\_

Fvg. Sh./Smt. \_\_\_\_\_

We are enclosing herewith claim papers Form C, Form N and two discharge receipts duly signed by member and of our existing trustees. The stamps are duly affixed on discharge receipts. The particulars of member are given under :

Address at which pension payment  
is to be made \_\_\_\_\_

PIN \_\_\_\_\_

Date of Appointment \_\_\_\_\_

Date of entry into the scheme \_\_\_\_\_

Date of exit (leaving) \_\_\_\_\_

Mode of exit (Retirement/Resignation) (specify) \_\_\_\_\_

Date of birth of member \_\_\_\_\_

Final Cont. Dt. Amount : \_\_\_\_\_

(figures & words) \_\_\_\_\_

Option to choose pension

- i) Life pension ceasing at death, No purchase price shall be paid on death to beneficiary, No guaranteed payments.
- ii) Life Pension with guaranteed payments for 5/10/15/20 years. No purchase price shall be paid on death or at end of 5/10/15/20 years guarantee. On survival to guaranteed payment pension shall be continued to be payable till life survives (Please specify period) \_\_\_\_\_
- iii) Life pension ceasing at death of member with return of capital (purchase price) to beneficiary alongwith group pension terminal bonus declared by LIC.
- iv) Joint life and Last survivor pension to member and his/her spouse (without any guaranteed payments as in case of i)
- v) Joint life and last survivor pension to the member and his/her spouse with return of purchase price on death of last survivor alongwith group pension terminal bonus declared by LIC.

Mode of payment of pension (specify specifically) (MLY/QLY/HLY/YLY)

- State whether member wants commutation of pension (Yes / No) \_\_\_\_\_ as per prevalent Income Tax Rules. (Please note that at present member can commute maximum to 1/3 (33.33%). This proportion may range maximum upto 1/2 (50%) if member is not eligible to get group gratuity.
- 0 Do you want to transfer your Annuity servicing to your nearest LIC Divl. Office specify area \_\_\_\_\_
- 1. Remittance Particulars after Last Schedule (Please attach separate sheet).

Yours faithfully,

(Signature of the member)

Name & address \_\_\_\_\_

(TRUSTEE) \_\_\_\_\_

Dated : \_\_\_\_\_