

**FORM –2**

**FORM OF APPLICATION FOR COMMUTATION OF PENSION  
AFTER MEDICAL EXAMINATION BY AN APPLICANT REFERRED TO IN RULE 18 OF THE CENTRAL CIVIL SERVICES  
(COMMUTATION OF PENSION) RULES, 1981**

**PART – I**

To  
The Director  
Saha Institute of Nuclear Physics  
1/AF, Bidhannagar,  
Kolkata-700064

Space for  
Passport Size  
Photograph

**Subject: - Commutation of pension after medical examination**

Sir,

I desire to commute a fraction my pension in accordance with the provisions of the Central Civil Services (Commutation of Pension) Rules, 1981. An attested copy of my photograph is pasted on the application and an unattested copy is enclosed. The necessary particulars are furnished below –

1. Name (in Block Letters):
2. Father's name (and also husband's name in the case of Female Government Servant):
3. Designation :
4. Date of Birth (by Christian era):
5. Date of retirement:
6. Class of Pension on which retired:
- 7.Amount of pension authorized (indicate the amount of provisional pension if full pension not authorized):
8. \*Percentage of pension proposed to be commuted:
9. Number and date of the Pension Payment Order:
- 10 (i) Branch of the Nationalized Bank with complete postal address:  
(ii) Bank Account No. to which monthly pension is being credited each month:
11. Approximate date from which commutation is desired to have effect:
12. The amount of pension already commuted, if any:

Place

Date

Signature

Postal Address:

\*The applicant should indicate the percentage of the amount of monthly pension subject to be maximum of 40% thereof which he/she desires to commute and not the amount in Rupees.

**PART – II**

**ACKNOWLEDGEMENT**

Received from Shri..... (name)..... (designation) application in

Part-I of Form 2 for commutation of a fraction of pension after Medical examination.

Place:

Date :

**Signature**

**SINP**