FORM-A

CLAIM FOR ARREARS OF PENSIONS IN RESPECT OF INDIAN MILITRY PENSIONERS/STATE FORCES PENSIONERS

PART-I

ТО		
	Name of PDA	
I	was granted pension/	CA/ JI* in the
C.N	1.A./ C.D.A P.C./ P.P.O. Nodat	ed
(D.	S.No) as amended by the C.M.A. / C.D.A	P.C./P.P.O.
No	dated and have been allotted T.S	5. / H.O. No.
	by you. I have not drawn my Pension/C.A./J.I*	for
the	period to and such a	sum of Rs.
	as per details given below may kir	ndly be paid to
me		
1	Pension @ Rsfrom to	Rs
2	Dearness Relief @ Rsfrom to	Rs
3	C.A.A. @ Rsto	Rs
	Total :	Rs
	Deduct:	Rs
	Total :	Rs

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I coul	d not d	raw my	pension/	C.A./J.	I.*	earlier	for	reasons	given	bel	ow:
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Du	ring the	aforesaid	period	, I was	neither	convicted	of any	crimina	l or
political of	ffence noi	was in re	ceipt of	any oth	er pensi	on. I was a	also not	re-emplo	oyed
under the	e Goverr	nment in	any c	apacity	(civil c	or Military)	, local	bodies	like
municipali	ities and	District	Board	during	this pe	riod [†] exce	pt from		to
I.A.F-397 in respect for which is enclosed.									

[‡]I also declare that I have/ have not re-married / married the real brother (born of same parents) of my late husband and am living communal life with and / or contributing towards the support of other eligible members of the family.

 \P I was also not kept in any Government Institution during the period for which C.A.A. has been claimed.

Yours faithfully,

illage
ehsil
ost office
vistrict
Signature of thumb impression of the pensioner

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^{*}The portion not applicable should be scored out.

[†] The portion "except from enclosed" should be scored out if the pensioner has not been re-employed at all under the Government.

[‡] To be scored out if the pensioner is not a female. In the case of female pensioner, the portion in the certificates which is not applicable to her should be scored out.

[¶]To be scored out if the pensioner has not been granted C.A.A.

PART-II

We certify that the claimant is known to us and he/she is the same person who was granted pension/C.A./J.I. * as per details given by him/her. We certify that to the best of our knowledge and belief, the statements made by him/her above are correct.

Witness No. 1	Witness No. 2
Name	Name
Signature or thumb impression	Signature or thumb impression
T.S./H.O. No	T.S./H.O. No
Station	Station
Date	Date

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PART-III

		No
		Office of the
		Date
paym arrea certif	rs are due from to	for favour of according sanction to the preferred on
• •	which the arrear have been clair	in my payment throughout the period for med and was last paid up to and for w claimed have not been paid before.
. ,		am satisfied that he / she is the sameA./J.I.* as per details given by him/her.
Tł	ne following documents are enclosed:	
(i) (ii)		pensioner
		Signature Designation of the P.D.O.

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^{*} The portion not applicable should be scored out.

[†] Where the explanation of the claimant for delay in drawing his pension/allowances/J.I. is not considered credible and satisfactory the P.D.O. willl state so and give brief reasons for his views.

[‡] If the claimant was not in his payment throughout the period for which the arrears have been claimed, the date from which and the name of the P.D.O. from whose payment he/she was transferred should be stated.