

Annexure-II

**PROFORMA FOR SECOND OPTION OF DRAWAL OF PENSION IN RESPECT OF ALL INDIA SERVICE OFFICERS.**

I, Shri/Ms/Dr (in block letters) \_\_\_\_\_ husband/Wife/S/o/D/o of Ms/Shri/Dr. \_\_\_\_\_ wish to revoke my earlier option for drawl of my pension/family pension from (please ✓) :-

- Government of India to State Government
- State Government to Government of India

**(A) Details of my pension/family pension**

(i)	Earlier Option (State or Govt of India)	Tick (✓) earlier option whichever is applicable.  (c) Zero option (d) First option
(ii)	Reasons for revoking the option	
(iii)	PPO No.	
(v)	Date of Retirement/Death	
(vi)	Name & Address of Designated Authority (State AGs or Others/CPAO etc)	
(vii)	Name & Address of Pension Disbursing Bank (authorized bank)	
(viii)	Amount of Pension	
(ix)	Residential Address	
(x)	Telephone No. (Res) or Mobile No.	
(xi)	Aadhaar Number	
(xii)	E-mail ID, if any	

**B. Details of where I wish to opt for my pension/family pension**

(i)	Name of the State Government	
(ii)	Name & Address of the Designated Authority with their Tele. Nos. (authorized bank/State Treasury/CPAO)	
(iii)	Name & Address of Authorised Bank/State Treasury (with their tele. No.)	

I undertake that this application is my second and last option for revocation of my earlier option of drawl of pension and the details given above is true to the best of my knowledge. The Second Option be treated as final..

**Note: The pensioner should attached a copy of the PPO Number and front page of the Bank Pass Book of his/her pension/family pension Account.**

Place:

Signature of the pensioner

Dated: