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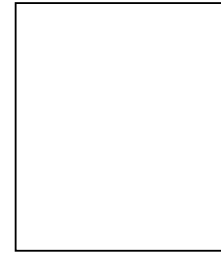
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### **AOC's NOTE**

1. Every individual after a life of sweat and toil dreams of a relaxed retired life, with the help of his retirement/ pensionary benefits. AFRO is committed to help all retiring Airmen/NCs (E) in getting their Pensionary benefits within a reasonable time. However, Pension is a team game and for timely release of Pension to the individual, all players (Individual, Unit, AFRO, JCDA (AF) and the payee Bank) have to play their role. AFRO, JCDA (AF) and the Banks understand the entire ambit of pension; however, a lot of scope exists for educating the individual and the Units on this matter. This handbook on Pensionary benefits is an effort in this direction.

2. This revised handbook has been completely restructured and improved to ensure transparency and ease of understanding. This handbook not only provides relevant information on Pension but also provides explanation regarding the various issues and procedures involved in sanction/disbursal of pensionary benefits. Besides pensionary benefits, this revised handbook also provides comprehensive information on Ex- Servicemen Contributory Health Scheme and other Post Retiral Assistance provided by AFRO and *Zila Sainik Boards*.

3. **This book is only a guide and not an authority for claiming pension or any other benefits.** The information available in this book has been updated, till the printing of this book.

Date: Aug 2009

(VK Chopra)  
Air Commodore  
Air Officer Commanding  
Air Force Record Office



### A PIECE OF ADVICE

**When an airman is in service, his complete focus is centered on his profession, his postings, his annual assessments, his promotions, and his recognition (commendations/ honorary commission etc). However, it is surprising to know that how little planning and foresight is displayed by an average airman/NC (E) towards the second innings of his life, which starts after retirement. This handbook aims to help an airman/NC (E) in understanding the rules of the game in this second innings of his life, so that he can emerge as a winner.**

## CHAPTER- I

### INTRODUCTION

#### A BRIEF ON PENSION

1. An employee governed by the Pension Scheme gets a recurring monthly payment for life and a lump sum gratuity at the time of his retirement, both determined with reference to the length of his service and the last pay drawn by him. For the PBOR who has spent all his active life in the service of the nation, pension is not only compensation for loyal service rendered in the past, but it also has a broader significance. Pension is a measure of social economic justice which provides economic security even in that stage of life when physical and mental prowess are ebbing out corresponding to the ageing process and therefore, one is required to fall back on savings. The term 'pension' has been judicially defined as a stated allowance or stipend made in consideration of past service. Thus, the pension payable to a Defence Personnel is earned by rendering long and efficient service and therefore can be said to be a deferred portion of the compensation for service rendered. In the event of his death, his spouse gets a monthly payment for life. Other beneficiaries get such payment for limited periods or for life subject to certain conditions.

2. A pension has in essence the character of a conditional entitlement and the root of the idea of pension lies in a long term relationship between the employer and the employee of a service normally spanning over employees whole working life, followed by the annuity for the rest of his life. Pension is an objective and a cherished goal one works up to and looks forward to. It is the culmination of the long journey in one's service career. Once a man has earned his pension after hard labour of several years, he can afford to relax and start enjoying the fruit as long as he is gifted to live. Pension is valuable in the sense that it is secure. The Courts will not allow refusal, reduction, forfeiture of pension unless there are genuine grounds for doing so and the employees can also seek redress in the Courts of Law, whenever, they feel that justice has been denied to them. Only misconduct of the gravest nature can lead to forfeiture of pension once sanctioned. Pension is also secure against attachment, seizure or sequestration by process of any civil court at the instance of a creditor or in satisfaction of a decree or order of any civil Court of Law (Pension can however be attached on orders of a criminal court for maintenance under sec-125 of Cr PC). Amounts owed by the pensioner to Govt, though undisputed cannot be recovered by deduction from pension except with his express consent. Pension is thus a sacrosanct and protected possession and is therefore, greatly valued.

#### TYPES OF PENSION

3. The various types of pensionary awards admissible to Airmen/NCs (E) are as follows: -

- (a) **Service Pension** (Min qualifying service **15 years** for Airmen & 20 yrs for NCs(E).
- (b) **Invalid Pension** (If not eligible for Service/disability pension & qualifying service is ten yrs or more).
- (c) **Disability Pension** (If disability is attributable to or aggravated by military service & disability percentage is 20% or more).
- (d) **Family Pension** (The widow / Next-of-Kin will get Ordinary, Special or Liberalized Family Pension depending upon the circumstances of death).
- (e) **Gratuity** (The amount of gratuity will differ as per length of service and the circumstances of discharge i.e. Retirement with pension / without pension, Medical Invalidment, Death etc.)
- (f) **Ex-gratia payment** (One time lump sum payment for families of Defence service personnel who die during the performance of their bonafide official duties).

- (g) **Constant Attendance Allowance** (Given on Medical Board Recommendation for 100% disabled ex-airmen drawing disability pension)  
 (h) **Special Pension and Gratuity** (As decided by Govt).

## **AN OVERVIEW OF AFRO**

4. Pension and Welfare Wing of AFRO is directly responsible for all pensionary matters of Personnel Below Officer Rank (PBOR). However, Pension and Welfare Wing works as a team with other wings of AFRO. It has to be understood that if everything else (during the service period) has gone off well, only then the pension settlement will also go through smoothly. However, if there are any problems with qualifying service, authorized entitlement of leave, promotion dates and correctness of critical data in the RCSR etc, it will adversely affect the pension.

5. Since AFRO will be the most important organization in the post retired life of Airmen / NCs (E), therefore, it is desirable for airmen/NCs (E) proceeding on retirement to have a brief overview of AFRO:

- (a) Record Office was formed in 1939 at Ambala. Thereafter it moved to Walton, Lahore in 1941.
- (b) However in 1942 it moved again and was merged with Base Personnel Office at Bombay.
- (c) In 1945 it was re named as IAF Record Office.
- (d) In 1947 it was moved to New Delhi. In the year 1958 it was merged with Dte of Personnel Airmen & Civilians at Air HQ.
- (e) In Aug 1966 an independent Unit (Called as AFRO) was formed at Subroto Park, New Delhi and till date this office is operating from Subroto Park.
- (f) The complete spectrum of personnel management of Personnel below Officer Rank (PBOR) right after recruitment till death and thereafter the release of family pension is handled by AFRO.
- (g) For serving Airmen activities like Postings, Promotions, Placements, Extension of Service, Discharge, Grant of Hony Commission, Issue of various medals, detailing for courses within India and abroad, Maintenance of service records etc. is routinely done at AFRO. In addition, the Pension and Welfare Wing of AFRO actively looks after the Pension and Welfare aspects of our PBOR after retirement.

## **ROLE OF OTHER AGENCIES**

6. Besides internal co-ordination within the AFRO, the Pension and Welfare Wing co-ordinates with other agencies like JCDA (AF) Subroto Park, PCDA (P) Allahabad, AFGIS, AFCAO, IAFBA etc. After retirement there could be a requirement for an ex Airman/NC (E) to ask queries on Pension and other NE benefits. For appropriate response, the query must be addressed to the concerned agency, which has jurisdiction over the subject matter of query to ensure effective correspondence after retirement. Subject matter and the name of concerned agencies are as given below: -

<b><u>Subject</u></b>	<b><u>Agency to be contacted</u></b>
<b>Pay, Allowances, Provident Fund, Leave Encashment (LE)</b>	AFCAO (OIC NEAS), Subroto Park, ND – 10 Tele:011-25687194/7585,Fax: 011-25696366 Mobile: 09650276959
Air Force Group Insurance Scheme Post Retirement Insurance Cover	Secretary, AFGIS, Subroto Park, ND-10 Tele: WAC –Extn - 7855 & Civil - 25694068
Re-employment and self employment	(a) Dte of Resettlement Armed Forces, West Block IV, RK Puram, ND-66 Web Site: <a href="http://www.dgrindia.com">www.dgrindia.com</a> (b) AFRO (Placement Cell), Subroto Park New Delhi-10, Tele: WAC –7785, Tele / Fax: 011-25696359, E-mail: <a href="mailto:afro[at]iaf[dot]nic[dot]in">afro[at]iaf[dot]nic[dot]in</a> , <a href="mailto:placement[dot]iaf[at]nic[dot]in">placement[dot]iaf[at]nic[dot]in</a>

(c) Zila Sainik Board

<b>Subject</b>	<b>Agency to be contacted</b>
<b>All matters of Welfare (PORs, Death, Birth, Divorce entries in Docs, Counting of former service, NOC &amp; Other certificates)</b>	(a) AFRO (Pen-Wel Wg), Subroto Park, ND-10. Tele: WAC – 7551, 7529,7597, 7592 Fax: 25696359. E-mail: <a href="mailto:afro[at]iaf[dot]nic[dot]in">afro[at]iaf[dot]nic[dot]in</a>
<b>All matters pertaining to award of Pensionary benefits/ Gratuity /Revision of pension etc.</b>	(a) AFRO (Pen-Wel Wg), Subroto Park, ND-10. Tele: WAC – 7551, 7529,7597, 7592 Fax: 25696359. E-mail: <a href="mailto:afro[at]iaf[dot]nic[dot]in">afro[at]iaf[dot]nic[dot]in</a>  (b) O/o JCDA, Subroto Park, ND-10 Tele: 25693334, 25695012  (c) O/o PCDA (P) (Air Force Cell), Draupadi Ghat, Allahabad. Web site: <a href="http://pcdapension.nic.in">http://pcdapension.nic.in</a>
Ex-servicemen Contributory Health Scheme (ECHS)	(a) OIC ECHS (Pen & Wel Wing) Air Force Record Office Subroto Park, New Delhi – 110 010 Tele: 25687194-Extn –7551, 7592  (b) Nearest ECHS centre
Assistance from IAFBA	Director IAFBA, Subroto Park, ND-10 Tele: WAC – 7854 & Civil 25691367
<b>For all types of query with AFRO</b>	Information and Query Cell, AFRO Tele: 25696359, WAC -7553, Fax: 25696359 E-mail: <a href="mailto:afro[at]iaf[dot]nic[dot]in">afro[at]iaf[dot]nic[dot]in</a>
For all pension related query, by Post	SWIFT, AFRO, Subroto Park, ND-10 Tele: 011-25694815, WAC -7551,
Matters concerning purchase of ration and canteen facilities	Nearest Air Force Unit

**Civil Numbers of WAC Exchange: 011 –25687194-95,25697551 to 55**

**f**

***THINK IT OVER***

*“ DO NOT SCOFF AT STATEMENTS OFFERED TO YOU TODAY- THE TRUTH OF WHICH YOU CANNOT COMPREHEND; FOR TIME MAY BRING YOU BETTER UNDERSTANDING AND YOU MAY TOMORROW HAIL AS TRUTH THAT WHICH TODAY YOU RIDICULE ”.*

## CHAPTER – II

### SERVICE PENSION

#### INTRODUCTION

1. Oxford dictionary defines Pension as a regular payment by the government/pension fund. The terms and conditions for eligibility to Service Pension are different for airmen and NCs (E). Though pension has a very old history however for every individual who is going out of service, getting his own pension is his first experience. For the purpose of Pension, AFRO is basically a front end processing agency for Airmen/NCs (E) however the financial power to issue Pension Payment Order (PPO) for Defence, vests with the financial watchdogs of the Government i.e. Controller General of Defence Accounts/ his representatives. For IAF the pension is issued by Joint Controller of Defence Accounts (JCDA) Air Force, Subroto Park, New Delhi-110010. If AFRO & JCDA are satisfied on the eligibility conditions of an airman then a PPO will be issued by JCDA (AF). This PPO will be in **six** copies. AFRO will dispatch one copy to the individual (With Pension Book), One copy to the Pension Disbursing office (Bank/ Treasury Office/ Defence Pension Disbursing Office) and one copy is filed in the individual's Record copy of sheet roll (RCSR) at AFRO. Fourth & fifth copy of PPO is retained by the Office of JCDA (AF) and the sixth copy is forwarded to Office of PCDA (P) Allahabad (Principal Controller of Defence Accounts (Pension)) for record purpose. The Pension Disbursing office (PDO) is a financial authority in itself and therefore it has the power to satisfy itself on the identity of the pensioner and the genuineness of the PPO. It is therefore very important that each and every Airman eligible for Service Pension (SP) understands the salient aspects of the SP and avoids injecting inadvertent mistakes into his Pension papers and service documents. It must be remembered that any mistake in pension papers/ service documents will invariably results in audit objection and consequent delay in the release of Service Pension.

#### ELIGIBILITY TO EARN SERVICE PENSION

2. The terms and conditions for eligibility to Service Pension are different for airmen and NCs(E). Everyone who joins as an airmen & NCs (E) in IAF can become eligible for Service Pension if he meets the following service conditions as laid down in Para 121 of Pension Regulation 1961(Part – I) for airmen and in regulation 145 of pension regulations for Army (part-I) {for NCs(E)}:

- (a) **Eligibility for Airmen** : A minimum of **15 years of qualifying service.**
- (b) **Eligibility for NCs (E)** : A minimum of **20 years of qualifying service.**

#### ADDITIONAL PENSION ON ATTAINING THE AGE OF 80 YEARS

3. An additional pension/family pension to the pensioners has been introduced **with effect from 01.01.2006 vide, the Circular No. 397 & the GOI MOD Letter dated 18 Nov 08 & 11 Nov 08** respectively. The additional quantum of pension/family pension, on attaining the age of 80 years and above, **would be admissible from the 1<sup>st</sup> day of the month in which his/her date of birth falls.** The quantum of additional pension/ family pension available shall be as follows: -

<b>Age of pensioner/ family pensioner</b>	<b>Additional quantum of pension</b>
From 80 years to less than 85 years	20% of revised basic pension/ family pension
From 85 years to less than 90 years	30% of revised basic pension/ family pension
From 90 years to less than 95 years	40% of revised basic pension/ family pension
From 95 years to less than 100 years	50% of revised basic pension/ family pension
100 years or more	100% of revised basic pension/ family pension

The amount of **additional pension** as per entitlement **will be paid by the PDA automatically, where the date of birth of the pensioner/family pensioner is available** in the PPO/Descriptive Roll and shown separately in the pension payment scroll/ pension payment voucher/schedule/journal.

In cases where the **date of birth** of the pensioner/ family pensioner is **not available** in the PPO/ PDA/Bank records, the same shall be **forwarded** by the pensioner to the Records Office along with **attested photocopy of discharge book and proof of the date of birth of surviving spouse**. The authenticity of the age declared by the pensioner/ family pensioner shall be verified by the Records Office and forwarded to the Pension Sanctioning Authority (PSA) for notification of date of birth through a Corr PPO. A format of application for additional pension on attaining 80 years of age and above is attached as **Appendix 'A'** to this book, which is to be submitted to this Office by the pensioner.

#### **ROLE OF UNIT IN ENSURING THE CORRECTNESS OF PENSION PAPERS**

4. **As a first agency responsible for initiating and verifying the pension claim, the role of the parent unit becomes important.** The activity chart for the unit is attached as **Appendix 'E'** to this book. The following ambiguities / irregularities in finalization of the cases can be checked at unit level:

- (a) At times the Airmen / NCs (E) are not briefed clearly about the difference between qualifying service and total service for eligibility to pension. This understanding is crucial for exercising the option of unwillingness for further extension of service.
- (b) Airmen / NCs (E) are not routed for final clearance in time. The importance of final clearance at AFRO for clearing visible/invisible Pension related complications of the individual is sometimes not understood at unit level.
- (c) Delay by unit in obtaining CFA sanction for regularization of abnormal leave, will delay the release of Pension.
- (d) Non qualifying periods as given below are not mentioned correctly in column no-17(a):
  - (i) **AWL (If punished)**
  - (ii) **Detention by Court Martial**
  - (iii) **Period under civil custody**
  - (iv) **Extra ordinary leave due to AWL**
- (e) Incorrect promulgation of entries in NE POR and late despatch of the same by the unit.
- (f) At times wrong issue of service details in discharge certificate with special reference to airmen proceeding on discharge on own request/SNLR/Medically invalidated out etc causes subsequent complications in their Pension.
- (g) Typed / handwritten signature block of Adjutant (Commissioned Officer) / CO / Stn Cdr / AOC is not to be made but Rubber Stamp is to be affixed at all places in pension papers.

5. The units are required to forward the following documents to O i/c RW (Co-ord) AFRO within three weeks of receipt of discharge order: -

- (a) Updated CTC of unit copy of Sheet Roll (UCSR) duly countersigned by Adj/CO.
- (b) Appx 'B' to AFO 40/89 (Application cum sanction for encashment of leave in triplicate)
- (c) Requisite information as called for vide Appendix 'A' to AFRO letter No RO/2901/1/Pen Wel (Adm) dated 05 Feb 99 is appended as **Appendix- 'F'** to this booklet.
- (d) The Adjutant is to review the UCSR for accuracy and completeness in all respect and bring it upto date. (Refer Appx 'A' SI No. 01 to AFO 133/98 and para 9 of AFO 40/89).

Note: - Leave availed and leave encashed vide a, b & c should tally.



6. The units are required to despatch certain documents to O i/c Pen & Wel Wing, AFRO eleven months before the date of discharge. Specimen of these documents is attached in this booklet as **Appendix-‘G’**. The list of these documents is as follows:

- (a) IAFF (P) 28 (Descriptive Roll) - Two copies
- (b) AFF (P) 61 (Roll of airmen) - Two Copies
- (c) Annexure ‘A’ to Govt of India, MoD Letter A/47226/GPS 4/(b)/2095/B/D/Pen/Ser dated 03 Aug 84) (Details of family) - Two copies.
- (d) Form ‘A’ (Nomination Form) - Three copies
- (e) Form of Application for commutation alongwith Declaration - Two copies
- (f) Medical Certificate –In original, as per Air HQ letter No Air HQ/26481/Med-7 dated 24 Jun 2002. - Two copies
- (g) Joint Photograph duly attested by Commissioned officer at front in civil clothes - Four copies
- (h) Single Photograph in Uniform duly attested with Service Particulars on reverse - Two copies
- (j) One Copy of the ECHS form to be purchased from AFRO (ECHS) Section during final clearance at AFRO. The form is available in AFRO website [www.afro.nic.in](http://www.afro.nic.in) and Army HQs website [www.indianarmy.nic.in/arechs.htm](http://www.indianarmy.nic.in/arechs.htm) the same can be downloaded.

7. On receipt of pension claim/papers, AFRO processes the case for award of pension and maintains close liaison with Pension Sanctioning Authority (Audit) and other agencies concerned with the pensionary aspects. AFRO monitors the movements of documents through its Liaison cell and clears the audit objections expeditiously so that Pension Payment Order (PPO) is issued by PSA within the specified time limit. The combined effort (Parent unit, individual, AFRO, AFCAO and JCDA) finally culminates in the issue of Pension Payment Order (PPO).

8. **Certain important documents/papers must be preserved by a Service Pensioner.** Pensioners are advised to preserve the under mentioned service documents/papers, for revision of pension/family pension claim at a future date:-

- (a) **Pension Book.**
- (b) **PPO/Corr PPO.**
- (c) **Discharge Book**
- (d) **Ex-servicemen Identity Card issued by Zilla Sainik Board (ZSB)**
- (e) **Retired Officers Identity Card (Applicable only for HFO/HFL)**
- (f) **AFWWA membership Card**
- (g) **PRIC (Post Retirement Insurance Certificate) issued by AFGIS.**
- (h) **Last Pay Certificate (LPC)**
- (j) **Photocopy of Unit Copy of Sheet Roll.**
- (k) **ECHS Smart card**

**POINTS TO BE CHECKED IN SERVICE DOCUMENTS, DURING ANNUAL PERUSAL/FINAL CLEARANCE AT AFRO**

9. Every Airman is required to check his documents annually. During this annual perusal he must look at the correctness of following details:

- (a) Correctness of Name/ Initials/date of birth for self, wife and children.
- (b) Date of enrolment should be correct.

- (c) Correct record of all movements on posting and attachment.
- (d) Record of Additional Pay to which you are entitled such as GCB, PJI, FPA, officiating allowances, Gratuity and Annuity for awards.
- (e) Correctness of entries pertaining to various reclassifications, promotions including restoration of former rank during service career and their effective dates.
- (f) Record of Attestation in the IAF.
- (g) Record of various examinations, courses and tests passed.
- (h) Correctness/updation of Educational qualifications.
- (j) Record of admissions/Discharges to and from SSQs/Hospitals.
- (k) Correct record of AWL (Commencement/Cessation) in Section II and disposal thereof in Section IV or VI, if any.
- (l) Correct particulars of Next-of-Kin, names of heir to estate and family Pension.
- (m) Correctness of all the leave entries recorded in the documents and accumulation of leave for encashment.
- (n) Correct Permanent home address.
- (o) Noticing and rectifying any other anomaly.
- (p) Any period spent in civil custody must be regularized to avoid the problems which may arise during finalization of pensionary benefits.

### **COMMON ERRORS IN FILLING UP PENSION CLAIM FORMS**

10. The following common errors which can result in delay /subsequent problems in grant of Revision of Pension/ Family Pension should be avoided by all airmen while filling up their Pension papers:

- (a) Submission of incomplete pension papers/ non-submission of pension papers by due date.
- (b) Non submission of the joint photographs (husband & wife) of the individual by the unit/ individual along with pension papers.
- (c) Incorrect records of leave accumulation, non-adherence to approved copy of Appendix 'B' to AFO 40/89.
- (d) Incorrect reflection of Non - Qualifying Period of service and delay in obtaining CFA sanction for regularization of leave related abnormalities. These results in audit objection and delay in release of pension
- (e) Incorrect promulgation of various entries in NE POR and also late despatch of the same to AFRO/AFCAO.
- (f) Opening of Pension bank account (as per name in discharge order in an authorized Pension Disbursing Bank), is a must for service pension. However, withdrawal of pension from joint account is permitted.

(g) Pension account is not opened in the authorized bank/link branch as recommended by AFRO through a handbook containing state wise address of banks authorized for pension disbursement. This handbook has been issued to all units of IAF. Opening of Pension account in a bank which is not authorized to disburse pension will result in dishonoring of PPO at the time of first pension collection.

(h) As far as possible, pension account number once submitted should not be amended later on. If it is amended later on, then Pension can get delayed.

(j) While filling up pension papers, individuals are writing different addresses in different forms i.e. (IAF (P) 61, Nomination, Commutation form and IAF (P) 28. At times, the permanent home address is mentioned in column No 7 of IAFF (P) 61. This address should be the same where the individual wants to receive his PPO. Correct information on address will rule out any possibility of non-receipt of PPO/Pension Book by the individual.

(k) Incomplete bank details are given in pension papers i.e. individual not mentioning Bank name and branch clearly. At times individuals are mentioning different branch names in pension papers. Full details of PDO (Bank name, branch, Distt & State) are not mentioned. If a new district/ state is formed, the individual should also mention old district/state in his PDO details. Pensioners desiring to get their pension credited to a joint account are required to submit an application to the branch bank, from where they wish to draw pension. The pensioner's spouse in token of having accepted the terms and conditions laid down in GOI, Min of Finance Office Memorandum No, would also sign this. CPAO/Tech/Amendments/Sch.Book/2005-06/69 dated 09 Jun 2005. (Format of application is given at **Annexure 'C'**)

(l) Joint photograph should be attested in front and not at the back. Service Number and Date of Discharge should be clearly written at the back of the photograph. Joint photographs (self and wife only) should be affixed in the place for details of family. However in most cases individual submit joint photograph with children included, which is not correct. Only passport size and latest photograph should be submitted, Photograph should be developed from the negative and should not be a photocopy/Scanned photograph.

(m) Individuals are submitting extracts/amended medical certificate instead of original medical certificate with pension papers. Since medical certificate is a must for calculation of commutation for all airmen/NCs(E), therefore original medical certificate is a mandatory audit requirement. Extract/ amended medical certificate will get rejected in audit.

(n) Normally, page-6 of Form IAFF(P)-28A (Revised) does not contain thumb impression, whereas the same is required and has been clearly mentioned in page-3 of Form IAFF(P)-28A (Revised).

(p) Overwriting/using of whitener and illegible writing in the pension papers increases their vulnerability to Audit objections and consequent delay in pension

(q) Pension papers should not be submitted in mutilated forms or in a bad condition. Such pension claims are liable to rejection by AUDIT.

(r) Airman who are Bachelors are submitting joint photographs along with their parents in place of own single photograph. Only single photograph is required.

(s) Unit must ensure that all the pension papers must be signed in ink and not with carbon. Only commissioned officer's signatures (as Adjutant) in pension papers is valid in Audit.

(t) Unit must ensure that individuals discharged on compassionate grounds at own request, must give an undertaking along with their pension claim that they will not claim their NE benefits for one year from their DOD, because that is the normal processing time required to release Pension.

(u) At times the spouse does not sign the pension papers for joint notification of pension. This can cause delay in release of pension. In case of any serious marital discord/divorce proceedings etc where the wife does not cooperate and refuses to sign pension papers /pose for joint photograph, then the individual can submit a certificate to this effect countersigned by his commanding officer. Thereafter his Pension will be processed without his wife's name. However, it must be understood that in such a case, if he expires before legal divorce from court of law, his wife will still get family pension after fresh audit of her case.

(v) In many cases, name of self as per discharge order and names of wife and children as per service records are not mentioned in pension papers. Also in some cases details of date of birth of wife is not mentioned. Mentioning of correct Date of Birth of wife is a mandatory requirement.

(w) Cause and clause of discharge are not mentioned correctly in column No 18 of IAFF (P) 61.

(x) Three specimen signature of individual are not attested by competent authority at column NO 22 of IAFF (P) 61. The signature of witnesses is not found completed in form 'A'.

(y) Medical certificate (as per Air HQ letter No. Air HQ/26481/Med-7 dated 24 Jun 2002) not submitted in original. Extract/Xerox copy of medical certificate is not accepted in audit. Therefore, medical certificate in original is mandatory for sanction of commutation of pension. Cutting / overwriting / amendments in medical certificate (for commutation) is not accepted in audit. Date of discharge must be shown on the day on which the individual served last (A/N) and not SOS date (F/N).

(z) In some pension papers it is seen that Commutation / Declaration forms are addressed to PCDA (P), Allahabad. It should be addressed to the Addl CDA (Air Force), New Delhi – 10 only.

## **ROLE OF AFRO, AFCAO, JCDA (AF) AND THE TIME FRAME OF ACTIVITIES**

11. The Pension and welfare Wing (P&W Wing) of AFRO is basically responsible for all pensionary matters. The P&W Wing primarily acts as a processing agency, which receives the pension claims and forwards it to JCDA at D minus 8 (discharge date minus eight) months along with the individuals Record Copy of Sheet Roll (RCSR), through AFCAO (for financial details). The pension claim forms are forwarded from P&W Wing along with LPC – DS (last pay certificate/data sheet). Before forwarding of updated RCSR to P&W Wing, the Recording Wing (RW) gets every RCSR scrutinized by the concerned airman, for any possible error, during his final clearance visit at AFRO.

12. After audit at JCDA, the PPO is issued by JCDA (normally at D minus 6-8 weeks) and AFRO dispatches the same to the individual and the payee bank. For airman who is superannuating, the individual copy of PPO is dispatched to the CO/AOC of parent unit for handing over to the retiring airman on the last day of his service. Similarly for superannuating airmen, the bank copy of PPO is dispatched at least one month in advance. For airmen who are proceeding on discharge after expiry of regular engagement, the PPO is dispatched from AFRO only after receipt of a signal from the parent unit that the airman has actually become non-effective. This extra precaution is due to the fact that some airmen eventually become eligible for extension and continue in service. The advance dispatch of PPO in such situations can lead to financial frauds at banks etc. For airman who proceeds on discharge at own request, the normal advance processing time of 9 months after receipt of pension papers is not available. Therefore such airmen are likely to get their pension at discharge date plus 10-12 months (9-months after receipt of pension paper at AFRO). To reduce avoidable correspondence, it is mandatory for an airmen going out of service at own request, to submit a certificate that he is willing to accept 12 months delay in pension and that he will not represent on this count.

13. After payment of service pension the **RCSR** of an airman is forwarded to Disability Pension Section for issue of PPO and endorsement (in case of accepted cases only) and later to Recording Wing for updating with Non Effective POR received from the parent unit. Thereafter, the RCSR moves to AFCAO for payment of Leave Encashment (LE) and IRLA balance. Leave Encashment being a large

amount, is more attractive to the pensioner that is why it is given immediate priority after issue of PPO. Payment of LE and IRLA balance by AFCAO normally takes D+4-6 months. Rank revision (normal promotion /HFO, HFL) is undertaken after the receipt of RCSR from AFCAO (after payment of leave encashment at D+4-6 Months). The processing/audit time for rank revision is 4-6 months. Therefore the corrigendum PPO for rank revision can only be issued at D +8-10 months. However, in case of normal promotion (D+7Months and more), if the promotion POR (acting unpaid and paid both) reaches AFRO up to D minus 5 months also, then it is possible to give higher rank Pension by D (discharge date).in such cases there will be no requirement for revision after discharge.

### **COMMUTATION OF PENSION**

14. Following are the salient aspects of the Commutation of pension: -

- (a) Personnel can commute a portion of their service pension not exceeding **50%** of their pension. Relief with pension is not commutable.
- (b) Pension may be commuted at any time after retirement/ release/ Invalidment. It can also be commuted more than once provided the overall commuted pension is within the maximum limits of **50%**.
- (c) Individuals who apply for commutation of pension within one year of date of discharge are exempted from civil medical examination and the medical certificate issued at the time of release medical examination is accepted by the Pension Sanctioning Authority.
- (d) Age of pensioner for commutation purpose is taken as the age he will attain on the next birthday **following the date on which the commutation becomes absolute**. Commutation table is attached as **Appendix-‘B’**.

**Note 1:** The individual is paid residual pension after the commutation. However, he is entitled for DR on full Basic Pension (including the commuted amount).

**Note 2:** Commuted portion of pension will be restored by Pension Disbursing Office (PDO) on completion of 15 years from the date of actual commuted value of pension paid/deduction of commuted portion of pension. PDOs are to restore the commuted portion of pension automatically in terms of **PCDA(P) circular No 28/GI/C/4/Vol-IX/Tech dated 13 Jun 2002**. However, it is prudent on the part of the pensioner to remind his PDO in writing to restore the commuted value of pension. A format of application for restoration of commuted portion of pension after 15 years is attached as **Appendix-‘C’**.

### **DEATH CUM RETIREMENT GRATUITY (DCRG)**

15. Airmen who are discharged from the service and who earn a pension are entitled to DCRG while those who do not earn pension get service gratuity and DCRG, both. The rate of DCRG is half months emoluments, for each completed year of service, subject to a maximum of 16.5 months emoluments. DCRG limit is Rs. 10 lakhs as per **Govt of India, MOD letter No. 17(4)/2008(2)/D (Pen/Policy) dated 12 Nov 2008**. The formulae for calculating Service Pension, DCRG and Commutation are given as **Appendix-‘D’**.

### **NON-QUALIFYING PERIOD FOR COUNTING OF SERVICE FOR THE PURPOSE OF PENSION.**

16. The following periods do not qualify towards counting of pensionable service as laid down in para 111 of Pension Regulation 1961 (Part – I): -

- (a) **Period of absence without leave.**
- (b) **Period under civil custody.**
- (c) **Detention period awarded by court-martial.**
- (d) **Period of absence regularized as EOL.**

## **PROVISIONS OF CONDONATION OF DEFICIENCY IN SERVICE FOR SERVICE PENSION**

17. **As per Para 114 of Pension Regulation 1961 (Part – I) and Govt of India, MOD letter No 4684/Dir (PEN)/2001 dated 14 Aug 2001** deficiency in service, for eligibility to service pension or reservist pension or gratuity in lieu may be condoned by AOC, AFRO upto six months and deficiency upto 12 months can be condoned by Air HQs in each case, under the provisions of Govt of India MOD letter No 4684/DIR (Pen) 2001 dated 14 Aug 2001 except in the case of: -

- (a) **An individual who is discharged at his own request, or**
- (b) **An individual who is eligible for special pension or gratuity, or**
- (c) **An individual who is invalided out of service with less than 15 years of service.**

## **PENSION DISBURSING AUTHORITIES**

18. Pension can be paid through any of the following pension disbursing offices:

- (a) **Defence Pension Disbursing Office (DPDO)**
- (b) **Treasury Office (TO)**
- (c) **Post Master (PM)**
- (d) **Public Sector Banks (PSBs)**
- (e) **Private Sector Banks such as ICICI, IDBI, HDFC and Axis Bank Ltd.**

Note: The individual in person must collect the first pension along with commuted value of pension and DCRG.

## **PAYMENT OF PENSION THROUGH JOINT ACCOUNTS**

19. **GOI, MOD, Deptt of Expenditure, Central Pension Accounting Office vide their office memorandum PAO/Tech/Amendments/Sch. Book/2005-06/69 dated 09 Jun 2005** has permitted crediting of pension into joint account operated by Pensioner with his/her spouse in whose favour an authorization for family pension exists in the Pension Payment Order (PPO). The joint account of the pensioner with the spouse will be operated by 'Former or Survivor' basis subject to certain conditions -

- (a) Once pension has been credited to a Pensioner's joint bank account, the liability of the Govt/Bank ceases. No further liability arises even if the spouse wrongly draws the amount.
- (b) As pension is payable only during the life of a Pensioner, his/her death shall be intimated to the bank at the earliest and in any case within one month of demise so that the bank does not continue crediting monthly pension to the joint account with the spouse after the death of the Pensioner. If however, any amount has been wrongly credited to the joint account, it shall be recoverable from the joint account and/or any of the account held by the pensioner/spouse either individually or jointly. The legal heirs, successors, executors etc. shall also be liable to refund any amount, which has been wrongly credited to the joint account.

## **PROCEDURE OF SUBMISSION OF ALIVE CERTIFICATE**

20. Every year in the month of November, pensioners are required to submit "Alive Certificate" (a certificate to the effect that the pensioner is alive) duly signed by a Gazetted Officer to his PDO. For those proceeded abroad, their alive certificate will be signed by Indian Embassies abroad. The pension, if not drawn for three years, becomes time barred and requires sanction of the competent authority.

In cases, where pension is not drawn within one year, the pensioner has to approach his PDA with explanation for delay, non re-employment and non-conviction certificates. PDAs have the powers to make payment of arrears upto 3 years. O/o PCDA (P), Allahabad can sanction arrears claims beyond 3 years. In this case the matter will be reported to the O/o PCDA (P), Allahabad by the PDA alongwith the following documents:

- (a) Form 'A' (IAF (CDA) 651) duly completed in all respect.
- (b) Copy of PPO.
- (c) Copy of Pension certificate showing the last date of payment.
- (d) Calculation sheet in duplicate duly signed by PDA.
- (e) Copy of IAFF (P) 28'A' (Descriptive Roll)
- (f) Non-conviction certificate issued by civil (Local Police) authority.
- (g) Reasons for not claiming pension for such a long time.
- (h) Reasons for non-payment of pension by the PDA.
- (j) A certificate to the effect that arrears are still due and not paid earlier.
- (k) Re-employment / Non employment certificate.
- (l) Alive certificate.

### **CHANGE OF PENSION DISBURSING OFFICE**

21. Change of PDO involves transfer of vital pension papers from one PDO to another or from one PDO to another PDO. AFRO has no direct role in this change. This is the matter between the two PDOs who are involved in the transfer. For the purpose of transfer a simple application to the PDO should be adequate. However based on our experience at AFRO we would like to advise that change of PDO should be a well considered decision because at times the pension papers are despatched by the old PDO but are not received by the new PDO. This results in discontinuation of pension for 6-8 months before the situation can be resolved and the pension can be re-started through a fresh PPO.

### **PROCEDURE FOR DRAWING PENSION FOR THOSE RESIDING ABROAD**

22. For airmen residing abroad, a Non Resident Indian account can be opened in any branch of a nationalized bank. The bank thereafter collects pension, if given power of attorney on pensioner's behalf. With power of attorney, the bank normally collects individual's pension once a year only. Should there be any query on this matter, OIC Audit / PSB Cell, O/o PCDA (P), Allahabad can be approached. Based on our experience we would like to caution here that any casual attitude in handling pension matters while residing abroad can lead to stoppage of pension. Once pension is stopped it is a very cumbersome and time-consuming process to re-start it.

### **OCCASIONS WHEN PENSION CAN BE STOPPED**

23. Though pension is the right of a Govt. employee; it can be stopped on following occasions as laid down in para 108 of Pension Regulation 1961(Part – I): -

- (a) **Grant of pension is subject to future good conduct:** Future good conduct shall be an implied condition of every grant of a pension or allowances as per Para 4 of Pension Regulation for the Air Force 1961 (Pt-I).
- (b) **Pensioners convicted of serious crime or guilty of grave mis-conduct** The pension of a pensioner, who is convicted of a serious crime by a Court of Law or is guilty of grave misconduct, shall be liable to be withheld in whole or in part as per para 108 of Pension Regulation for the Air Force 1961 (Part-I). It is advisable for a pensioner to obtain quick bail / anticipatory bail if he is arrested / likely to be arrested and thereafter defend his case in the Court of Law.
- (c) In case the pension is not drawn for more than five years; pensioners name is likely to be struck-off from pension establishment.
- (d) Pension is liable to be forfeited if a pensioner is found guilty of grave, misconduct of a Political or other nature under the provisions of Pension Regulations for the Air Force 1961.
- (e) If a pensioner has changed his / her Nationality and has become a citizen of a foreign state, then his/her pension is required to be immediately stopped by his Pension Disbursing Office (PDO). Thereafter, the pensioner is required to apply to PCDA (P), Allahabad through his

PDO alongwith copy of new nationality certificate for restoration his pension. PCDA (P), Allahabad will take appropriate decision on this matter based on the merits of each case.

### **PROCEDURE FOR CONDUCTING OF BELATED RME/RMB**

24. All ranks of the armed forces are to be medically examined by a duly authorized medical board / medical officer prior to their release / retirement / discharge / dismissal. In case the Release Medical Examination is held before retirement / discharge and approved by competent authority after actual date of retirement / discharge or RMB is not held before retirement / discharge, due to various personal or administrative reasons, the authority to regularize such delay is GOI MoD letter No. 10/(1)/87/D/Pen-C dated 13 Nov 1987 (as amended) which is as under: -

**(a) Regularization of cases where release medical examination is held before retirement / discharge and approved by competent authority after actual date of retirement / discharge.**

<b><u>Type of Cases</u></b>	<b><u>Period of Delay</u></b>	<b><u>Authority to regularize Proceedings</u></b>
PBOR (All medical categories)	Up to 1 year from date of discharge / Retirement	CDA (Air Force)
	More than 1 year from date of discharge / Retirement	ACAS (PA & C)

**(b) Regularization of cases where release medical examination is not held before actual date of retirement / discharge.**

<b><u>Type of Cases</u></b>	<b><u>Period of Delay</u></b>	<b><u>Authority to regularize Proceedings</u></b>
PBOR in medical category 'AYE'	Up to 2 years	AOC AFRO
	More than 2 years	ACAS (PA & C)
PBOR in low medical category	Up to 2 years	DPA
	More than 2 years	ACAS (PA & C)

However before submitting such cases to Officer-in-charge Record Office or Air HQ, the SOC must be raised and five copies (ink signed) should be annexed with RME/RMB proceedings.

### **FREQUENTLY ASKED QUESTIONS**

**Q.1. I have proceeded on discharge two months back however I have got my copy of PPO, the bank has not received its copy of PPO therefore my pension is held up. Please do something.**

**ANS** All PPOs are dispatched through Registered post therefore the chances of transit loss are very less. As per the existing procedure, the PPOs are despatched through link bank, from where the PPO is redirected to payee branch after making necessary records. The despatch of the PPO from the link bank to the payee branch is a weak link and a lot of delay can take place, if the link bank is not giving it due priority. The pensioners must resolve the issue with this link bank, to payee branch transfer through representation/liason with the bank. If after all efforts the bank states that they haven't received the PPO, then the bank will be required to send a 'Loss Certificate' to AFRO. Based on this loss certificate AFRO will initiate necessary action for issue of duplicate PPO by JCDA. It must be remembered that a loss certificate is a precaution against double payment of pension/ fraud. Therefore without loss certificate, duplicate PPO will not be issued by the financial watchdogs i.e. Office of JCDA (AF).



**Q.2. How many period of deficiency in service can be condoned by the AOC, AFRO?**

**ANS** Deficiency in service, for eligibility to service pension or gratuity in lieu may be condoned by the AOC, AFRO up to six months in each case. However AIR HQ can condone deficiency in service up to 12 months. This condonation, however, cannot be given in following cases:

- (a) An individual who is discharged at his own request
- (b) An individual who is eligible for special pension or gratuity
- (c) An individual who is invalided out of service with less than 15 years of service.

**Q.3. Can a pensioner open his pension account in any bank near to his hometown?**

**ANS** No, a pensioner has to open his Pension account in an authorized bank as listed in PDA address book (or any other branch under the authorized link bank) already supplied to all the Air force units by AFRO. This aspect is also briefed at the time of Final Clearance at this office.

**Q.4. My name is correct as per my pay slip, then how can it be wrong as per service documents?**

**ANS** The master/ legal/Audit document for correctness of name is the enrolment form (P-5) kept with RCSR. Every other source of entry for name has to match P-5.

**Q.5. In which cases the Endorsement of Family Pension is required, please brief?**

**ANS** Endorsement of Family Pension is required in the under mentioned cases:

- (a) If an airman is discharged prior to 01 Jan 1986 and his family name is not endorsed in his PPO.
- (b) If an airman has married after post 1986 discharge
- (c) If an airman has legally divorced his first wife and re-married after discharge from the service.
- (d) If first wife of an airman has died and the airman has re-married after discharge from service.

**THINK IT OVER**

***IGNORANCE OF TRUTH IS THE CAUSE OF ALL MISERIES.***

## CHAPTER – III

### DISABILITY PENSION

#### INTRODUCTION

1. When an airman or NCs (E) is recruited in the Indian Air Force (IAF), he is medically examined and allowed to join IAF only after he is found to be 100% medically fit (Cat 'A4G1'). During the course of his service with the IAF an individual can sustain an injury or pick up a disease thereby reducing him to a low medical category. Depending upon the individual facts of the case, an injury or a disease may or may not be attributable to or aggravated by military service. In injury cases, the Injury Report/Court of Inquiry (COI) & the Medical Board (MB) will consider all aspects and report its findings on the attributability / aggravation aspect. Generally the findings of the COI / medical board are binding on the pension sanctioning authority. Similarly, a disease can be either attributable to or aggravated by the military service or can be purely constitutional/ genetic in nature or can be due to ageing factor and may have nothing to do with military service. The decision as to whether the disease is attributable to or aggravated by the military service or is constitutional / genetic in nature will be taken only by the competent medical authority i.e. Release Medical Board (RMB) or Invalid Medical Board (IMB).

#### ELIGIBILITY

2. As per para 153 of Pension Regulations for IAF, 1961 (Part-I), the primary conditions for the grant of disability pension are as follow:-

“Unless otherwise specifically provided, a disability pension may be granted to an individual who is invalided / discharged from service on account of a disability which is attributable to or aggravated by Air Force service and is assessed at 20% or over.”

In other words, disability pension is granted to those who fulfill the following 02 criteria simultaneously:-

- (a) **Disability must be either attributable to or aggravated by service.**
- (b) **Degree of disablement should be assessed at 20% or more.**

**Note 1:** The above (b) criteria is not applicable to post – 96 Medically Boarded Out (MBO) retirees. In such cases, **an individual who is invalided out from service solely on medical grounds and percentage of disablement is even 1% is also eligible for disability pension.** Authy : Para 7.2 of MOD letter No. 1(2)/97/D(Pen-C) dtd 31 Jan 2001.

**Note 2:** An airman or NC(E) who was discharged **at own request or on administrative ground after earning four or more red ink entries is not eligible for disability pension** even if he fulfills both the criteria stated above. Authy : Para 2 (c) of Notes of DPP&R letter No. Air HQ/24229/SOP/PP&R 3(i)/CL/40/06 dtd 31 Oct 06.

#### INVALID PENSION

3. Whenever an individual is invalided out from service under the following clauses on completion of minimum 10 years of qualifying service and his disability pension claim is rejected then he is eligible for Invalid Pension. The minimum rate of Invalid Pension is **Rs. 3500/- pm + DA. wef 01 Jan 2006** as per recommendation of VIth CPC.

- (a) **On having been found medically unfit for further service in IAF.**
- (b) **Being medically unfit for present trade and unwilling to remuster to other trade.**

## **DISABILITY PENSION**

4. Disability pension normally has two elements i.e. **Disability Element and Service Element**. An individual (Post – 96) who is invalided out from service (before completion of pensionable service i.e. **Airman – 15 years and NC(E) – 20 years** under clause 3 (a) & (b) above and his disability pension claim is **accepted**, becomes eligible for both elements. However, if an individual who is discharged from service under clauses mentioned below and his disability pension claim is accepted, is eligible for disability element of disability pension only as service pension in such cases is termed as service element.

- (a) **On fulfilling the conditions of his enrolment.**
- (b) **On superannuation.**
- (c) **Transfer to pension establishment otherwise at his own request.**
- (d) **S N L R (having less than 04 red ink entries)**

## **RANK FOR ASSESSMENT OF DISABILITY PENSION**

5. The rank for the purpose of assessment of disability element shall be the rank held by an individual as follows:-

**In Invaliding cases:** The rank held by an individual on the date of invaliding from service. Authy: Para 159 of Pension Regs for IAF 1961 (Part-I).

**In Discharged cases:** The rank held by an individual on the date on which he sustained injury or picked up the disease for which he becomes eligible for disability pension. If any individual has more than one disability and all are attributable to or aggravated by service then the rank held by him at the last time he sustained injury or picked up the disease will be considered. Authy: Para 160-A of Pension Regs for IAF 1961 (Part-I).

## **ROUNDING OFF PROVISION TO MBO PERSONNEL**

6. Where an individual is invalided out under clause 3 (a)&(b) above and his disability is attributable to or aggravated by service, the extent of disability or functional incapacity shall be determined in the following manner for the purposes of computing the disability element:-

<b><u>% of Disability as assessed by IMB</u></b>	<b><u>% to be reckoned for computing of Disability Element</u></b>
Less than 50	50
Between 50 and 75	75
Between 76 and 100	100

Authy: Para 7.2 of MOD letter No. 1(2)/97/D (Pen-C) dtd 31 Jan 2001.

***Note:*** ***This provision is applicable to Post-96 MBO cases only and not admissible for an individual who is discharged under any clause mentioned in para 4 (a – d) above even his disability pension claim is accepted by authorities.***

## **RATES OF DISABILITY ELEMENT**

(a) **Pre-06 Retirees** : The maximum rates of disability element for 100% disablement for various ranks are given below :-

<b>Rank</b>	<b>Amount p.m.*</b>
(i) Honorary Commissioned Officers	<b>Rs. 5,880/-</b>
(ii) Warrant Ranks	<b>Rs. 4,300/-</b>
(iii) Other ranks	<b>Rs. 3,510/-</b>

***\*Rates for 100% disability. Less than 100%, the amount shall be proportionately reduced.***

(b) **Post-06 Retirees** : The rates of disability element for 100% disability for various ranks shall be **30% of reckonable emoluments last drawn** subject to minimum of Rs. 3,100/- p.m. **for 100% disability**. For disability **less than 100%**, it shall be **reduced proportionately**. In case of disability pension where permanent disability is not less than 60%, the disability pension (i.e. total of service element plus disability element) shall not be less than 60% of the reckonable emoluments last drawn subject to minimum of Rs. 7,000/- p.m.

**RECKONABLE EMOLUMENTS** : Pay means pay in the pay band, grade pay, MSP, 'X' Group Pay where applicable and classification allowance, if any, last drawn by the individual. (Ref SAI 1/S/08, SNI 1/S/08 and SAFI 1/S/08)

### **CONSTANT ATTENDANT ALLOWANCES (CAA)**

8. For 100% disabled individual, the CAA is admissible **if the competent medical board has recommended it**. It is admissible at a uniform rate of **Rs. 3,000/- pm, irrespective of the rank**. Further this rate be increased by 25% every time the dearness allowance payable on revised Pay Band goes up by 50%.

### **WAR INJURY ELEMENT OF WAR INJURY PENSION**

(a) **Pre-06 Retirees** : The maximum rates of War Injury Element for 100% disablement for various ranks are given below :-

<b>Rank</b>	<b>Amount p.m.*</b>
(i) Honorary Commissioned Officers	<b>Rs. 11,760/-</b>
(ii) Warrant Ranks	<b>Rs. 8,600/-</b>
(iii) Other ranks	<b>Rs. 7,020/-</b>

**\*Rates for 100% disability. Less than 100%, the amount shall be proportionately reduced.**

(b) **Post-06 Retirees**

The rates of War Injury Element for 100% disability for various ranks shall be **equal to the reckonable emoluments last drawn** which would be proportionately reduced where disability is less than 100%. However, in no case aggregate of service element and war injury element should exceed the emoluments last drawn.

**RECKONABLE EMOLUMENTS** : Pay means pay in the pay band, grade pay, MSP, 'X' Group Pay where applicable and classification allowance, if any, last drawn by the individual. (Ref SAI 1/S/08, SNI 1/S/08 and SAFI 1/S/08)

### **INVALID GRATUITY AND DCRG**

10. Those airmen and NCs(E) who are invalided out of service **with six months or more service but less than ten years of service** and whose disability pension claim is **rejected**, are entitled for Invalid Gratuity. In addition those who are invalided out with **five years of service or more** are entitled for Death Cum Retirement Gratuity (DCRG) irrespective of fact as to whether the disability is accepted or rejected.

### **IMPORTANCE OF RELEASE MEDICAL BOARD (RMB), INVALID MEDICAL BOARD (IMB) AND REASSESSMENT MEDICAL BOARD (RAMB) IN DECIDING DISABILITY PENSION**

11. Release Medical Board (RMB) is carried out for the airmen / NCs (E) who are proceeding on **normal discharge or superannuation with low medical category or on being medically unfit for present trade and unwilling to remuster to other trade**. Invalid medical board (IMB) is carried out for those airmen/ NCs(E) whose retention in the IAF is not possible due to the **unacceptable adverse effect of their disease/injury on discharge of their duties**. RAMB is carried out to re-assess the percentage of disability in respect of those individuals who are out of service through RMB or IMB and are in receipt of a disability element for a **specific period**. Normally there will be only one RAMB for an individual and there after as per the medical opinion, DP will be decided for the lifetime.

12. It has to be understood by the Ex-Airmen/NCs (E) that the opinion of the medical board is most important and by and large other agencies are not in a position to **interfere with the opinion of the medical board**. The Ex-Airmen/NCs (E) have to appreciate that the eligibility to Disability Pension is directly linked with the opinion of the medical board. Therefore, the medical opinion (as per existing guidelines to Medical Officers) should be respected and accepted gracefully by all. All LMC/MBO personnel are advised to clarify about their eligibility for disability pension from Medical Boards/Officers at station/unit itself. **Individuals are also advised to check all the copies of their IMB/RMB, whether all the required columns are filled and nowhere whitener is applied before signing on all the pages of IMB/RMB.**

### **ROLE OF AFRO, JCDA (AF), AIR HQ AND MOD IN DISABILITY PENSION**

13. In pursuance of the new policy on adjudication of disability pension claims as mentioned in MoD letter No. 1(2)/2002/D(Pen-C) dated 01 Sep 05, major changes have been incorporated in processing of disability pension claims. Now disability pension claims and appeals are processed as under: -

(a) **Role of Medical Advisor at AFRO.** The Release Medical Board/Invaliding Medical Board proceedings, duly completed and approved from Command HQs are received by Medical Advisor at the AFRO. Med Advisor scrutinizes the RMB/IMB proceedings and submits to AOC, AFRO for **approval/adjudication**. After approval/adjudication of claim, he dispatches two copies of IMB/RMB along with approval/adjudication letter to O i/c Pen & Wel Wg (DP).

(b) **Role of P&WW (DP) at AFRO in RMB cases.**

(i) **Rejected cases** : In a rejected case, Pen & Wel Wg (DP) makes necessary endorsement in the Record Copy of Sheet Roll and communicates to the concerned airman about rejection of his disability pension claim alongwith an original copy of RMB. Communication is sent to the individual's last unit, if not retired/discharged. In case the individual is already discharged, the same is forwarded to his home address. In the rejection letter, the Individual is advised to prefer an appeal, if he so desires, within 06 months from the date of issue of the rejection letter.

(ii) **Accepted cases** : In an accepted case, after endorsement in RCSR, one copy of RMB is sent to individual. Further, for issuance of PPO of disability pension, P&WW (DP) forwards RCSR alongwith the adjudication letter, RMB/IMB copy, Injury Report\*, Attributability Certificate\* & copy of COI\*, if held, to JCDA (AF). It is noted that PPO for disability is issued after the PPO for service pension is made. This obviates the requirement of filling separate pension papers for disability as well as preparation of LPC-Data sheet. On receipt of PPO, P&WW (DP) despatches it to the individual's PDO under intimation to him.

(\*in injury cases only)

(c) **Role of P&WW (DP) at AFRO in IMB cases.** On receipt of IMB proceedings from Medical Adviser, firstly, the case is taken up for the service pension/ invalid pension, if he is eligible. Further steps are taken to process the case as per RMB cases given in Para (b) above.

(d) **Role of JCDA(AF), Subroto Park, New Delhi.** CDA is the Pension Sanctioning Authority. After thorough check of IMB/RMB, Addl CDA (AF) issues PPO for Disability Pension and endorses the same in the RCSR. RCSR is then sent back to the Disability Pension Section along with the PPO. PPOs are despatched to the individual's Pension Disbursing Office (PDO) under intimation to him by Registered Post. A photocopy of PPO is also dispatched to individual.

(e) **Provision for Appeal against Rejection of DP.** In order to abide by the principles of natural justice, there is a provision for **two appeals** against the rejection of disability pension claim. An individual is required to apply on a plain paper (in duplicate) against the rejection of Disability Pension. He is to mention the reasons as to how he feels that his disability is attributable to or aggravated by service. First appeal is to be addressed to AFRO and the Second appeal is to be sent to DPA (Air HQ) directly. The first appeal is considered by the Appellate Committee on First Appeals (ACFA) at Air HQ and the second appeal by the Defence

Minister's Appellate Committee (DMAC) at MOD. The members of these appellate committees are as follows :-(Authy: Para 25 of GOI, MOD Ltr No. 1(1)/81/Pen-C) dated 22 Nov 83).

- (i) **ACFA.** Chairman – ACAS (PA&C)  
Members – Dy DGAFMS, Deputy Financial Advisor (Pensions)
- (ii) **DMAC.** Chairman – RM/RRM  
Members – URM, CAS, Defence Secretary, Financial Advisor  
(DS), DGAFMS & JAG

(f) **Appeal Medical Board** : During consideration of appeals, if the opinion of appellate committees **differ with the opinion of IMB/RMB**, an individual is required to be brought before a fresh appeal medical board under the provisions of DGAFMS letter No. 16036/DGAFMS/MA(Pens)/12 dated 16 Mar 05. DDG (Pen) issues necessary sanction for conducting the appeal medical board. The physical examination is held at Base Hospital Delhi Cantt. Free Railway Warrant is not admissible to attend the Appeal Medical Board to personnel if already discharged. The decision of the Appeal Medical Board is considered final and no further review is entertained.

### **PROCESSING TIME FOR DISABILITY PENSION**

14. Processing of Service Pension claim starts at D-11 and by the DOD individuals get their PPOs (in normal cases). In case of RMB, it takes few days to get the PPO issued for disability pension after issuance of Service Pension PPO. In case of invalidment since the process itself starts after the DOD, it takes about **6 months from the date pension papers and RCSR are received at P&WW** to finalize the Service Pension (in observations free cases). Thereafter accepted disability pension claims are sent to Addl CDA (AF) with RCSR and other documents for issue of disability PPO.

**Note** – “D” indicates date of discharge.

### **PROCESSING TIME FOR APPEAL FINALISATION**

15. In case of First Appeal against rejection of Disability Pension (DP), it is sent to Air HQ for consideration by Appellate Committee on First Appeals. It takes about **6-8 months to finalise** the first appeal. The Second Appeal is forwarded to MOD by Air HQs for consideration by Defence Minister's Appellate Committee. It takes about **9-12 months to finalise** the second appeal.

### **IMPORTANT ASPECTS OF DISABILITY PENSION**

16. There are certain important aspects of Disability Pension, which must be known by all personnel who are in **low medical category**. These aspects are: -

- (a) The entire disability pension is exempted from income Tax.
- (b) The disability pension is granted for the rank held by an individual at the time of onset of last attributable/aggravated disease/injury and not for the rank held by him at the time of his discharge from service in RMB cases. However, if an individual invalided out of service under clause mentioned in 3 (a) or (b) above is granted disability pension for the rank in which he is invalided out.
- (c) Like other pensions, merging of 50% DA as Dearness Pay + DA on total is admissible on disability pension also.
- (d) Disability pension normally consists of two elements: -
  - (i) Service element of disability pension and
  - (ii) Disability element of disability pension

(e) Both disability and service elements (**together**) are entitled only when the individual is discharged under clause mentioned in Para 3 (a) & (b) above.

(f) For those individuals who are invalided out of service on medical grounds by an IMB and who fulfill the primary conditions for grant of disability pension as per Para 153 of Pension Regulations, their disability pension will consist of disability element as well as service element. However those individuals who **discharge before 15 years (airmen) / 20 years (NC(E)) of service but were not invalided out of service on medical grounds, are not eligible for disability pension** as per Para 153 of Pension Regulation, such individuals will not be entitled for service element of disability pension and will only get disability element of disability pension.

(g) For those individuals who were initially given Service Pension/ Invalid Pension and who subsequently become eligible for disability pension, they will get only Disability Element of disability pension in addition to their SP/IP.

(h) Personnel are entitled to get commuted portion of Service Pension / Invalid Pension / Service Element / Disability Element. However, this provision on disability element is available only if the disability is accepted first time for life and not through RAMB at a later date.

(i) The deficiency in service for eligibility to Service Pension/Invalid Pension cannot be condoned if an individual is **invalided** (IMB case).

(j) The personnel who are invalided out of service solely on medical grounds under Med Cat "ApGp", with a **minimum of 20% disability with at-least one year of service** are entitled to get disability benefit **PAYABLE FROM AFGIS** that is worked out as follows:

$$\text{Disability Benefit} = \frac{\text{Insurance Cover} \times \text{Disability \%}}{2} + \text{Survival Benefit}$$

***NOTE- 1. Cases of Alcoholism, Drug Addiction, self-inflicted Injury (Disability arising out of attempted suicide or intentional acts resulting in criminal conviction) are not eligible for this Disability Benefit from AFGIS.***

*2. This benefit is also not admissible to an individual who discharge under clause mentioned in Para 3 (b) above.*

### **ADVISE ON DISABILITY PENSION TO INDIVIDUAL CLAIMANTS**

17. This office is receiving a series of representations and claims from ex-airmen/NCs (E) on account of disability pension. A large number of representations are sent to VIPs like President, Prime minister, Defence Minister, CAS etc. with strong emotional appeal to grant disability pension. A large number of court cases are being fought in the courts of law on the issue of eligibility of disability pension. Since the **rejection rate of disability pension** is in the region of **90%**, therefore, almost all the representations are forwarded by those individuals who feel that they should have got the disability pension but their case for disability pension has been rejected. We would like to clarify here that eligibility to disability pension is not an emotional issue. The eligibility of disability pension is based on the existing rules and regulations on the matter. Therefore, we would like to advise the individuals who are expecting to get the disability pension on following lines: -

(a) If you have been invalided out or have been discharged / superannuated with medical category lower than "**Cat A4G1**" then eligibility to disability pension concerns you.

(b) You must take pains to understand as to what disability pension is and why and how it is given. If the rule position is not clear in the mind of the individual then harping on an emotional issue does not help in getting disability pension.

(c) It must be clearly understood that disability pension is **not meant as a compensation for all disabilities** acquired by an individual during his service career. It is primarily meant as a

compensation for those disabilities only, which are **attributable** to or **aggravated** by military service.

(d) Eligibility to Disability Pension purely depends upon **specialist medical opinion of initial Medical Board**. Therefore, the findings of COI/Injury Report, in case of injury and the recommendations of IMB/RMB/RAMB in case of disease are very critical.

(e) While traveling on leave (to and from) with FRW / CV, without FRW/CV, on Annual Leave or Casual Leave, if any injury is met during journey period (starting from duty station and reaching upto leave station and vice versa through main route) then the injury is **attributable to service**. Any injury sustained **at the leave station is not (R) not attributable to service**. **Any leave cannot be treated as 'duty'**. The term 'duty' has been defined in detail in the "Entitlement Rules for Pensionary Awards to Defence personnel, 1982".

## **CONCLUSION**

18. Disability Pension is basically **compensation to an individual for a disability, which has been caused due to Military Service**. It is **not a compensation for all other kinds of disability**, which have no direct relation with Military Service. As per the rules given in Pension Regulations a very fair decision is given on this matter by the concerned agencies. Disability Pension primarily depends upon the specialist medical opinion of the released/invalid medical board. Therefore, there is a need to understand the **eligibility conditions** of disability pension. There is also a need to understand the importance of specialist medical opinion on this matter. Our experience indicates that **over 90% of cases**, which are considered for disability pension, **are rejected** on the basis of specialist medical opinion as given by RMB/IMB. It is, therefore, important that the concept of disability pension is clearly understood by the retiring airmen and NCs (E) clearly.

**THINK IT OVER**

**ONLY A FOOL KNOWS EVERYTHING AND ONLY A FOOL  
DOES NOT REALISE HOW LITTLE HE KNOWS.**



## **FREQUENTLY ASKED QUESTIONS**

Individuals who are either getting disability pension or are expecting to get disability pension ask various kinds of queries and questions. Some of the common questions on this matter are given below:

**Q.1. When I was selected in the IAF I was fit therefore whatever disease/disability I have picked up in service is because of the hard nature of Military Service. Therefore, why is my disease/disability categorized as not attributable to/aggravated by the military service?**

**ANS** A disability can creep in a fully fit person either through an injury or through a disease. If the disability is due to injury, then the COI/Injury Report will comment on the circumstances under which the injury took place. If the injury has taken place while discharging an Air Force duty, only then, it will be attributable to the service, not otherwise. Similarly, a disease can emerge due to constitutional / genetic reasons or due to situation created by the Military Service. The Specialist Medical Officers in IMB/RMB have clear guidelines (IAP 4303) on how to distinguish between the two. The specialist Medical opinion will be considered as final for the purpose of deciding attributability to / aggravation by Military Service.

**Q.2. What is RAMB? My disability was initially assessed as 60% but now in the RAMB it has been reduced to 20%. Why?**

**ANS** The disability percentage initially granted to the individual by IMB/RMB can reduce with time bound improvement. However certain other disease/disability can increase in percentage with time bound deterioration. The purpose of RAMB (Re-Assessment Medical Board) is to reassess this disability and reduce/increase the disability percentage as per specialist medical opinion. Accordingly the RAMB has the powers to reduce the disability percentage from 60% to 20% or even less. Similarly RAMB can increase disability percentage from 60% to higher figures. However, even if disability percentage is reduced to less than 20%, still the service element (where applicable) with DA continues.

**Q.3. What is OTRAMB in respect of Pre – 96 retirees?**

**ANS** The earlier system was that the disease /disability were reviewed periodically every two to three years or less after discharge /superannuation by RAMB. This system was causing a lot of inconvenience to pensioners who were old and disabled. The Govt, therefore, decided to conduct one last and final, One Time RAMB for Pre-96 disability pensioners. The recommendations of the RAMB on the disability percentage were to be treated as final and for life.

**Q.4. When I have discharged (LMC) at a higher rank why am I getting disability pension for lower rank?**

**ANS** Disability Pension is given for the rank, which was held at the time of the onset of the disease/injury. It has nothing to do with the rank holding at the time of discharge. However, in medically boarded out (IMB) cases an individual get disability pension for the rank held by him on the date of invaliding from service.

**Q.5. Am I entitled for DA / Family pension on Disability Pension?**

**ANS** Merging of 50% DA as Dearness Pay and admissible DA on total is entitled on disability pension. Family pension is entitled on service element of disability pension as well as on Invalid Pension. However those pensioners who are not in receipt of Invalid pension/ service elements of disability pension are not eligible for FP.

**Q.6. I am a case of RMB. Why my disability is not rounded off to higher figure like IMB cases?**

**ANS** The special provision of rounding off disability percentage to higher figure is only applicable for individuals who are invalided out of service solely on medical grounds through an IMB or discharged being medically unfit for present trade and unwilling to remuster to other trade (post-96 only). It is not applicable for normal discharges through an RMB.

**Q.7. I am a pre – 96 IMB case. Why my disability pension is not rounded off like Post – 96 IMB cases?**

**ANS** The provision of rounding off disability percentage to specified higher figure for IMB cases has been introduced on the recommendations of Vth Pay Commission. Therefore, it is applicable for Armed Forces personnel who were in service on 01 Jan 96 or join/joined service thereafter. It is regretted to say that the provisions of rounding off are not applicable for Pre-96 IMB retirees also.

**Q.8. I have gone out of service at own request. Why am I not eligible for Disability Pension?**

**ANS** As per Note at Para 8.3 of MOD letter No. 1(2)/97/D(Pen-C) dated 31 Jan 2001 and Note 2 (b) of Air HQ letter No. Air HQ/24229/SOP/PP&R 3(i)/CL/40/06 dtd 31 Oct 06, a person going out of service at his own request is not eligible for disability pension.

**Q.9. I am an SNLR case. Why, I am not entitled for service element in disability pension?**

**ANS** As per interpretation of Audit Authorities, service element in disability pension is only authorised when an individual is invalided out of service on medical grounds i.e IMB Discharges. Since individuals who go out on SNLR grounds do not fit the category of invalidation out of service on medical grounds therefore, those individuals (SNLR case), who are low in medical category and are eligible for disability pension, are only given disability element of disability pension and not the service element.

**Q.10. I am a pre-1964 retiree with low medical category. Why I am not entitled for invalid pension like post – 1964 retiree?**

**ANS** The provision of invalid pension is applicable only for Post – 64 retirees as per the Govt orders in this matter. Please refer Para 171 of Pension Regulations for IAF, 1961 (Part-I) for more clarification.

**Q.11. Who is supposed to revise/What is the procedure for revising my disability pension rates as per the new pay commission?**

**ANS** In case of Pre-06, if an individual is already drawing the pension, then the onus of revising his disability pension and DA as per new pay commission/New DA rates lies with the Pension Disbursing Office (Bank, DPDO, Treasury Office). To implement this, PCDA(P), Allahabad has already issued instructions to all PDAs vide Circular No. 410 dated 13 May 09. AFRO has no direct role in this revision. However, in case of problems, pensioners can contact AFRO who will issue an advisory to the PDA on this matter. However, in case of Post – 96 pensioners, the disability pension will be revised by JCDA (AF).

**Q.12. My husband/ son is invalided out of service. He is mentally un-sound/in a vegetable states and can not get up from the bed. Can I draw his pension as his wife/father/mother/ NOK?**

**ANS.** As per Para 9 and 38 of Pension Payment Instructions 1973 Edition, there is a provision to collect pension by next of kin on behalf of an individual who is not mentally fit (i.e. insane cases etc). However in this procedure there are checks and balances to protect the interest of the pensioner. Such cases can be referred to Pension disbursing office (bank etc) or AFRO for advice on the procedure given in the PPI.

**Q.13. My RMB/IMB has recommended a very high percentage of disability (50 %, 80%, 100% etc.) then why am I not eligible for disability pension?**

**ANS** To become eligible for disability pension, besides the disability percentage, the injury/disease should also be attributable to /aggravated by Military service. Therefore, despite high disability percentage an individual will not be eligible for disability pension, if his medical board (IMB/RMB) has given opinion that the injury/disease was not attributable to/aggravated by the Military Service.

**Q.14. Can I get a copy of the COI and RMB/IMB/RAMB proceedings? How will I know my disability percentage and whether my disease/ injury is attributable to/ aggravated by service?**

**ANS** Yes. After adjudication of disability pension claim, P&WW (DP) sends an original copy of IMB/RMB to individual alongwith letter communicated regarding rejection/acceptance of disability pension claim. To know your disability percentage and whether your disability is attributable to / aggravated by service, you can find it while signing on the pages of IMB/RMB. Airmen/NCs(E) are advised not to sign on blank forms. Regarding a copy of RAMB, it may be send to individual if he demands.

**Q.15. How frequently and at what interval RAMB is required to be carried out?**

**ANS** As per present policy, wherever possible (for disability of permanent nature), the medical board will recommend the disability pension for lifetime. For other cases based on medical opinion one RAMB will be carried within two to five years or less and a final decision on lifetime disability will be given. There will normally be no requirement for a second RAMB.

**Q.16. What is Invalid Gratuity?**

**ANS** In case an individual is invalidated out of service, on account of causes, which are neither attributable to nor aggravated by Air Force Service and his actual qualifying service is more than five years but less than ten years, then he is eligible for grant of invalid gratuity and DCRG. In case service of an individual is less than five years and more than six months, he is eligible for invalid gratuity only. The quantum of invalid gratuity is equal to one month's pay of the rank last held, for each year of service rendered. The pay means the pay last drawn. Invalid gratuity is exempted from Income Tax.

**Q.17. What is the Appeal Medical Board and where is it conducted?**

**ANS** In all cases at the appeal stage, where the Appeal Medical Authority disagrees with the awards of the Invaliding Medical Board/Release Medical Board (**IMB/RMB**), a fresh Physical Examination is held, for which sanction is issued by DGAFMS. The physical examination is held at Base Hospital Delhi Cantt. Free Railway Warrant is not admissible to attend the Appeal Medical Board. The decision of the Appeal Medical Board is considered **final and no further review is entertained**. (Authy : O/o DGAFMS letter No. 16036/DGAFMS/MA(Pens)/12 dated 16 Mar 05.)

**Q.18. What is Review Medical Board?**

**ANS** (a) At the time of conducting IMB/RMB, if IMB/RMB accepts the disability of any individual as attributable to / aggravated by service but assessed it at less than 20%, then the concerned individual has right to ask for Review Medical Board, if he so desired.

(b) Further, those personnel who are granted Disability Element (DE) of Disability Pension for specific period and later on their disability has been assessed at less than 20% for life through RAMB and a result of which their Disability Element has been discontinued.

In case the disability is re-assessed at less than 20% by RAMB then the individual is not satisfied with the assessment of the RAMB then he is given an option to submit an application to this office for Review Medical Board. The application forwarded to higher authority (i.e. DGAFMS). On acceptance of the application by DGAFMS, the Review Medical Board is conducted for which the individual has to report to hospitals, zone wise as mentioned below, at their own expense after receiving call up letter from the Hospital. Free Railway Warrant is not admissible to attend the Review Medical Board. The decision of Review Medical Board is considered **final and no further appeal/representation is entertained against the decision**.

The Review Medical Board is being conducted at the following two hospitals only:-

- (i) For North Zone - Army Hospital (R&R), New Delhi – 10
- (ii) For South Zone - AFMC, Pune

**Q. 19. I am not aware about my disability's attributability aspects and degree of percentage assessed by RMB/IMB. How can I know the same?**

**ANS.** As per para 12 of DGAFMS letter No. 16050/DGAFMS/MA(Pens) dtd 25 Jan 07, signature of the individual on all pages of AFMSF-16 are obtained by RMB/IMB at the time of conducting board. That time individuals can know their attributability aspects and degree of percentage of disability written by board in the AFMSF-16. Further, after adjudication of their disability pension claim by AOC AFRO, a copy of approved AFMSF-16 is despatched to them for their reference. Individuals are advised not to sign on blank pages of AFMSF-16 at the time of conducting their medical board.

## CHAPTER IV

### FAMILY PENSION

#### INTRODUCTION

1. Family Pension is authorised to the legally wedded wife/next of kin (NOK) of those airmen who die while in service. It is also authorized to the legally wedded wife/NOK of those ex-airmen who die after retirement and were drawing pension. Highest eligible heir for family pension is the legally wedded wife (For a bachelor airman, it is nominated eligible heir). Thereafter, the next eligible heirs are the children of the servicemen/pensioner below 25 years of age (unmarried and unemployed). However, the age restriction of 25 Yrs is not applicable for physically and mentally handicapped children who are unable to earn their livelihood in terms of GOI, MOD Ltr No. A/49601/AG/PS-4(C)/1243/B/D(Pen/Sers) dated 25 May 92, for widowed/divorced daughter in terms of GOI, MOD Ltr No. 1/19/03/P&PW (E) dated 22 Aug 2004 and for unmarried daughter above 25 Yrs of age in terms of GOI, MOD, No. 1(3)/2007-D(Pen/Policy) dated 25 Oct 2007 subject to the other conditions being fulfilled. Dependent parents are the third highest eligible heirs to receive Family Pension for married airmen. Between the parents, the mother is entitled for pension before the father. While there is no restriction on the income of the wife, if the combined income of parents is more than Rs. 3,500/- plus admissible Dearness Allowance per month then they are not eligible for ordinary family pension. However, they could become eligible for Special / Liberalised Family Pension. For ex-airmen who were not eligible for pension after release / retirement, the wife /NOK are also not eligible for family pension.

#### TYPES OF FAMILY PENSION

2. The types of Family Pension are categorized as per the amount of Family Pension, which will be paid to the widow/next-of-kin. The various types of family pension are as follows: -

(a) **Liberalised Family Pension (LFP)**. - It is granted in case of death of an Armed Forces Personnel due to acts of violence/attack by terrorists, anti social elements, enemy action in international war, action during deployment with a peace keeping mission abroad, border skirmishes, etc. It is granted @ 100% of reckonable emolument + admissible Dearness Relief applicable from time to time. The minimum rate of LFP specified as per VI CPC is **Rs. 7000/- pm + admissible dearness relief. It continues even after re-marriage of the widow.**

(b) **Special Family Pension (SFP)**. - It is granted in case of death of an Armed Forces Personnel due to causes which are accepted as attributable to or aggravated by military service as determined by the competent medical authorities. Disease contracted because of continued exposure to hostile work environment, subject to extreme weather conditions or occupational hazards resulting in death. It is also granted in case the death is due to accidents in the performance of duties such as accidents while traveling on duty in Government Vehicle or public/private transport, accident during air journeys, mishaps at sea while on duty, electrocution while on duty, etc. It is granted @ 60% of reckonable emolument + admissible Dearness Relief applicable time to time. The minimum rate of SFP specified as per VI CPC is **Rs. 7000/- pm + admissible dearness relief. It continues even after re-marriage of the widow.**

(c) **Ordinary Family Pension (OFP)**. - OFP is granted when the death of Armed Forces Personnel is not considered as attributable to or aggravated by the military service. In other words the death which is not covered at para 2 (a) and (b). The minimum rate of OFP specified as per the VIth CPC is Rs. 3500/- pm + admissible dearness relief. The following two types of rates for OFP is applicable:-

(i) **Enhance Rate (ER)**. It is applicable @ **50%** of reckonable emolument + admissible Dearness Relief applicable from time to time or at the rate not exceeding the Service Pension authorized to the deceased after the death. It is granted for **10 years** from the date of death in case of **service death** and there is no upper age limit. However in case of death of a pensioner, it is granted for a period of **seven years** or till the pensioner would have attained the age of **67\* years** of age (\*applicable to those retired

on or after **13 May 1998**), whichever is earlier. The minimum qualifying service for grant of enhance rate of Family Pension is **seven years**. It is granted to the widows and children. However, ER is not applicable in respect of parents of deceased personnel.

(ii) **Normal Rate(NR)**. It is applicable @ **30%** of reckonable emolument + admissible Dearness Relief applicable time to time of reckonable emoluments. It commences soon after termination of the ER.

**Note:** *Reckonable emolument is the pay in Payband + Grade pay + MSP + (X group pay where applicable) of the deceased airman / NC (E).*

3. In addition to the above the following financial benefits are available to family pensioners beside family pension: -

(a) **Ex-Gratia Payment** - An ex-gratia of **Rs. 10 Lakhs, 15 lakhs and 20 lakhs** are granted to the NOK of deceased personnel who died while performing **bonafide official duty, killed in action by militants/terrorist and killed in international war** respectively as per VIth CPC.

(b) **Death cum Retirement Gratuity (DCRG)**. It is payable to the widow/NOK of the deceased Airmen who die in harness as per the following details.

<u>Length of qualifying service</u>	<u>Rates of death gratuity</u>
(i) Less than one year	Two times of reckonable emoluments at the time of death.
(ii) One year or more but less than 5 Yrs	Six times of emoluments
(iii) 5 Years of more but less than 15 Yrs	12 times of emoluments
(iv) 15 Years or more	Half of emoluments for every completed six monthly period of qualifying service subject to maximum of 33 months of emoluments provided that amount does not exceed Rs. 10 Lakhs as per VIth CPC.

(c) **Pending Enquiry Award (PEA)**. The processing and settlement of Family Pension case is a prolonged one. There are many agencies that play their role for settlement of a Family Pension case. In the process, the cases are often delayed. Considering the above fact, the Govt has made provision to grant PEA to cater the day-to-day requirement of a widow. It is granted to the wife of deceased airwarriors who die in harness. It is granted @ **30%** of reckonable emolument + admissible Dearness Relief till the finalization of the case.

#### **ADDITIONAL FAMILY PENSION TO OLD FAMILY PENSIONERS**

4. The quantum of family pension available to the old family pensioners shall be increased as follows:

<u>Age Of Family Pensioner</u>	<u>Additional Quantum Of Family Pension</u>
From 80 years to less than 85 years	<b>20%</b> of basic family pension
From 85 years to less than 90 years	<b>30%</b> of basic family pension
From 90 years to less than 95 years	<b>40%</b> of basic family pension
From 95 years to less than 100 years	<b>50%</b> of basic family pension
100 years or more	<b>100%</b> of basic family pension

## **BASIS OF DECIDING THE TYPE OF FAMILY PENSION**

5. For all deaths of a retired ex-airman drawing his service pension, only Ordinary Family Pension is admissible. However in certain circumstances, the widow of an Airman, invalidated out of service with disability, attributable to service, when died within **10 yrs** of service, could become eligible to SFP on fulfilling the prescribed criteria. For death of serving airman if the death is not attributable to or aggravated by Military service then the widow /NOK will get **Ordinary Family Pension (OFF)**. However, if the death is considered as attributable to or aggravated by Military Service then the widow /NOK will get **Special Family Pension (SFP)**. Further, if an airman dies due to direct enemy action on the border or is killed by militants or is killed by anti social elements while in pursuit of his duty, then the widow/NOK will be entitled to **Liberalised Family Pension (LFP)**. The decision as to what kind of family pension is to be given is taken by the pension sanctioning authority based on the following reports:

- (a) Findings of Court of Inquiry (COI) which is based on factual picture, which emerges out of circumstances of death, statements of eyewitnesses and medical reports. The COI also has the recommendations of the Commanding Officer and other senior officers in the chain of command.
- (b) Opinion of Specialist Medical Officer and the medical aspects emerging in Fatal Medical Documents.

## **OTHER SALIENT ASPECTS OF FAMILY PENSION**

6. The salient aspects of family pension are as follows: -

(a) When a death takes place while in service, AFRO establishes the legality of the wife and forwards family pension claim forms to her. Within one week of receipt of completed family pension claim forms, AFRO releases **Pending Enquiry Award (PEA)**, which is equivalent to Ordinary Family Pension. Thereafter, once the court of inquiry and fatal medical documents etc. are received at AFRO, they are forwarded to Pension Sanctioning Authority (PSA) for deciding the type of family pension. For Armed Forces, the Pension Sanctioning Authority is the Controller General of Defence Accounts/ his representative offices. These agencies are audit agencies, which act as financial watchdogs of the Govt. The pension sanctioning authority decides on the type of pension and issues the relevant pension orders to the widow/NOK. In addition to family pension, the IAFBA provides family assistance of **Rs. 3000/- per month for 15 years (Rs. 2000/- per month for 08 yrs in case of death after retirement) to the widow**. Besides these financial benefits there are certain other kinds of assistance (scholarship for children, help in daughters' marriage etc) which is provided by AFWWA (C) and IAFBA to the widow of **airman/NC(E) who dies while in service**.

(b) Since 1986 joint notification is being carried out for all the retiring airmen. This joint notification basically means that besides the name of the airman who is proceeding on retirement, the name of the legal wife is also notified in the **Pension Payment Order (PPO)** of the airman. Thus, after the death of an airman after retirement, the widow can approach the pension disbursing bank with death certificate and certain other documents which are demanded by bank and her family pension would automatically commence from the concerned bank on the same PPO on which her husband was drawing pension. It is pertinent to mention that joint notification can only be done **in respect of wife**. There is no provision for joint notification in respect of parents / children. In addition to Family Pension. If the lady has her AFWWA membership card / the card number, then AFWWA (C) will pay her a lump sum of **Rs. 5,000/- (One time payment only)**.

(c) Children are normally not eligible for family pension after **25 years** of age/employment/marriage whichever is earlier. However, there is a special provision of **life long pension to Handicapped children** who are not capable of earning their livelihood. Based on the required medical certificates and verification report, Ordinary Family Pension can be released to handicapped child after the death of widow when his/her turn comes. Besides above, there is a provision for family pension **beyond 25 years** of age in respect of **widowed/divorced/unmarried daughters** provided other conditions are fulfilled as above.

(d) Any second marriage, when the first wife is alive and not divorced through a court of law, is null and void. Such marriage is illegal and the second wife is not entitled to family pension. Even after the first wife has died subsequently, the second marriage will continue to remain null and void and the mere death of first wife does not make the second marriage legal. All 'WILLS' on family pension are null and void because, a will can be written only on own property, whereas Family Pension is Govt money (Supreme Court Judgement).

#### **ADVISE ON MATTERS ON FAMILY PENSION**

7. The airmen who are proceeding on retirement should ensure the following: -

(a) That the name of his wife and date of marriage is correctly endorsed in his service documents and that his wife is aware of her name as recorded in his service documents. Particular attention is to be paid to the **correctness of surname of the wife**.

(b) The correctness of the name of children vis-à-vis the name as appearing in school certificate should be checked.

(c) The correctness of the date of birth of the children should be checked and any inadvertent exchange of date of birth between two children should be guarded against. Correctness of date of birth Vis – a – Vis school certificate should be checked.

(d) The photocopy of UCSR with updated family details (Matching PORs etc) should be kept after retirement.

(e) Retired airmen must make it a point to take his wife/ eldest child to his Pension disbursing office at least two to three times a year for familiarization.

(f) Retired airman must ensure that suitable POR action is completed before their retirement in respect of physically handicapped and mentally retarded children.

(g) Keep updating your post retirement occurrences like divorce, death of wife, re-marriage, birth of children etc.

#### **PROCEDURE FOR PROCESSING OF FAMILY PENSION CASES FOR CHILDREN BELOW 25 YRS OF AGE**

1. The following documents/certificates are required for processing the family pension cases of children **below 25 Yrs** of age: -

(a) Certificate of present marital status of claimant obtained from **First Class Gezatted Officer/Village Sarpanch**.

(b) Income certificate of claimant issued by **Revenue Officer/Tehsildar** stating monthly and annual income from all the sources

(c) Studentship Certificate obtained from school/college in which claimant is studying OR Unemployment Certificate obtained from competent authority.

(d) Guardianship certificate from **competent court of law** in respect of minor children only.

#### **PROCEDURE FOR PROCESSING OF FAMILY PENSION CASES FOR HANDICAPPED CHILDREN**

2. Earlier, during the lifetime of the pensioner and his spouse, family pension endorsement was not being notified in the PPO in favour of disabled son/daughter. The pensioner or his spouse can now apply for the same on the proforma provided overleaf alongwith the following documents:-



(a) A medical certificate (in original) from a doctor not below the status of **civil surgeon** or medical officer of the rank of **Brigadier and equivalent rank of Navy/Air Force** stating out the disability certifying that the individual is unable to earn his/her livelihood throughout his/her life.

(b) An affidavit (in original) sworn before a first class magistrate stating out as far as possible the exact physical/mental condition of the child and inability of the child to earn his/her livelihood throughout his/her life. Percentage of disability is also required to be mentioned. Affidavit is to be submitted in original.

**NOTE:** *Every possible effort must be made by the pensioner to get the POR promulgated while in service.*

3. For processing the Family Pension case for handicapped children after the demise/disqualification of other eligible heirs, the following documents are required to be produced by the guardian of the handicapped child if POR has been promulgated and endorsement has been made in the service records of the pensioner. Documents mentioned at Para 1(a) and (b) are also required in case no POR has been promulgated: -

(a) Income certificate stating monthly and annual income of the claimant from all the sources issued by Revenue Officer/Tehsildar.

(b) Certificate of Marital status of the claimant obtained from First Class Gazetted Officer/Village Sarpanch.

(c) In the case of mentally handicapped children, the family pension shall be payable to person nominated by the Armed Forces personnel or pensioner, as the case may be, and in case no such nomination has been furnished by the Armed Forces personnel or pensioner during his life time, to the person nominated by the spouse of the deceased personnel or pensioner. In case service personnel, pensioner or family pensioner fails to nominate guardian during his/her life time, a Legal Guardianship Certificate obtained from a competent Court of Law under Guardianship and Ward Act 1890 would be mandatory.

#### **PROCEDURE FOR PROCESSING OF FAMILY PENSION CASES FOR WIDOWED/DIVORCED DAUGHTER**

4. The following documents/certificates are required for processing the family pension cases of widowed/divorced daughters: -

(a) Original affidavit sworn before a 1st class magistrate showing the details of claimant's marriage including the name of bride, bridegroom and date of death (widowed daughter)/date of divorce decree absolute (divorced daughter).

(b) Certificate of present marital status of claimant obtained from First Class Gezatted Officer/Village Sarpanch.

(c) Income certificate of claimant issued by Revenue Officer/Tehsildar stating monthly and annual income from all the sources

(d) Unemployment Certificate obtained from competent authority.

(e) Marriage Certificate of the claimant obtained from Registrar of Marriage showing the full details of her marriage.

(f) Original/Ink signed attested copy of Death Certificate of her husband issued by Registrar of Deaths. (In case of widowed daughter).

(g) Original/Ink signed attested copy of Divorce Decree obtained from Court of Law. (In case of divorced daughter).

(The case for Family Pension for widowed/Divorced daughter can be taken up only after the demise of the pensioner and death/disqualification of other heirs eligible for the same before her.)

**PROCEDURE FOR PROCESSING OF FAMILY PENSION CASES FOR UNMARRIED DAUGHTERS ABOVE 25 YRS OF AGE**

5. The following documents/certificates are required for processing the family pension cases of **unmarried daughters above 25 Yrs of age**: -

- (a) Certificate of present marital status of claimant obtained from **First Class Gezatted Officer/Village Sarpanch**.
- (b) Income certificate of claimant issued by **Revenue Officer/Tehsildar** stating monthly and annual income from all the sources
- (c) Studentship Certificate obtained from school/college in which claimant is studying OR Unemployment Certificate obtained from competent authority.

(The case for Family Pension for unmarried daughter above 25 years of age can be taken up only after the demise of the pensioner and death/disqualification of other heirs eligible for the same before her.)

**f**

**THINK IT OVER**

**LET NOTHING DISTURB YOU. LET NOTHING FRIGHTEN YOU.**

**EVERY THING PASSES AWAY EXCEPT GOD. GOD ALONE IS SUFFICIENT.**

## FREQUENTLY ASKED QUESTIONS

**Some common questions, which are received by this office: -**

**Q.1. I am the mother of the late airman, why should the wife get the pension when my son was not happy with her. Why can't I get the pension?**

**ANS:** As per Pension Regulation, wife is the highest eligible heir for receiving family pension. How happy / un-happy your son was with your daughter in-law could have been an issue for divorce, had your son been alive. However, after his death the only issue is the legality of marriage, your son's happiness/ un-happiness has no direct bearing on her legal eligibility to Family Pension. Mother is the highest eligible heir only for a bachelor airman (incase of married airman when wife and children become disqualified for FP).

**Q.2. Since the first wife is dead, why can't I get the pension as second wife?**

**ANS:** When you married, the first wife was alive, therefore in legal terms, your marriage had become null and void ab-initio and will remain null and void through out. The mere death of first wife does not change the null and void status of your illegitimate marriage.

**Q.3. My husband and his first wife were under the process of mutual divorce; I met the first wife and took her clearance for my marriage. After six months of my marriage legal divorce was granted between the first wife and my husband. Therefore, I fail to understand as to what the problem is and why I am being denied my family pension?**

**ANS:** Your actions may appear to be socially correct but they are wrong from the legal point of view. You should have married only after divorce of first wife. Till the divorce order by a court of law was issued to the first wife she continued to be the legal wife of your late husband. Since you married six months before the date of divorce, therefore, your marriage has become null and void and will remain so. The consent of first wife does not provide legality to your marriage. Since your marriage is null and void ab-initio, you are not eligible for family pension.

**Q.4. I am the mother of the late airman. His minor children from first wife are with me. After the death of his first wife my son had married another lady who does not look after the children born from my first daughter in law. Can I get pension on behalf of minor children of my first daughter in law?**

**ANS:** Pension Regulations provide for division of pension between the children of first legal wife and the second legal wife (i.e. marriage after legal divorce / death of first wife). If after verification it is proved that you had been keeping the minor children with you from the first wife of the late airman then you can produce a guardianship certificate and as a legal guardian of the minor child you will get 50% of the entitled pension till the child is 18 years of age thereafter the child himself can receive his pension. The other 50% will go to the legal second wife. After the first child from first wife attains the age of 25 years of age then the pension will go to the second child till he/she attains the age of 25 years of age. After both the children have reached 25 years of age (in case of daughters' when they get married) full pension will be restored to the second legal wife.

**Q.5. My daughter in law is suspected of murdering my newly married son in connivance with her lover. She is pregnant and in police custody. She is a blot on the name of woman-hood. Please make sure that no pension is paid to her and I am paid pension as mother.**

**ANS:** As per Pension Regulations when an eligible heir is suspected of murder she will not be paid with any pensionary benefits till the final decision of the court. However, as per law every accused is innocent till proved otherwise in the court of law. Therefore, as per Pension Regulation family pension will remain frozen and will not be paid to any other eligible heir including you till the final court judgement. Even if your daughter in law is convicted, since she is pregnant her child will be the next highest eligible heir for family pension. Since you are alleging that the child belongs to the lover and not to your son, you are at a liberty to request for a DNA test and get a suitable order from a court of law in this matter. No family pension will be disbursed in this case till the court gives an order on either convicting or releasing your daughter in law. Further, in case the daughter in law is convicted the onus of proving your allegation that the child belongs to her lover and not to your late son squarely rests on you. If you fail to get a suitable court order the pension will go to the legal guardian of the child.

**Q.6. My husband has died recently and I went to collect my Family Pension to the bank as per joint notification. However, there is a difference of my name in the joint notification and the account I have with the bank. The bank has refused to pay me Family Pension. Please advice me and help me.**

**ANS:** Family Pension has a history of conflict between the legal and the illegal wife for grabbing family pension. Since only the legal wife is entitled for Family Pension therefore, the checks and balances at every Govt agency in terms of correct name of the widow and her correct identity are very critical for commencing Family Pension. Your husband should have been very careful in ensuring that your name has been written correctly in his service records. We have instances of widows who have fought for ten to twenty years in a court of law to prove their status as a legal wife. Now we will carry out an investigation through our Air Force Police and thereafter, based on the emerging facts we will give you a suitable advice on future course of action.

**Q.7. My husband left Air Force as a bachelor and married me after two years of retirement. Since you have written that as per the records at AFRO he was a bachelor. Please advice me and help me.**

**ANS:** Your husband was drawing pension and therefore he must be aware that his wife will be entitled for family pension. Not informing about his marriage and birth of children after his discharge to this office was a grave error on his part. Now you will have to satisfy certain legal and procedural formalities to prove that you are his legally wedded wife and that your children were born out of marriage with him. In addition, we will do our own enquiry on this matter. Please wait for our detailed letter.

**Q.8. My husband has been declared as a deserter and dismissed from service. However, I feel that he is missing and has probably died in un-fortunate circumstances. I have no money and no one is there to look after me. Please advice and help me.**

**ANS:** Desertion is a serious offence for any fighting force. Therefore, till your husband is a deserter no financial benefits can be given to you. Since you feel that he is not a deserter and he might have died under un-fortunate circumstances. We will write to the last parent unit of your husband to carry out a fresh Court of Inquiry into this matter in accordance with Air HQ letter No. Air HQ/40295/PA-III dated 08 Sep 99. If based on this inquiry, it emerges that your husband is not a deserter but a missing presumed dead person then your case for Family Pension would be considered. In addition to this provision, you also have the option to go to a court of law (after seven years of your husband presumably being missing) under section 108 of Indian Evidence Act. If the court declares your husband as a missing presumed dead person, then again your case for Family Pension could be considered. However, please be informed that any deliberate attempt by you for wrongful financial gains by willfully hiding the fact of his desertion can subsequently result in criminal proceedings against you.

**Q.9 I am an employed lady with State / Central Govt, my husband has expired, since I am earning a handsome salary, will I get family pension or not?**

**ANS:** Yes, you are entitled for Family Pension of your deceased husband alongwith applicable rate of Dearness Relief irrespective of your pay scale. This is a privilege given to all legally wedded wives.

**Q.10. What is the procedure for withdrawing pension of an insane /physically handicapped pensioner?**

**ANS:** The procedure for such an eventuality is given in PPI Para 38. In order to protect the interest of the pensioner certain checks and balances are there in this procedure. Please write to AFRO for a detailed advice on this matter.

**Q.11. If 50 % DA is merged with basic pay or a new pay commission is implemented then will my pension get revised?**

**ANS:** The decision as to whether the pension is to be revised or not has to be taken by the Govt. If the Govt decides to revise the pension, then going by the past experience it is expected that revision orders with revision table (old rate versus new rate) will be forwarded to Pension Disbursing Offices (Banks, Treasury and DPDO) who will be responsible for automatic revision of pension. This office will have no direct role on this matter, however, if a representation is received at this office, suitable advice will be given to pensioners.

**PROFORMA**

**PARTICULARS FOR GRANT OF FAMILY PENSION TO HANDICAPPED CHILDREN**

1. Details of Pensioner:

- (a) Service No, Rank & Name: -
- (b) Date of Discharge: -
- (c) Original PPO No.: -
- (d) Issued by: -

2. Details of Family Pensioner:

- (a) Name & Relation with PBOR:-
- (b) Date of Marriage
- (c) Present Address
- (d) PPO No in which family pension was notified

3. Details of Handicapped children:-

Name & Address	Date of Birth	Martial Status	Whether Employed Or not	Details of Disability

4. Details of other children who are eligible for family pension.

Place:  
Date:

Signature of pensioner

## CHAPTER V

### GRATUITY

1. All personnel are entitled to various types of gratuity on their discharge depending on their qualifying service and cause of discharge. Next of kin of the personnel who die while in service are also eligible for death gratuity. The details of various types of gratuity are enumerated below: -

(a) **Death Cum Retirement Gratuity (DCRG)** DCRG is applicable in case of personnel retiring with Service Pension {15 /20 years of qualifying service for airmen/ NCs (E)}. The rate of DCRG is half months emoluments for each completed year of service subject to a maximum of 16.5 months emoluments.

(b) **Service Gratuity/Death Cum Retirement Gratuity (SG/DCRG)** SG/DCRG is admissible to airmen discharged with a qualifying service of :-

- (i) Five years or more but less than 15 years in the case of airman.
- (ii) Five years or more but less than 20 years in the case of NCs(E).

The SG/DCRG shall be admissible only when one has not rendered the minimum qualifying service to earn service pension.

**The SG Is admissible at a rate of :**

**One month's pay in pay band + Grade pay + MSP + (X Group pay where applicable) + DA (last drawn) for each completed year of qualifying service actually rendered.**

The pay means, the pay last drawn by the individual.

The SG/DCRG is calculated on the basis of **actual qualifying service** rendered by an individual and no weightage is permissible. There shall be no deduction in the quantum of SG/DCRG so arrived at in the case of those who are allowed premature discharge on compassionate grounds or for other personal reasons.

Individuals enrolled before attaining the age of 17 years, their entire service (from the date of enrolment to the date of discharge) shall count towards payment of NE Benefits.

Individual dismissed from the service under the Air Force Act/discharged due to misconduct, corruption, lack of integrity or moral turpitude, is neither eligible for pension nor gratuity. However, in exceptional circumstances, he may, at the discretion of the President, be granted either pension or gratuity or both, either in full or in part at a rate not exceeding for which he would have normally qualified.

(c) **Invalid Gratuity/DCRG** In case an individual is invalided out of service on account of causes which are neither attributable to nor aggravated by Military Service and his actual qualifying service is more than five years but less than ten years, then he is eligible for grant of invalid gratuity and DCRG. In case service of an individual is less than five years and more than six months, he is eligible for Invalid gratuity only. The quantum of invalid gratuity is equal to one month's pay of the rank last held, for each year of service rendered and that of DCRG is half month emoluments (Basic Pay + DA) for each completed years of service. The pay means the pay last drawn.

(d) **Death Gratuity** Death gratuity at the following scale is admissible to the families of personnel, who die while in service: -

**(i) Service less than 1 year : 2 times of (Last Basic Pay +DA)**

**(ii) Service 1 Year or More but Less than 5 Years : 6 times of (Last Basic Pay + DA)**

- (iii) Service 5 Years or More but Less than 15 years : 12 times of (Last Basic Pay + DA)
- (iv) Service 15 years or more : (Last Basic Pay +DA)X ½ of total six Monthly periods.  
(Max. six monthly periods will be 66).

Note: Maximum DCRG admissible is Rs. 10 lakhs.

## FREQUENTLY ASKED QUESTIONS

**Q.1.** I was discharged from training Institute under the clause “ UN LIKELY TO BECOME EFFICIENT AIRMAN” (ULMEA). I have not got my Service Gratuity so far. Please advice me if I am eligible for the same?

**ANS** The minimum Qualifying Service (QS) to earn Service Gratuity (SG) is five years. Since you have served for less than five years, therefore you are not entitled for SG.

**Q.2.** I was discharged from the IAF after completion of ten years of QS under clause “SERVICE NO LONGER REQUIRED”(SNLR). Am I entitled for Pro-rata pension?

**ANS** As per Pension Regulations for the Air Force, minimum QS to earn Service Pension is fifteen years. Further, it is also clarified that there is no provision in the IAF for grant of Pro-rata pension for those who have served for less than fifteen years. Therefore, you are not entitled to any pension. However, you are entitled for SG and DCRG.

**Q.3.** I was dismissed from IAF by sentence of Court-Martial after completion of 15 years of total QS. Now, more than one year has passed I have not got my pension. Please guide me whether I am eligible for my pension or not?

**ANS** As per the Pension Regulations for the Air Force those who are dismissed from the IAF under the provision of Air Force Act 1950 are not entitled for gratuity/pension for the service rendered by them. Since you were dismissed from the IAF, you are not entitled for Service Gratuity/Service Pension. However, those discharged from service due to mis-conduct, corruption, lack of integrity or moral turpitude are not normally eligible for gratuity but they may be sanctioned gratuity in exceptional cases at the discretion of the President, at a rate not exceeding that for which they are normally qualified.

f

THINK IT OVER

*WHAT PAINS US MOST IS OUR INCAPACITY TO ENJOY SIMPLE THINGS.*

## CHAPTER VI

### WELFARE

#### INTRODUCTION

1. The relationship of an ex-airman with AFRO continues throughout his life. The welfare section of Pension and Welfare Wing at AFRO is like an orderly room for retired personnel. The ex-airmen / NOK need continuous help from AFRO on many matters like counting of former service with IAF for new employment, fixation of pay with new employer, pension related problems, issue of various welfare related certificates and employment under indigent circumstances to widows/NOKs (of those personnel died while in service) etc. As a record office, all actions at AFRO can only be initiated on the basis of the records of ex airmen available at AFRO. Thus the preservation of service records is a major task at Pension and Welfare Wing of AFRO. The policy on maintenance of records (RCSR/ medical documents) at AFRO is that **medical records of an airman are destroyed after 15 yrs and his RCSR is destroyed after 25 yrs from the date of his discharge**. Certain essential details of the individual are however copied in one page of a register before destruction of RCSR. This page is called LONG ROLL. A long roll is preserved indefinitely. As on date, there is no policy / timeframe for destruction of long rolls. Besides welfare related assistance from AFRO, a lot of other benefits / facilities can be availed by an ex-airman/NOK through the Director General of Resettlement and Zilla Sainik Boards.

#### DEFINITION OF EX-SERVICEMEN

1. The eligibility of the retired defence personnel to the status of ex-servicemen is governed by the definition as laid down by Department of Personnel and Training. The definition has been undergoing changes from time to time.

**Authy: Govt of India, Min of Personnel Public Grievances & Pensions Memo No. 36034/5/85-Estt (SCT) dated 14 Apr 87.**

Following is the broad categorization:-

- (a) **Those released before 01 Jul 68.** Any person who had served in any rank, (whether as combatant or not) in the Armed Forces, and has been released there from otherwise than by way of dismissal or discharged on account of misconduct or inefficiency.
- (b) **Those released on or after 01 Jul 68 but before 01 Jul 79.** Any person who had served in any rank (whether as combatant or not) in the Armed Forces, for a continuous period of not less than six months after attestation and released there from otherwise than by way of dismissal or discharged on account of misconduct or inefficiency.
- (c) **Those released on or after 01 Jul 79 but before 01 Jul 87** Any person who had served in any rank (whether as combatant or not) in the Armed Forces of the union for a continuous period of not less than six months after attestation, if discharged for reasons other than at his own request or by way of dismissal or discharged on account of misconduct or inefficiency, and not less than five years of service if discharged at own request.
- (d) **Those released on or after 01 Jul 87** Any person who had served in any rank (whether as combatant or not) in the Armed Forces of the union **and was released/retired with any kind of pension from defence budget or released on completion of specific terms of engagement** with gratuity other wise than own request or by way of dismissal or discharged on account of misconduct or inefficiency.

**Note:** *In all cases recruits were not being covered under the category of Ex-Servicemen including those recruits who were in receipt of disability pension. The policy however has been revised. As per MoD (Deptt of Ex-servicemen Welare) Memo No. 12/1/2005/D (Res) dated 01 Feb 06, it has been decided with the approval of Raksha Mantri that such recruits who were boarded out / released on medical grounds and granted medical / disability pension will also be covered under the category of ex-servicemen for all practical purposes.*



## **PRIVILEGES FOR EX-SERVICEMEN**

3. All ex-service personnel are entitled to certain service privileges. They are enumerated below: -

(a) **Use of Air Force Rank.** Apart from serving personnel of the regular Armed Forces, only MWOs / WOs granted Honorary Commission while in service or on retirement, may use their Air Force ranks with their names. The recognized method of doing so after retirement/release is indicated below: -

Honorary Flying Officer                      A (Retd)

Honorary Flight Lieutenant                B (Retd)

(b) **Retention of Retired Officers' Identity Cards (IAFZ-2015A).** Retired officers' Identity Cards (IAFZ-2015A) can be retained by MWOs / WOs granted Honorary Commission. Officers whose service have been terminated under the provisions of Air Force Act Section 18 or those who have been released / retired on grounds of security / moral turpitude, even if they are allowed pensionary / terminal benefits, will **not** be issued Retired Officer's Identity Cards (IAFZ-2015A).

(c) **Wearing of Uniforms.** Ex-airmen may wear service uniform on special occasions, when attending ceremonials and functions of military nature and on other occasions when the wearing of uniforms would appear appropriate.

**Authy: Regulations for the Air Force 1964 {Para 422(a)}.**

(d) **Liability of Air Force Act and Official Secret Act After Retirement.** Liability to Air Force Act ceases immediately when an individual is placed on the retired list. However, for finalization of pending disciplinary cases / cases detected within six months of his discharge, Air Force Act Section 123 is invoked. A retired person is liable to be punished for communicating classified information which he might have acquired during the period of his service under section 5 of the Indian Official Act 1923.

(e) **Right To Enter Politics After Retirement.** There is no bar for military pensioners taking part in lawful political activities including contesting elections. However, pension is liable to be forfeited if found guilty of grave misconduct of a political or other nature under the provisions of the Pensions Regulations for the Air Force Act (1961).

## **RESETTLEMENT ASPECTS**

4. The resettlement of these Ex-servicemen is the next priority after the timely grant of service pension. The following resettlement avenues are available to ex-servicemen: -

(a) A placement cell has been opened at AFRO. Retiring airmen can register their names for better re-employment opportunities.

(b) All retired airmen must register their names with their respective Zila Sainik Board for availing the benefits of employment under reserved vacancy category.

(c) Defence Security Corps (DSC) provides avenues for re-employment as JCOs and ORs to retiring / retired airmen. Desirous and eligible individuals may contact the DSC regimental centres / recruiting offices for the said purpose. **Application forms can be obtained from Army HQs (GS Branch) DDG, DSC, West Block – III, Wing – IV, RK Puram, N D – 110 066.**

(d) Director General Re-settlement (DGR)} is the frontline organization for re-habilitation of released / discharged personnel. It is located at RK Puram, New Delhi. A host of re-employment / self-employment opportunities are available through DGR. The desirous individuals can have the details on the various self employment opportunities in farm and non farm sector from the respective ZSB or they can log on to DGR web site: **www.dgrindia.com**

## **WELFARE RELATED ASSISTANCE BY AFRO**

5. A welfare section functions at Pension and Welfare Wing at AFRO. This section exclusively caters to matters of ex-PBOR / widows / NOK. The welfare section primarily caters to the following requirement of ex-PBOR: -

(a) **Publication of NE PORs** The documents of retired PBOR are maintained at AFRO for 25 years from their date of discharge and after that required information is maintained in the form of a Long Roll (LR) for lifetime. It is incumbent upon the PBOR to get the NE POR published for occurrences after their retirement. They are required to take up their cases through respective Zila Sainik Boards alongwith the requisite documents as mentioned against each occurrence: -

**Authy: AFO 134/98 and Para 81 of AFO 113/77.**

<b><u>Occurrence</u></b>	<b><u>Relevant documents required by this office</u></b>
<b>Birth of Children</b>	(a) A personal application. (b) <b>Affidavit from Notary</b> (Name of the mother of the child should be clearly mentioned in the affidavit) (c) Birth certificate issued from the Registrar or Head of the School/Institution.
<b>Death of Wife</b>	(a) A personal application. (b) <b>Death certificate</b> issued from the Registrar.
<b>Marriage or Re-Marriage and Change of Next-of-Kin</b>	(a) A personal application. (b) <b>Marriage certificate</b> issued from the Registrar. (c) Affidavit issued by 1 <sup>st</sup> class Magistrate regarding marriage. (in original). (d) Joint Photograph in two copies duly attested by respective ZSB.
<b>POR for Divorce</b>	(a) A personal application. (b) The copy of <b>divorce decree</b> from Court duly attested.
<b>Change of Name/ Surname</b>	(a) Personal application for change of name/surname. (b) Publish the change of name /surname in Central/ State Gazette Notification and submit the same in two copies <b>(original/attested)</b> . (c) Publish the change of name/surname in a national and a local newspaper and submit the concerned pages of the same in <b>original</b> . (d) Major children/dependents will be deponent in the newspaper and Gazette Notification.
<b>Change of Permanent Home Address</b>	(a) A personal application. (b) <b>Declaration form</b> (available with Zila Sainik Board) along with original discharge certificate through Zila Sainik Board.

(b) **Issue of Duplicate Discharge Book.** Discharge book is a very important document and needs to be preserved forever. On loss / mutilation, a duplicate discharge book may however be issued by AFRO on specific recommendations by ZSB. The individuals are required to forward the requisite documents mentioned below: -

(i) **In case of Loss of Original Discharge Certificate:**

(aa) A personal application along with attested copy of **First Information Report (FIR)** stating the circumstance under which the loss had occurred and the individual is not in possession of the same and in case of recovery of it, the same will be surrendered to AFRO.

(ab) An affidavit from notary

(ac) Joint/single Photograph in two copies duly attested by respective ZSB.

**Authy: Air HQ/40722/5/PA(RC) dated 22 Nov 90.**

(ii) In case of Mutilated/Defaced Discharge Certificate:-

- (aa) A personal application
- (ab) Mutilated/Defaced discharge certificate
- (ac) Joint Photograph in two copies duly attested by respective ZSB.

**Authy: RO/2902/P&WW (Wel) dated 15 May 95.**

**Note:** All photocopies of certificates/documents submitted are to be attested. Any affidavit should be in original only.

(c) **Counting of former service.** Ex-airmen who are re-employed in any Govt or Semi Govt organisation / PSUs may opt for counting of their former service rendered in Indian Air Force under the provision of Rule - 19 of CCS rules 1972. To avail this benefit, the individual has to surrender his service gratuity / DCRG, Commutation and cease to draw pension wef the date of re-employment. However, he can retain the pension amount drawn from the date of discharge to the date of his re-employment. The individual will have to approach his re-employer within one year of his confirmation in the re-employed post. The case for counting of former service is required to be referred to pension and welfare wing through the re-employer.

(d) **Re-Fixation Of Pay In The Re-Employed Organization.** Re-employed pensioners are eligible for re-fixation of their pay in re-employed organization. The subject matter is governed by **Govt of India, Min of PP&G (Dept of personnel and Trg) OM No. 2/1/86/Est Pt – II dated 31 Jul 1986.** For this purpose, the re-employed pensioners may approach AFRO through their re-employer.

(e) **Issue of NOC for grant of Family Pension From Civil Organisation.** The policy on payment of pension envisages that Family Pension can be paid from one Govt Organisation only. However if the family pension scheme in re-employed service falls in the contributory Family Pension scheme of 1971 and 1995 (schemes where Family Pension is not paid out of Govt Fund), then a second family pension can be paid from the defence side also. In case of retiring married airmen, the name of wife is jointly notified in the PPO of the pensioner. In case the individual wishes to draw his family pension from civil, he needs to give an option to this effect through his re-employer and PDO. On receipt of the option, AFRO takes up the case with PSA for issue of a new PPO reflecting cancellation of Family pension from Defence. NOC for grant of family pension from civil is issued by AFRO to the re-employer on receipt of cancellation PPO from PSA i.e. JCDA (AF).

**Authy: Govt of India, Min of Defence letter No. 10(6)/92/D (Pen/Ser) Dt 28 Sep 92.**

(f) **Issue of Certificates.** Various certificates like trade certificates and Graduation certificates etc are issued to retiring airmen by their **parent unit** to enhance their re-employability in the civil. Individual is expected to maintain and preserve them meticulously. However, AFRO issues duplicate certificates in case the original is lost or mutilated. The pensioners can also approach AFRO for issue of extract of PORs / posting detail certificate for admission of their wards in Kendriya Vidyalaya (KV) or any other certificates on need basis. In case of death of pensioners a certificate called Service Particular Certificate (SPC) is issued to the wife / NOK of the deceased airman/NC (E).

**Authy: AFO 133/98, RO/2907/P&WW (W) dated 20 Nov 98 and RO/2916/P&WW(W) dated 14 Jun 95.**

(g) **Employment Assistance under Indigent Circumstances.** There is a provision for employment assistance (in Group C&D) under indigent circumstances for dependants of service personnel who:

- (i) **Died while in service; or**
- (ii) **Are Killed in action; or**
- (iii) **Are medically boarded out from service and are unfit for civil employment.**

**Authy: Gol,Mod, DOP&T letter No.14014/6/94{Estt(D)} dated 09 Oct 99.**

**NOTE-1:** The dependants of service personnel who die after discharge from service are not covered under the scheme.

**NOTE-2:** The object of the scheme is to grant immediate financial assistance to the bereaved family to overcome the financial destitution caused by the sudden demise of the head of the family. It may be noted that only 5% of direct recruitment vacancies are reserved under this category. The cases are decided on its merits by the competent authority at Air Headquarters for GP 'C'. However for GP 'D' this decision is taken at the Command HQ of the late Airmen/ NCs (E).

(h) **Issue of Dependent Card.** Dependant card can be issued/renewed from **any nearest Air Force units** on production of discharge book/old dependent card.

(j) **Issue of provisional Diploma certificate** Provisional certificate will be issued by the **last unit** of the individual on receipt of discharge order from AFRO.

### **CERTAIN OTHER BENEFITS TO EX-SERVICEMEN**

6. Beside the above-mentioned assistance/benefits, certain other benefits which are given to ex-servicemen are as follows: -

(a) **Weightage For The Wards of Ex-Servicemen In Selection As An Airmen** There is no reservation for the wards of Ex-servicemen in their selection as an airman. However, in case they are selected on their individual merit, then Central Airmen Selection Board (CASB) gives 10% weightage to the wards of ex-serviceman in the final merit list.

(b) **Age Relaxation.** All ex-servicemen are allowed to deduct their Military Service + Three years from their actual age. The resultant age should not cross the upper age limit prescribed for a post or vacancy (Group 'C' and 'D')

**Note: 1.** The concession in age for appointment to vacancies in Group 'A' and Group 'B' service filled by direct recruitment on the basis on an All India Competitive Examination held by UPSC is however, limited to five years only.

**Note :2.** In some jobs like in Nationalised Banks, the upper age limit is 45 years.

(c) **Free Telephone for Gallantry Award Winners** Ministry of Communications, Dept of Telecom Services has granted full exemption from payment of registration charges for telephones to War Widows, disabled soldiers and gallantry award winners.

(d) **Exemption from Income Tax** DCRG, Commuted value of pension and amount of encashment of Annual Leave are not taxable except when invested, whereupon the income thereof is taxable.

Authy: Income Tax Act Section 10 (10)(i), 10(10) (ii) and 10(10A) (I).

### **THE WELFARE ROLE OF ZILA SAINIK BOARDS (ZSBS)**

7. As an ex-servicemen, you will be required to interact with your Zila Sainik Board frequently. It is considered appropriate for an ex-serviceman to know the responsibilities of ZSB. In all states, the Zila Sainik Boards (ZSBs) work under the guidelines of Rajya Sainik Board (RSB). With regards to the charter of duties of ZSB, it is stated that all ZSBs/RSB function under the guidelines of Kendriya Sainik Board which is an inter service organisation under MOD. The ZSBs/RSBs however function under the direct control of state governments. The Chairmen of RSB is Governor/Chief Minister and the Chairmen of ZSB is usually the DC of the District. The RSB/ZSB has meetings once in a year to discuss the affairs / problems of ex-servicemen and introduce and implement new schemes. The ZSBs are field units and are responsible for following:

(a) Disseminating information to the general public regarding the Armed Forces in the country and constantly endeavoring to promote and maintain a feeling of goodwill between civilian and service personnel and ex-servicemen.

(b) Looking after the welfare of families of servicemen and of ex-servicemen and assisting them in representing their cases to the local administration and/or to the defence authorities.

- (c) Giving information to the general public on the conditions of service personnel in the armed forces, to assist intending candidates in approaching the appropriate recruiting authorities for the purpose of enlistment.
  - (d) Keeping a watch on the adequacy of the number of pension payee branches, post offices and analyzing if there is a need for more such offices.
  - (e) Investigating applications for relief from various military and civil charitable funds and making suitable recommendations.
  - (f) Granting financial relief to ex-servicemen and their dependents from funds at their disposal.
  - (g) Registration of ex-servicemen and issue of ex-servicemen/widow /War widow Identity Card.
  - (h) Placement of ex-servicemen as per the reservation policy of State Government and placement in Corporate Sector including Government Banks.
8. In addition to the duties of ZSBs mentioned above, the ZSBs also extend certain other help to the ex-servicemen and their widows. The details of such helps are as follows: -
- (a) Issue of Medical entitlement card where the ex-servicemen / widows are not members of ECHS.
  - (b) For those ex-servicemen/widows who have gone on discharge/died prior to 01 Apr 2003, the ZSBs assist /advise them to become member of ECHS if they so desire.
  - (c) Vetting and recommending the applications of wards of ex-servicemen/widows for admission to Engineering/Polytechnic/Medical/Other Professional colleges for the seats reserved for Ex-servicemen quota.
  - (d) Grant of financial assistance in cases like Marriage of daughters, scholarship, one time grant/ex-gratia to war widows.
  - (e) Processes and recommends the application for sanction of loan to ex-servicemen for various self employment scheme like SAMFEX-I, SAMFEX-II, SAMFEX-III (Sena Se Gramodyog) and the project under Khadi Village and Industries Commission.
  - (f) Provisioning of legal aid.
  - (g) Allotment of land to the landless ex-servicemen/widows.

## FREQUENTLY ASKED QUESTIONS

**Q.1. After discharge, I have divorced my first wife and re-married to a divorcee having one child from previous marriage. Is this occurrence required to be reflected in my service records? If yes, what steps should I take?**

**ANS** Any occurrence regarding divorce/death of wife and re-marriage including birth of child/adoption after discharge from service is required to be published in SUP NE-POR and be reflected in your service records. You have to forward the following documents to AFRO for each occurrence as given below: -

(a) **Divorce of Wife.** In case of divorce with first wife, you are required to forward the Court Decree called "**Divorce Decree Absolute**". Please understand that divorce decree absolute is granted after the court has passed the judgement on the case of divorce.

(b) **Remarriage After Discharge.** In case of re-marriage after discharge from service you are required to submit marriage certificate issued by the Registrar of Marriage and an affidavit to that effect alongwith joint photograph duly attested by Zila Sainik Board.

(c) **Adoption of Children.** There is **no provision for POR of adopted child** or endorsement of it in documents after the retirement.

**Note :** For more details on marriage after discharge / birth of child / Death of wife after discharge etc. Please refer Para 5 (a) of this chapter.

**Q.2. I have lost my Discharge Book. Can I be issued with Duplicate Discharge Book ?**

**ANS** Yes, you can be issued with a Duplicate Discharge Book. For this purpose you have to lodge an FIR and forward a copy of the FIR alongwith an affidavit stating the circumstances of loss and two copies of joint / single photograph duly attested by ZSB . It should also be mentioned in the affidavit that the original discharge book will be returned to AFRO in case it is found at a later date. For more details, please refer Par 5 (b) of this chapter.

**Q.3. I have been discharged from the IAF with 20 years of service. How much age relaxation can I get for re-employment in civil post?**

**ANS** As an ex-serviceman you are entitled to age relaxation as per the existing Govt rules. For more details please refer Para 6 (b) of this chapter.

**Q.4. I intend to get my former AF service counted towards re-employed post. Will I cease to draw my pension from Air Force if my previous service is counted toward new service?**

**ANS** Yes, In case your former service is counted towards re-employed post, you will cease to draw your pension from the date of your re-employment. Also you have to surrender the commutation and DCRG granted to you at the time of -the discharge from the IAF. However, you can keep the pension amount drawn from the date of discharge from the IAF till the date of re-employment in the civil post (Govt / PSUs/Semi Govt).

**Q.5. This amount of commutation and DCRG is to be refunded to whom?**

**ANS** The amount together with the interest thereupon as arrived at by your re-employer will have to be deposited with the Dy CDA (AF), Subroto Park, New Delhi by way of a Demand Draft payable in favour of Dy CDA (AF). This draft can be forwarded by your re-employer either directly to Dy CDA (AF) or through AFRO.

**Q.6. I have been re-employed in civil after discharge from the IAF. I am not getting Dearness Relief (DR) on my pension. Please clarify.**

**ANS** As per PCDA (P), Allahabad Circular No 07 dated 13 Aug 1999, the payment of DR has been authorised on pension for the re-employed pensioners also. However, to be eligible to draw DR on pension your pay should have been fixed at the minimum of the scale of pay in the re-employed post. In case you have got additional increments on re-fixation of your pay in the re-employed post, you are not

eligible for payment of DR on pension. (Authy : Para 14 of GOI MOD letter Dept of ESM Welfare, New Delhi No. 17(4)/2008/D(Pension/Policy) dated 11 Nov 2008).

**Q.7.** I have been discharged from the IAF. The name of my wife is Jointly Notified in my PPO. Now, I want that my family should draw family pension from my present employer. What action should I take?

**ANS** Your family can draw family pension either from Defence or from Civil Re-employer, whichever is beneficial to her. For details please refer Para 5 (e) of this chapter.

**f**

**THINK IT OVER**

***EVERY GREAT PERSONALITY SEEMS IN HARMONY WITH  
NATURE AND IN CONTACT WITH DIVINE ENERGY.  
THEY HAVE NOT NECESSARILY BEEN PIOUS PEOPLE,  
BUT INVARIABLY THEY HAVE BEEN EXTRAORDINARILY  
WELL ORGANISED FROM AN EMOTIONAL POINT OF VIEW***

## CHAPTER VII

### OTHER FINANCIAL BENEFITS – EX AIRMEN/ NC(E) AND FAMILIES

1. On retirement, airmen/NCs (E) and their families are entitled to certain financial and other benefits, some of them are life long, some of immediate nature and some available on 'Need' basis. These benefits accrue from the Govt (Public Fund) as well as non-public organisations such as AFGIS, IAFBA, AFWWA etc. In this chapter we shall discuss the benefits from the Non-Public Funds of the Air Force.

#### AIR FORCE GROUP INSURANCE

2. The benefits paid by AFGIS – The details of survival / death benefits admissible to airmen / NCs (E) and their families are given below:

<u>Sl No.</u>	<u>Description</u>	<u>Airmen</u>	<u>NCs(E)</u>	<u>Duration</u>
(a)	Compulsory Post Retirement Insurance covers. One Time non refundable contribution: Airmen: Rs. 18.750/- NCs(E): Rs. 7,000/-	Rs.2.5 Lakh	Rs.1.0 Lakh	For 15 years after retirement and 50% cover upto 70 yrs of age whichever is earlier.
(b)	Subsidy for acquiring dwelling unit of AFNHB (Bereaved wives of AF Personnel killed in accidents while in service) Total subsidy.	Rs.1 Lakh	Rs.1 Lakh	Paid in one lump - sum (Shared by AFGIS/ IAFBA/ AFWWA / CWF).
(c)	<b>Retired Personnel Investment Scheme:-</b> Provides safe and secured investment avenues for retired members and their NOKs with AFGIS. AFGIS also extends loan facility upto 75% of deposit amount.			
<b>Queries: Visit <a href="http://indianairforce.nic.in">indianairforce.nic.in</a> (Internet) or <a href="http://afgis.iaf.in">afgis.iaf.in</a> (IAF Intranet) or post your queries at <a href="mailto:afgis[at]iaf[dot]nic[dot]in">afgis[at]iaf[dot]nic[dot]in</a> or fax on 011-25691182</b>				

#### IAF BENEVOLENT ASSOCIATION (IAFBA)

3. The IAFBA provides various types of assistance to Ex-airmen/NCs (E) and to the next-of-kin of deceased personnel. The important benefits available are listed below: -

<u>Sl No</u>	<u>Description</u>	<u>Airmen</u>	<u>NCs(E)</u>	<u>Duration</u>
(a)	Monthly Maintenance Grant (i) For Boarded out personnel Pending Award of Disability Pension. (ii) Missing Personnel (wife/ parents) (iii) For Boarded out personnel with 100% disability and not eligible for disability pension.	Rs.750/- p.m.  Rs.900/- p.m.  Rs.1,000/- p.m.	Rs.500/- p.m.  Rs.900/- p.m.  Rs.800/-p.m.	For 6 + 6 months  For 12 months  For life
(b)	Grant for Commercial venture (Medically boarded out personnel)	Rs.4,000/-	Rs.4,000/-	Lump sum
(c)	Children Education Assistance to Airmen only (min service 24 yrs)	Rs.80/- p.m.	--	For 3 yrs only
(d)	Scholarship for school/ college Education (under graduate/ postgraduate, sports & handicapped children).	Rs.2,400/- pa to Rs.4,800/- pa	Rs.1,200/- pa to Rs. 4,800/- pa	2 to 10 yrs



(e)	Grant purchase of Mechanical Aids like Hearing aids/ artificial limbs etc for self-only.	Rs.5,000/-	Rs.5,000/-	Lump Sum
(f)	Grant on Medical Grounds			
	(i) Reimbursement of Medical bills (ii) Monthly grant for nourishment	Upto Rs.10,000/- Rs.500/- p.m.	Upto Rs.10,000/- Rs.500/- p.m.	Max of 12 month
(g)	Grant of Wheel Chair: Cost upto Rs. 10,000/- amount of grant decided by Director IAFBA. For wheel chair costing more than Rs. 10,000/- Amount of grant decided by Executive committee			
(h)	Grant for purchase of Trade Instrument (Bereaved wives)			
	(i) Death in service (ii) Death after retirement	Rs.4,000/- Rs.2,000/-	Rs.4,000/- Rs.2,000/-	Lump sum Lump sum
(j)	Reimbursement of tuition fees for vocational/ professional courses to bereaved wives or to orphaned child (Death in service).	Rs.5,000/-	Rs.5,000/-	Lump sum
(k)	Special scholarship for orphaned children of AF Personnel who die in service Max two children in a family to cover expenses on tuition fees, boarding lodging charges based on economic status of orphaned child.			
	(i) For Boarders (ii) For day scholars	Rs.2,000/- p.m. Rs.500/- p.m.	Rs.2,000/ p.m. Rs.500/- p.m.	Till completion of class XII - do -
(l)	Grant for daughter's marriage	Rs.6,000/-	Rs.4,000/-	Lump sum
(m)	FAS-Rehabilitation Grant			
	(i) Death in service (Bereaved wives/ NOK wef 01 Apr 96)	Rs.1,500/-pm	Rs.1,500/-pm	For 15 yrs
	(ii) Death after retirement (Bereaved wives/ NOK prior to 01 April 97)	Rs.1,000/-pm	Rs.1,000/-pm	For 08 yrs
	(iii) Death after retirement (Dis before 31 <sup>st</sup> March 97 & death after 01 April 97(20 yrs service). Dis & death after 10 April 97. no minimum service)	Rs.1,000/-pm	Rs.1,000/-pm	For 8 yrs
	(iv) Death after retirement (Bereaved wives/children cases of death prior to 01 Apr 97)	Rs.800/-pm	Rs.800/-pm	For 8 yrs
(n)	Pending award of family pension (Bereaved wives of medically boarded out Airmen/NCs (E).	Rs.375/-pm	Rs.125/-pm	For 6 months
(p)	Scholarship for School/College Education (Under graduate & undergraduate Prof/Post graduate, Sports & Handicapped children)	Rs.2,400/-pa to 4,800/pa	Rs.1,200/-pa to 4,800/pa	2 to 10 yrs
(q)	Grant on Medical Grounds (Reimbursement of Medical Bills)	Upto Rs.10,000/-	Upto Rs.10,000/-	

## **AIR FORCE WIVES WELFARE ASSOCIATION (AFWWA)**

4. The details of various grants from AFWWA are as given below:

(a)	Grant of wives of AF personnel (Medically Boarded out)	Rs.5,000/-	Rs.5,000/-	Lump sum
(b)	Ex-Gratia Payment (Bereaved wives of AF Personnel)			
	(i) Death in Service	Rs.5,000/-	Rs.5,000/-	Lump sum
	(ii) Death after Retirement	Rs.5,000/-	Rs.5,000/-	Lump sum
(c)	AFWWA Pension (Bereaved wives of AF Personnel (Death in Service))	Rs.2,000/-	Rs.2,000/-	Lump sum
(d)	Wedding Grant to bereaved wives of AF Personnel (Death in service) for one child.	Rs.5,000/-	Rs 5,000/-	Lump sum
(e)	Rehabilitation Grant to Widows of NCs(E) (Death in service)		Rs.2,000/-	Lump sum
(f)	Education Scholarship to children.			
	(i) For school going day scholars.	Rs.100/- p.m.	Rs.100/- p.m.	Till completion of studies.
	(ii) For school going boarders and college going day scholars/boarders.	Rs.200/- p.m.	Rs.200/- p.m.	Till completion of studies.
	(iii) For Medical/Engg courses.	Rs.400/- p.m.	Rs.400/- p.m.	Till completion of studies.
	(iv) Vocational training scholarship for widows/ children of Deceased / Disabled.	Rs.1,200/-	Rs.1,200/-	Lump sum

**Note:** The above mentioned benefits are non-public funds however, AFCAO is directly involved in release of benefits like: Leave encashment, Provident Fund, IRLA Balance, Settlement of Allowances and release of PEA cheque for the widow till the pension is settled.

**f**

**THINK IT OVER**

***BE AWARE OF WHAT YOU WANT FOR YOU WILL GET IT”***

## CHAPTER VIII

### ACTIONS RECOMMENDED AS A “MUST DO” FOR PENSIONERS

1. At the time of retirement and during the preparatory phase of retirement, an average airmen /NCs(E) is very myopic and normally does not think beyond his timely payment of pension and other NE benefits. However, we at Pension and Welfare Wing of AFRO are dealing with over 1, 50,000 surviving pensioners and are therefore privileged to a lot of foresight on post retirement complications. We, therefore, recommend the following actions as a “**MUST DO**” for every pensioner:

(a) He must make sure that his own name, his wife’s name, his children’s name and their date of birth is correctly recorded in the Record Copy of Sheet Roll (RCSR) at AFRO. It must be borne in mind that name filled up in IAFF (P) 5 at column ‘What is your name?’ is taken for issuance of Discharge Order and Pension Payment Order.

(b) He must make sure that POR for all occurrences in general and financially affecting occurrences (Local Allowances, Leave encashment, GCB, Sterilisation Pay etc) in particular are taken and reflected in the UCSR and the UCSR is updated in all respects.

(c) He must collect all eligible certificates from his last unit and properly maintain them because they are extremely useful for re-employment and other purposes in future.

(d) He must collect first pension and amount of Death Cum Retirement Gratuity / Commuted value of pension, in person.

(e) He must get his name registered with his respective Zila Sainik Board (ZSB) and collect his Ex-serviceman Identity Card. It must be remembered that ZSB extends help only to those ex-servicemen who are registered with them.

(f) He must mention his full particulars (Ser No, Rank, Name, and Date of Discharge etc) while making correspondence with AFRO or any other agency. AFRO can not locate the RCSR of an ex-airman/ NC (E) without his service No and other details.

(g) He must preserve following documents after retirement: -

- (i) Last Pay Certificate (LPC).
- (ii) Copy of PPOs/Corrigendum PPOs.
- (iii) Photocopy of updated Unit Copy of Sheet Roll (UCSR).
- (iv) Discharge Book.
- (v) Retired Officer Identity Card (Applicable only for HFO/HFL).
- (vi) Ex-servicemen Identity Card Issued BY Zila Sainik Board (ZSB).
- (vii) Dependent Card for family members issued by his last unit.
- (viii) Post Retirement Insurance Certificate (PRIC) issued by AFGIS.
- (ix) AFWWA membership Card.
- (x) SMART Card for ECHS membership.
- (xi) Copies of all-important correspondence with AFRO.

**NOTE:** He must brief his wife to preserve these documents even after his death, for as long as the wife is alive and drawing pension.

(h) He must be clear about the procedure for treatment under ECHS. He must know his nearest ECHS hospital (Polyclinic/MH/empanelled hospitals).

(j) He must anticipate old age related problems, which happen after retirement i.e. Dental Care/Artificial Dentures/ vulnerability to Cataract, prostrate, high BP, Diabetes, Arthritis etc. Besides taking preventive measures he must make full use of ECHS facilities for regular check up and treatment.

## CHAPTER IX

### EX SERVICEMEN CONTRIBUTORY HEALTH SCHEME (ECHS)

#### INTRODUCTION

1. Ex servicemen Contributory Health Scheme (ECHS) is a tri-services project which came into effect on 01 Apr 2003 vide Govt of India letter No 22 (1)/01/US (WE)/D (Res) dated 30 Dec 2002. The scheme is functioning under an integral staff with its Central Office located at Army Headquarters and thirteen Regional Centres located at various major cities. ECHS will cater for Medicare of all Ex-servicemen (ESM) in receipt of pension including disability and family pension. This would also include wife/husband, legitimate children and wholly dependent parents. There are a total of 227 Polyclinics functioning in the country. Out of these, 123 polyclinics are at non-military stations and balance 104 Augmented Armed Forces Clinics are at Military Stations. The scheme is being implemented in a phased manner. Every service person retired/retiring after 01 Apr 2003 will compulsorily have to become member of ECHS by contributing one time his/her share of amount towards the membership. Similarly all those retired prior to 01 Apr 2003 can opt to become an ECHS member by payee the contribution in lump sum. There would be no restriction on age or medical condition for this scheme. This is Govt funded scheme through public money (Authy 22(1)/01/US/(WE)/D(Res) dated 30 Dec 02).

2. ESM/Pensioners are presently not authorised for treatment in MH as a right, they are only entitled for treatment i.e. subject to availability of bed space, doctors and medicines. By joining the ECHS scheme, they come in the authorised category of treatment. The only difference is that his/her initial out patient handling/treatment will be by the ECHS polyclinic rather than the staff surgeon at MH. In case the ESM requires further reference/ treatment, it can be provided to him in the nearest MH or can be referred to an empanelled civil hospital of the patient's choice. ECHS treatment philosophy is out patient treatment by polyclinics and in-patient treatment by MH (Subject to availability) and from empanelled hospitals in the station.

#### ORGANISATION

3. ECHS scheme is a tri service organisation with its central organisation located at New Delhi and headed by Adjutant General of the Indian Army. He is assisted by the Director General Discipline, Ceremonials and Welfare and a Managing Director (Major General). In Air Force, Director of Personal Services, Air HQ (VB) under AOA coordinates. There are thirteen Regional Centres located all over the country headed by Regional Directors. Postal address of the Central Organisation and the Regional Centres are placed at **Appendix-'H'**. The scheme would cater for medicare through 227 polyclinics out of which 104 Military Polyclinics already existing along side service Hospitals and the balance 123 Non-Military polyclinics are set up in various towns in a phased manner (List placed at **Appendix-'J'**) (Authy 22(1)/01/US/(WE)/D(Res) dated 30 Dec 02). The addresses of ECHS polyclinics are also available ECHS web site [ww.indianarmy.nic.in](http://ww.indianarmy.nic.in).

#### ELIGIBILITY

4. The following are eligible to become members of ECHS:

- (a) Ex-Servicemen (ESM) drawing pension /disability pension and their family members.
- (b) Widows drawing family pension.
- (c) Ex-servicemen drawing disability pension.

5. Family members means and include the spouse, unemployed son(s) below 25 years, unemployed and unmarried daughter(s), dependent parents whose combined income is less than Rs. 3500/- p.m. plus amount of dearness relief on the basic pension of Rs 3500/- as on the date of consideration mentally/physically challenged children (unfit to earn livelihood) can be ECHS members for life (Air HQ/24135/31/PC-5 dated 13 Oct 04) and widowed/divorcee daughter who are dependent on the ESM and their income from all the sources is less than 3500/- + Dearness Relief p.m. (no age restriction) (Authy B/49701-PR/AG/ECHS dated 24 Feb 09).

## **MEMBERSHIP**

6. All Officers, Warrant Ranks, SNCOs, Airmen and NCs (E) retired on or after 01 Apr 2003 are compulsorily required to become members of ECHS scheme. Presently the ECHS contribution is being deducted through the PPO. All those pensioners retired prior to 01 Apr 2003 can exercise their option to become member of the scheme. All pensioners (ESM) joining the scheme will forfeit the medical allowance of Rs. 100/- p.m. presently admissible to them. Non-ECHS members will continue to get medical allowance and also treatment from existing MH/SMC as **entitled members** only, subject to availability of bed space, medicine, doctors etc. They cannot be treated at par with ESM pensioners (and their dependent) who have become ECHS members. ECHS members shall be given full range of treatment for all categories of diseases in MH and /or empanelled Hospitals.

7. One individual cannot become member of two Govt/PSU schemes (CGHS etc). He has to cancel membership of the other scheme in case opting for the ECHS. Strict action shall be initiated in case of concealment of facts.

## **COLLECTION OF APPLICATION FORMS**

8. Application form for enrolment into ECHS is an unnumbered, self-explanatory form consisting of fourteen pages and is provided on payment of Rs. 2/- Ea at AFRO. (Specimen copy produced at Appx 'K'). These forms are also available at all Army Station HQs, all Air Force Stations, and Rajya Sainik Board Offices. The form consists of the following, which needs to be checked while collecting the same (Authy: B/49708- R/AG/ECHS dated 25 Apr 05). ECHS application can also be downloaded on ECHS website and [www.afro.nic.in](http://www.afro.nic.in).

- |     |                       |   |                          |
|-----|-----------------------|---|--------------------------|
| (a) | Application Form      | : | 04 Pages (Page No 1 – 4) |
| (b) | General Instructions  | : | 04 Pages (Page No 7-10)  |
| (c) | Receipt for Documents | : | 02 Page (Page No. 5-6)   |
| (d) | Sample of Affidavit   | : | 01 Page (Page No 11)     |

## **CONTRIBUTION**

9. Prior to 01 Apr 04, Rates TC was governed vide CDA letter No. AT/W/4807/ECHS dated 02 Apr 03 all ESM are required to make one-time contribution based on their basic monthly pension (excluding DA). Presently the ECHS contribution is being deducted through PPO at the time of its issue at JCDA (AF). Pension means the un-commuted pension for this purpose. The rates of contribution towards this scheme as revised wef 01 Apr 04 vide letter No. B/49784/AG/ECHS dated 15 Jan 05 are as follows: -

<b>Basic Monthly Pension</b>	<b>One Time Contribution</b>
<b>Upto Rs. 3,000/-</b>	<b>Rs. 1,800/-</b>
<b>Rs. 3,001 – Rs. 6,000/-</b>	<b>Rs. 4,800/-</b>
<b>Rs. 6,001 – Rs. 10,000/-</b>	<b>Rs. 8,400/-</b>
<b>Rs. 10,001 – Rs. 15,000/-</b>	<b>Rs. 12,000/-</b>
<b>Above Rs 15,000/-</b>	<b>Rs. 18,000/-</b>

However, War Widows and War Disabled personnel are exempted from payee one time contribution towards ECHS, which is given in MOD D (Res) letter No. 24(2)/03/US (WE) D (Res) dated 02 Jan 04 & GOI MOD 22(1)/US (WE)/D (Res) dated 08 Mar 04.

## **AFFIDAVIT**

10. All ESM are required to make declaration on an affidavit as per details given at page 11 of ECHS application form. The details are required on following aspects:

- (a) PPO number and date
- (b) Details of legal dependents i.e. name, age, income, married status etc.
- (c) Information on membership of other medical scheme funded by central GOVT.
- (d) Undertaking on correctness of above information.

11. Since PPO No is not available with the individual therefore it has been clarified by ECHS Regional Centre Delhi Cantt that DO number of AFRO can be given in the affidavit. Subsequently, AFRO will forward a copy of the PPO to Regional Centre (ECHS) Delhi Cantt. The format of the affidavit is placed at page 11 of the application form and it is to be made on a Non-judicial stamp paper of Rs. 10/- and attested by a Magistrate or Notary. It is a legal document. In case of misuse, submission of fraudulent information or any other misdemeanor, the ECHS has the right to take legal action. Photographs of all beneficiaries are required to be pasted on the original affidavit and the same is required to be submitted along with the completed application form.

### **FILLING UP APPLICATION FORM**

12. Detailed instructions are attached alongwith the application form. It must be understood that ECHS scheme is maintained through computers and all the ECHS applications will be fed into the computers through a scanner by using the scanning technique. Therefore, there are certain special instructions, which must be followed while filling up the ECHS application form. Important guidelines for filling up ECHS forms are as given below: -

- (a) The form is required to be filled in **Blue Ink** and **CAPITALS** only.
- (b) Name(s) of dependent(s) should tally with service documents/records.
- (c) All columns and necessary details must be filled otherwise the application form will be rejected.
- (d) Coloured Passport size photograph in civil dress with sharp image of pensioners, Spouse, Children and Dependent(s), as the case may be, to be affixed at appropriate boxes.
- (e) All the information should be within the boxes provided in the form.
- (f) Blank Boxes are to be left, as they are. Scoring of these boxes not permitted.
- (g) One space to be left blank between the name and initials.
- (j) Abbreviated form can be used to accommodate the information in the space given.
- (j) PPO/Account No. should be entered alongwith the address of the bankers.
- (k) Regarding children employed/marital status in respect of children in **Page No – 3** must be quoted.
- (l) Cutting/Over Writing is strictly prohibited.
- (m) **Rank.** Rank of the applicant is to be written in abbreviated form as per the instructions (Page – 06)
- (n) **Title.** While entering data of Spouse/Daughter/Son/Parents in the blocks, the title Mrs, Smt, Ms, Miss, Mr or Master, or any other regionally used title (such as Ch / Th etc) is NOT to be written. Only the name is to be written in the specified blocks. "MRS MEENA KUMARI" or NOK/family pensioner shall, in each case, be restricted to 20 characters only, inclusive of space – long names must be suitably abbreviated.
- (o) **Abbreviation of Long Names.** In case of very long names, the Christian, Middle, and other names will be abbreviated as a single alphabet in capital letters. Surname will be written in

full. For e.g., "PULLAKUTTY CHERIAN VENKATA MUTHUSWAMY" shall be written as "P C V MUTHUSWAMY" or "MUTHUSAMY P C V" as per records of the individual. "P.C. SORKAR" should be entered as "P C SORKAR", i.e. without full stops.

(p) Two photocopies of pages 01 to 04 after filling are also required to be attached with application.

(q) A minimum of one SMART CARD is compulsory for every Ex-Serviceman. However Three ADD on Cards are permitted in addition to one Master Card. A consolidated **DD @ Rs. 90/- per SMART CARD /Add on Card** is required to be submitted alongwith ECHS application form. The **DD is to be payable to Regional Centre (ECHS) Delhi Cantt.** with Service No., Rank, OName & DOD on the reverse of the DD.

Note: It is advisable to do one practice of filling up of ECHS form on a photocopied form, do all the corrections and then fair it on the actual form.

**IMPORTANT INFORMATION ON SMART CARD**

13. **Objectives of 'SMART Card Based System** The ECHS SMART card is expected to be similar to the normal credit card in looks. The SMART Card will have all the essential information on a chip inside the SMART Card. In addition basic information on the pensioner and his dependents will be printed in front of the card and behind the card. SMART CARD will basically operate at an ECHS centre (Polly Clinic/MH) with a SMART Card Compatible Computer. The objectives of SMART Card based system are: -

- (a) To ensure smooth running and security of the ECHS System so that no unauthorised person avails of medical benefits.
- (b) Positive and irrefutable identification of members using biometrics, to prevent fraud.
- (c) Inter-operability of the card at any of the Polyclinics located throughout the country, thereby facilitating members to avail medical benefits at all times irrespective of their physical location.
- (d) Assist ECHS in budget control and statistical analysis.

14. **Looks of SMART Card** Looks of SMART Card will be as follows: -

**FRONT FACE OF SMART CARD**

<b>ECHS CARD</b>	
Service No 60603 Category: Private DOR:15-06-92 Service: Navy Blood Group: PPO NO & Date 09/97/A/S/ 089 /92, 18.6.92	
CHIP	PHOTO
Name : Vinod Kumar Kaput Rank : Commodore (Retd) DOB : 20 - 01 - 1945	
Per Add: <i>[Signature]</i> 77, Sector - 26 Noida - 201301	
Banker: SBI, Nidnon Bhavan, New Delhi - 110 001	
SBI Account No : Radha J. Joneja Lt.Col AMC	
<i>[Signature]</i> Signature of Issuing Authority	<i>[Signature]</i> Signature of Pensioner

**REVERSE FACE OF SMART CARD**

<b>ECHS HEALTH CARD FAMILY DETAILS</b>	Name	SUDHA KUMARI			
	Relationship	WIFE			
	Date of Birth	16.06.54			
		PHOTO			
	Name	BRAJESH KUMAR			
	Relationship	FATHER			
	Date of Birth	23.11.1915			
		PHOTO			

15. **Number of SMART Cards Which Can Be Issued:** At least one **SMART Card** is compulsory for all individuals. However, based on the split location of the family or the travel requirements of the individual, up to a maximum of three **ADD ON Cards** can also be demanded by each individual. **ADD-ON-CARDS** for Self and Dependent parents are not permitted. A bank **draft @ Rs 90/- per SMART Card/ ADD ON Card** is to be made out for "**Regional Centre ECHS Delhi Cantt.**" For example if an individual has demanded one 'SMART Card and three 'ADD ON CARD', then he will have to submit a draft for Rs. 90 X 4 Cards i.e. Rs. 360/-. Since a draft is valid for only for six months, therefore, all individuals are required to send their consolidated draft at Discharge date minus six months (D - 6) to ECHS section, AFRO (Pen & Wel Wing). Any change in the information,

regarding rank/family members can also be intimidated at this time. It must be remembered that any error in the SMART Card can only be corrected by making a new SMART Card. If a mistake is caused by the individual (wrong facts / spellings, not adhering to laid down instructions for filling up ECHS form etc), then the individual will have to bear the cost of this replacement SMART Card @ Rs. 90/- (Rupees ninety only) per SMART Card / Add on card. If the mistake is by the manufacturer of SMART Card, then the manufacturer will bear the cost of the replacement.

16. **Other Details Available inside the Chip of SMART Card** The following details will be available inside the SMART Card and can be retrieved with a matching computer at ECHS Centre:

(a) **Personal Details of the Pensioner:**

- (i) Member ID, Card Serial Number
- (ii) Service Number, Rank, Name, Date of Birth
- (iii) Regiment/Corps/Unit, Date of Retirement, Medical Category
- (iv) Permanent Address, Telephone Number, E-mail Address
- (v) Type of Pension, PPO No, Name & Address of Bankers, Record Office
- (vi) Fingerprint of the pensioner, Photograph of the pensioner

(b) **Personal Details of the Dependents:** (Spouse, Children and Parents)

- (i) Member ID, Name, Date of Birth
- (ii) Date of Marriage (In case of Wife)
- (iii) Relationship (Daughter/Son)
- (iv) Marital Status (In case of Children)
- (v) Employed (**Y/N**) (In case of Children)
- (vi) Monthly Income (In case of Parents)
- (vii) Add on Card Issued? (**Y/N**)
- (viii) Mentioned in Discharge Book? (**Y/N**)
- (ix) Fingerprint.

(c) **Day to Day Medical Transaction Details** At any point of time, last 50 transactions of the ECHS member will be available in the SMART Card. When the number of transactions increases beyond 50, the oldest transaction will be erased to make room for the new transaction.

(d) **Medical Data of Each Beneficiary** The following medical data will be maintained for each beneficiary in the SMART Card, so that in the even of emergency or otherwise, the data is available to the Polyclinic doctors: -

- (i) Chronic disease history.
- (ii) History of major surgery.
- (iii) Blood Group.
- (iv) Known drug allergy details.

(e) **Medical Referral Details** The beneficiaries data, whenever referred to a diagnostic centre/referral hospital/consultant specialist, will be captured in the database as well as on the SMART Card. These records will have the following information: -

- (i) Name of the doctor who referred the patient.



- (ii) Name of the Referral hospital/diagnostic centre/specialist.
- (iii) Description of tests to be done/opinion sought.
- (iv) Date on which referral is made.
- (v) Date on which the patient is attended.
- (vi) Date on which the reports/bills are received back from referral hospital.
- (vii) Amount claimed by the referral facility for services provided.
- (viii) Date on which bill is forwarded to Station Headquarters for payment.

(f) **First Time Registration & Activation of SMART Card** It is mandatory for members and dependants to report jointly, or singly, to nearest Polyclinic indicated in their Smart Card, along with SMART Card, for recording of fingerprint biometric data of the pensioner and each member of his/her family. This activity will be automatically undertaken at the concerned ECHS Polyclinic when the ECHS member or his/her dependent (s) go for treatment during their first visit after receipt of SMART Card.

(g) **Use of Polyclinic Facilities** When visiting a Polyclinic subsequently, it is mandatory for the pensioner or his / her dependant to carry the ECHS SMART Card as proof of eligibility. The Polyclinic may not accept the individual for treatment in its absence. Following sequence of action will take place at the Polyclinic: -

- (i) The operator will start the PC and log in to the system.
- (ii) Member comes to the Polyclinic Reception and hands over his SMART Card.
- (iii) If the beneficiary has come to the Polyclinic for the first time, his/her fingerprint is captured and written into the SMART Card.
- (iv) On all subsequent visits, fingerprint reader authenticates him/her.
- (v) Once authenticated, all personal information is read from the SMART Card along with his/her photograph, compared with the Polyclinic database, and is displayed on the monitor of the Receptionist.
- (vi) The Receptionist allots the doctor, puts the waiting list number and prints the medical examination slip.
- (vii) The patient meets and Polyclinic doctor with the medical examination slip and the doctor records the diagnostics and medicines.
- (viii) The patient comes back to the receptionist and the relevant details are respectively captured into the MIS and SMART Card.
- (ix) In case the patient is referred to a diagnostic centre for tests, or referred to an empanelled hospital, or to a specialist, a referral slip is generated by the receptionist and the relevant information is entered in the SMART Card, and the record is flagged for future update of financial input.
- (x) The patient goes to the Polyclinic Pharmacy store for collection of medicines and in the event of any referrals, visits the referral facility for treatment.

(h) **Action on Loss of SMART Card** : As per existing procedure, an affidavit is to be submitted in case of loss, and intimated to Regional Centre (ECHS) Delhi Cantt. or to the Regional Centre (ECHS) from where the card was issued. Consequent to reporting, a fresh SMART Card will be issued within 60 days. The issue of duplicate SMART Card would be on payment of Rs. 90/- for each card through Demand Draft in favour of the respective Regional Centre (ECHS). Safety of SMART Card(s) is paramount, as the ECHS member/dependant will be unable to use ECHS benefits till receipt of new card. On loss of second Smart Card, account of which will be kept by the system; the pensioner will cease to be a member of the Scheme (Authy : B/49711/AG/ECHS dated 10 Jan 05).

(j) **Interim Arrangements in lieu of SMART Card.** Till such time, issue of SMART Cards commences, any pensioner who has paid his contribution shall be permitted to use the Receipt provided to him by the Station Headquarters/Record office/Regional Centre where the application was deposited, as the authority for availing treatment under the ECHS, for himself/herself/authorised dependants. Orders to this effect have been passed to all Service Hospitals, and similar instructions will be passed to empanelled hospitals. However, along with the Receipt, the member shall be required to carry/produce some authentic document/identification of his/her own or dependant's identity. This is only temporary measure, and will be cancelled as soon as SMART Card issue commences.

### **DESPATCH OF SMART CARD**

17. AFRO will collect the SMART Card/Add on card from ECHS regional centre at DELHI Cant. The same will be dispatched to the individual through Registered SDS along with a receipt slip to parent unit before DOD and to parent polyclinic after DOD. **The individual must MAIL BACK the receipt to AFRO promptly other wise AFRO will presume non receipt of card and will get the SMART Card de-activated through ECHS regional centre as a safety precaution.**

### **TREATMENT**

18. The starting point for medical attendance will be the nearest Military/Non Military Polyclinic. All available treatment within the capabilities of the polyclinic shall be provided at the first instance. Medical and Para medical staffs are being hired/employed on contract for working at polyclinics. These polyclinics will be opened for eight hours during weekdays and shall remain closed on Sundays and Gazetted holidays. Patients requiring attention outside working hours will be handled by duty MO's of Service hospitals (in military stations) and by on call civilian doctors in non-military stations. One nursing assistant will be available in all clinics in non-military stations after working hours. Depending on the type (A, B, C, D) which has been decided on the number of ESM residing in that area, each polyclinic will have emergency bed with monitor, physiotherapy equipment, Laboratory with reagents, Digital ECG Machine, Dental chair, Ultra sound Machine, X-ray machine, Oxygen Concentrator, Nebulisor, Minor OT and BP machine etc.

19. ECHS 'A' & 'B' type of clinics will have medical officers, medical specialist, gynecologist and dentist on their establishment. Type 'C' & 'D' will not have the specialist staff. Patients will be referred to out-source Hospitals/Diagnostic Centers and specialist. List of 227 Military /Non-military Polyclinics is placed at **Appendix-'J'**. The list is as per the alphabetical order of ECHS Regional Centers. This list also indicates the State and the type of Polyclinic i.e. A, B, C etc. To avail medical treatment at any polyclinic/empanelled hospital, it is mandatory for pensioner/widows/dependents to first report to nearest polyclinic along with their ECHS membership SMART Card.

### **TREATMENT AT MILITARY HOSPITAL / EMPANELLED HOSPITALS**

20. In case the required treatment is beyond the scope of the polyclinic, then the Medical Officer at the first stage will refer the patient to local MH (Where required facility is available). Should MH not have the desired treatment/speciality/bed space, the ECHS patient will have the choice of going to any empanelled hospital at the station. The choice of empanelled hospital will be of his and not of the doctor. In case the treatment is not available at that station the ECHS member can go to any empanelled hospital in India, however cost of transportation of going there is to be borne by the

individual. The list of all the hospitals recognized by ECHS and DGAFMS for empanelment (state wise) is appended at **Appendix-'K'**.

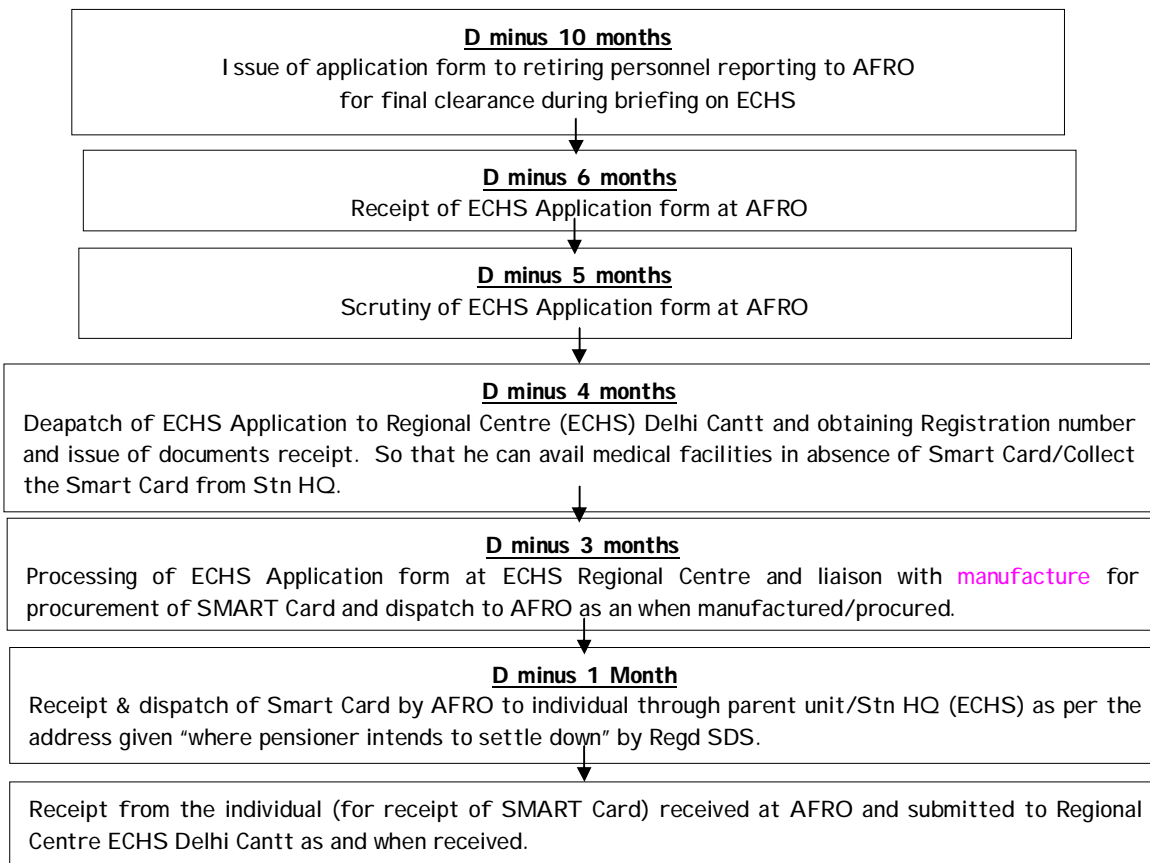
## **EMERGENCY TREATMENT**

21. In case of emergency, the ECHS member can either report to the nearest service hospital or to the nearest empanelled hospital in which case the bills shall be paid by ECHS or even the patient can report to any nearest Non empanelled hospital, in which case, the ESM or his/her representative will have to pay the charges to the non empanelled hospital initially. In all the case where emergency treatment is availed and where the patient does not go through the polyclinic, it will be patient's responsibility to inform his Polyclinic/ECHS Central Organisation or Regional Centre within 48 hours of where he/she is admitted. The bills will be forwarded in original to the ECHS Central Organisation New Delhi, for reimbursement. The onus of informing the Polyclinic or ECHS regional centre and proving the medical emergency shall be that of the ESM patient.

## **REIMBURSEMENT OF MEDICINE/TREATMENT**

22. The term "reimbursement" ceases to exist with the ECHS being put in place. No entitled ECHS membership card holder is required to pay any money for treatment/medicine at any ECHS/Polyclinic/MH or at an empanelled hospital/diagnostic centre to which he/she has been referred to by the polyclinic. All bills for treatment/medicine will be cleared directly by the ECHS organisation. The only exception is that, reimbursement will be made to an ESM for emergency treatment undertaken in a non-empanelled hospital.

## **FLOW CHART FOR PROCESSING OF ECHS APPLICATION FORM AT AFRO**



**Note:** Airmen proceeding on discharge at their own request/Medical Invalidation and family pensioner (service death) are required to submit there ECHS Application Forms at Stn HQ/ECHS Regional Centre of the area of their re-settlement directly along with all requisite documents.

## **FREQUENTLY ASKED QUESTIONS**

**Q.1.** I have retired after 01 Apr 2003, but my contribution for ECHS has not been deducted through the PPO. How can I become an ECHS member?

**ANS** AFRO has sent a letter to all its retirees after 01 Apr 2003, advising them on this matter. AFRO will take direct responsibility of ECHS membership only for those Ex-airmen/NCs (E)/ NOKs whose ECHS contribution have been deducted through their PPO (approximately wef Oct 2003). All other retirees will have to become ECHS member through their nearest Zila Sainik Board / ECHS Regional centres.

**Q.2.** What will happen to Medical Insurance Scheme (MIS) sponsored by AFGIS?

**ANS** MIS by AFGIS has been stopped wef 01 Apr 2003. One-year overlap (upto 31 Mar 2004) has been given to old MIS members so that they can become ECHS members. As we understand, AFGIS is refunding the MIS money to all such members who have not yet claimed any benefits from it. With effect from 01 Apr 2004, MIS will cease to exist.

**Q.3.** What is the procedure for obtaining medicines, which are not available either with the Polyclinic or with the empanelled hospital?

**ANS** Local purchases will be done through concerned SEMO, in military stations, and by the OIC Polyclinic/Medical Officer in non-military stations. They have been authorised certain LP powers. ECHS members are NOT required to purchase any medicines and, hence, will not be re-imbursed.

**Q.4.** What is the basis of location of Polyclinic and their range of treatment facilities being provided by them?

**ANS** ESM population of the area, as per ZSB reports, determines the type of Polyclinic, i.e. Type A, B, C or D. Each Polyclinic has different scales of manpower & equipment.

**Q.5.** What are the methods of Empanelment of hospitals and doctors with respect to each Polyclinic?

**ANS** Empanelment will be done by a Station Board of Officers, comprising of the Station Cdr/his rep, one Medical rep, a Medical Specialist and member of ECHS, and approved by Command HQs. List of empanelled Hospitals/Diagnostic Centres & Specialist Consultants will be available at each polyclinic will also be posted on ECHS website at a later date.

**Q.6.** How do the members intimate the change of residence, or change of status of dependents?

**ANS** Change may be intimated to Station HQs. However, each time the pensioner or his dependants visit a Polyclinic, the status of dependants will automatically be checked. ECHS members must provide accurate facts of status. In case it is discovered that change of status has been concealed (no matter what the reasons) the provisions of Para 9 of the Affidavit will be applied and membership of the ESM and all his dependants will be terminated without any relief. There is NO appeal in such cases.

**Q.7.** Can the members have the option to continue with more than one Govt/PSU Scheme?

**ANS** An individual cannot become a member of two Govt/PSU Schemes he/she has to cancel membership of the other scheme in case opting for the ECHS. For example, one cannot be a member of CGHS & ECHS at the same time Nor can one be a member of the ECHS and a PSU scheme at the same time. In case any concealment of facts is discovered at any stage, recourse will be taken as per provisions of Para 9 of the Affidavit.

**Q.8. What is the medical coverage for those Ex-servicemen who do not join the ECHS Scheme?**

**ANS** Existing facilities through MI Room and Service Hospitals will continue. This will be reviewed after five years.

**Q.9. Why is re-imburement not allowed under ECHS yet, even though members have submitted forms and made payment of contribution.**

**ANS** The procedures for Empanelment of hospitals/diagnostic centers/ consultants and payment to them are under consideration of the Government. There is NO payment to be made by an ECHS member under the scheme, hence, NO provision for re-imburement.

**Q.10. Will all dependents of ESM be allowed Add-on SMART cards independently?**

**ANS** Only three Add-on cards are being provided in the initial phase. However, the question of having more Add-on cards will be reviewed later, depending on demand. The cost of each Smart Card is Rs 90.00-cost of each Add-on Card is also Rs 90.00.

**Q.11. Whether dentures will be authorized under ECHS?**

**ANS** Yes. Details is issued through an ECHS Brochure by 31 Mar 2004.

**f**

**THINK IT OVER**

***“ THERE IS A PRINCIPLE WHICH IS A BAR AGAINST ALL INFORMATION,  
WHICH IS A PROOF AGAINST ALL ARGUMENT AND WHICH CANNOT FAIL TO KEEP  
A MAN IN EVERLASTING IGNORANCE. THAT PRINCIPLE IS CONDEMNATION WITHOUT INVESTIGATION.”***



## **SPONSORING**

5. (a) The sponsoring activities are carried out through the website. The list of willing candidates who has applied for the posted vacancy online is taken out as per last date mentioned by the employer. Then profiles of the candidates are verified as per the QR or eligibility criteria mentioned by the employer for the post, and finally the list of eligible candidates is sponsored to the concerned employers.

(b) The following criteria are used to finalise the list of the candidates out of the total online willingness received for a particular vacancy before sending to the employer : -

- |       |                           |        |                            |
|-------|---------------------------|--------|----------------------------|
| (i)   | Company QRs               | (vii)  | Recently retired personnel |
| (ii)  | Qualification for the Job | (viii) | No of chances given        |
| (iii) | Job Profile               | (ix)   | Salary range               |
| (iv)  | Experience                | (x)    | Age                        |
| (v)   | Personnel already retired |        |                            |
| (vi)  | Location of the job       |        |                            |

***Note:*** Though IAF Placement Cell make all efforts to facilitate a second career to Airwarriors, however, further negotiations pertaining to remuneration, contractual obligation, selection, continuation of job and any conflict between employee and employer will have nothing to do with IAF Placement Cell/RPCs.

### **THINK IT OVER**

***“ YOU DON'T HAVE TO BE TIRED. GET INTERESTED IN SOMETHING, GET ABSOLUTELY ENTHRALLED IN SOMETHING.***

***THROW YOURSELF INTO IT WITH ABONDON.***

***GET OUT OF YOURSELF. BE SOMEBODY.***

***DO SOMETHING.***

***THE MORE YOU LOSE YOURSELF IN SOMETHING BIGGER THAN YOURSELF,***

***THE MORE ENERGY YOU WILL HAVE.***

***YOU DON'T HAVE TIME TO THINK ABOUT YOURSELF AND GET BOGGED DOWN IN YOUR EMOTIONAL DIFFICULTIES”.***

**APPLICATION FOR ADDITIOANAL PENSION OF 80 YEARS  
OF AGE AND ABOVE : PRE 1986 RETIREE**

1. Service No. :
2. Rank :
3. Name :
4. Group :
5. PPO No. :
6. Latest PPO No. (if any):
7. \*\*DOB :
8. Name of Spouse/FP :
9. Date of birth of Spouse :
10. \*BSR Code of Link Bank :
11. \*BSR Code of Payee Branch & A/C No :

.....  
Note : All fields are mandatory.

\* Not required for pensioners drawing pension from DPDO/Treasury/PPM

\*\* Claim of DOB by pensioner should be supported with attested photocopies of Discharge Certificate.

(Signature of pensioner)  
With complete Address

Date:

Address of PDA with Rubber Seal:



**COMMUTATION TABLE**

**Commutation Values for a pension of Rs 1 per annum**

<b>Age next Birthday (In Years)</b>	<b>Commutation Value expressed as number Of years purchase</b>	<b>Age next birthday</b>	<b>Commutation Value expressed as No of years Purchase.</b>
20	9.188	51	8.808
21	9.187	52	8.768
22	9.186	53	8.784
23	9.185	54	8.678
24	9.184	55	8.627
25.	9.183	56	8.572
26	9.182	57	8.512
27	9.180	58	8.446
28	9.178	59	8.371
29	9.176	60	8.287
30	9.173	61	8.194
31	9.169	62	8.093
32	9.164	63	7.982
33	9.159	64	7.862
34	9.152	65	7.731
35	9.145	66	7.591
36	9.136	67	7.431
37	9.126	68	7.262
38	9.116	69	7.083
39	9.103	70	6.897
40	9.090	71	6.703
41	9.075	72	6.502
42	9.059	73	6.297
43	9.040	74	6.085
44	9.019	75	5.862
45	8.996	76	5.657
46	8.971	77	5.443
47	8.943	78	5.229
48	8.913	79	5.018
49	8.881	80	5.812
50	8.846	81	4.611

***THINK IT OVER***

***“ MAN USUALLY LEARNS THE TRUTH ABOUT HIS BODY  
WHEN IT IS TOO LATE TO SAVE IT.”***

From,

-----  
-----  
-----

To,

-----  
-----  
-----

**RESTORATION OF COMMUTED PORTION OF PENSION AFTER 15 YEARS**

Dear Sir,

Kindly restore my commuted portion of pension in terms of Ministry of Personnel PG & Pension Department of P & PW OM No. 34/2/86 P & PW dtd 05.03.1987.

Required particulars are given below:

- |    |  |   |       |
|----|--|---|-------|
| 1. | Name in BLOCK letters  | : | ----- |
| 2. | Date of retirement   | : | ----- |
| 3. | PO/PPO No. /ES No.   | : | ----- |
| 4. | Amount of original pension   | : | ----- |
| 5. | Amount of pension commuted   | : | ----- |
| 6. | Name of the Account Officer, viz. the Authority who issued PO/PPO No.  | : | ----- |
| 7. | Name of the Treasury /Post Office PPM /Other Pension Disbursing Agency | : | ----- |

Date:

**Signature of the Pensioner**

**Particulars Verified**

**Signature  
Rubber stamp of PDA**

**FORMULAE FOR CALCULATING SERVICE PENSION,  
DCRG AND COMMUTATION**

**Pension :** 50% of emoluments last drawn or average of reckonable emoluments drawn during last 10 months, which ever is more beneficial.

**DCRG:** 
$$\frac{\text{Total Service} \times (\text{Total emoluments} + \text{DA})}{2}$$

\*Subject to maximum 33 years or maximum 10 Lakhs, whichever is lesser.

**Commutation:** 50% Of Basic Pension X 12 X Age Value  
(Age is counted as on next date of birth after DOD)

CATEGORY	RETIRING/SERVICE INVALID PENSION	FAMILY PENSION	ALL TYPES OF GRATUITIES
Personnel Below Officer Rank	Pay in the Pay Band, Grade Pay, Military Service Pay, ‘X’ Group Pay and whole of classification allowance, if any last drawn	Pay in the Pay Band, Grade Pay, Military Service Pay, ‘X’ Group Pay including classification allowance, if any last drawn by the individual	Pay in the Pay Band, Grade Pay, Military Service Pay, ‘X’ Group Pay and whole of classification allowance, if any, plus Dearness Allowance admissible on the date of discharge / Invalidment / Death.

XXXX

**THINK IT OVER**

“ A fool and his money are soon parted.”

**ACTIVITY CHART FOR UNIT ORDERLY ROOM**

**ACTIVITY CHART**

**Months**

**D – 12** Discharge order (DO) issued by Recording Wing AFRO is received by the unit.

**Within three weeks of receiving** Dispatch the following documents to OIC Recording Wing, AFRO:

- (a) The Adjt is to review the UCSR for accuracy and completeness in all respect **the DO** bring it up to date (refer Appx 'A' to AFO 133/98, Para 9 of AFO 40/89 and check the List attached as Annexure I))
- (b) Updated CTC of Unit Copy of Sheet Roll (UCSR) along with duly signed check list
- (c) Appendix 'B' to AFO 40/89(Application cum sanction for Encashment of leave – in triplicate)
- (d) Requisite information vide Appx 'A' to AFRO letter No RO/2901/1/1/P&W(Adm) dated 05 Feb 99.

**Note:** Leave availed and leave encashment vide (b), (c) & (d) should tally.

**D – 11** Dispatch the following documents to OIC Pen-Wel Wing, AFRO:

- (a) IAFF (P) 28(Descriptive Roll) : Two copies
- (b) IAFF (P) 61 (Roll of airmen) : Two copies
- (c) Appendix 'A' (Details of Family) : Two copies
- (d) Form 'A' (Nomination Form) : Three copies
- (e) Form of application for commutation : Two copies
- (f) Joint Photograph duly attested by Commissioned Officer in front in civil clothes : Four copies
- (g) Single photograph in uniform with service particulars on reverse : Two copies
- (h) Medical Certificate as per Air HQ letter No. AHQ/26481/Med-7 dated 24 Jun 2002 : Two Copies

**Note** 1. Check list is attached as Annexure I to this Appendix.

**Note** 2. Airmen reporting to AFRO for final clearance should bring original UCSR for talliation and thereafter the same is to be carried back to the Parent Unit. Original UCSR would continue to be maintained at Unit till DOD and thereafter dispatched to AFRO (Pen & Wel Wg). NE POR is also to be dispatched to the Recording Wg (Post NE) for updating of leave details and preferment of Leave Encashment claims with AFCAO.

**D Day**

- (a) Immediately after discharge, the Unit should complete the UCSR in all respect. The following entries ought to be recorded in the UCSR by the unit: -

- (i) Any outstanding entries from previous POR.
- (ii) Leave granted/encashed
- (iii) Discharge entry.
- (iv) Trade proficiency
- (v) Conduct sheet
- (vi) Assessment
- (vii) Admission/Discharge to/from hospital
- (viii) AWL/Cease to be AWL and its regularisation in appropriate section of UCSR.

(b) Unit to issue only the authorised, discharge certificate to airmen as per AFRO letter No RO/2902/P&WW(Wel) dated 15 Jun 2004.

(c) Dispatch of Registration form in duplicate to Zila Sainik Board.

(d) AOC/Stn Cdr/CO will hand over the copy of PPO and Pension certificate to superannuating airmen on their last day in the IAF.

**D + 1 day** Originate Ops Immediate Signal for intimation of discharge & SOS of the airman to OIC Pen-Wel Wing, OIC RW(DIS) both at AFRO and OIC NEAS , AFCAO.

**D+2 days**

(a) Immediately after discharge the following entries are to be promulgated in the Unit NE POR.

- (i) All outstanding entries under appropriate headings.
- (ii) Leave granted prior to discharge/leave encashed.
- (iii) Discharge authority.
- (iv) Annual leave availed with dates (From\_\_\_\_\_ to \_\_\_\_\_), No. of days leave not availed and No of days leave encashed, all with POR No's , for last two years of service, prior to date of discharge of airmen/NCS(E) must be promulgated under heading 'K' of NE POR.

(b) Dispatch Original UCSR to OIC Pen & Wel Wing. NE POR to be dispatched to OIC RW (Post NE).

(c) Dispatch NE-POR as per appendix 'C' to AFO 40/89 as per distribution list and to OIC Service Pension (AFRO), RW (Leave encashment Cell) also.

(d) Dispatch duly certified Appx 'B' to AFO 40/89 by Unit Adjnt to AFCAO (NEAS) along with NE POR.

**Note: 1.** Leave details from 1983 onwards are to be promulgated under heading "A" in the format given below. If number of days leave availed in a particular year is less than 30 days, then instead of writing it as 30 days, exact number of days availed only should be written.

Year	Unit	Total leave availed with period (From... To....)	POR No	Leave Not availed	No of days encashed	POR No promulgating accumulation of leave

**Note: 2.** Encashment of Leave (No of days) promulgated in NE POR should tally with those approved in Appx'B' to AFO 40/89 (Application cum sanction of encashment of leave).

**Note: 3.** NE POR should contain number of leave availed and leave encashed as latest as on the date of discharge.

**Note: 4.** Checklist for Adjutants is attached as Annexure I & II to this Appendix.

**Note: 5.** Checklist for filling up discharge book IAFF(P)–53 by adjutant is attached as annexure III

**LEAVE ENCASHMENT:** Within three weeks from the date of receipt of Discharge Order at the Unit, the record of annual/sick leave encashment from 1983 onwards duly signed by the Adj, in respect of airmen/NCs(E) who are being discharged is to be forwarded to OIC RW (Cord Cell), AFRO as per the format given below on separate sheet/paper for each individual. While preparing this information, it is to be checked whether the individual has availed excess/irregular leave or not, number of days leave exceeding his entitlement in a particular year or not and if so, regularisation action is to be initiated by raising statement of case to obtain CFA sanction as per rule 188 FR Part-I

Ser No            Rank            Name & Initials            Trade            DO No & Date

Year	Unit	Total leave with period (From... To...)	availed (From... To...)	POR No	Leave Not availed	No of days encashed	POR No	promulgating accumulation of leave
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**D + 7 days** Unit shall maintain non effective file in respect of all airmen proceeding on superannuation/discharge from the unit for a period of three years. The file shall contain the following documents: -

XEROX/CTC of Unit Copy of Sheet Roll (UCSR).

- (a) NE POR – One Extra copy
- (b) Photocopy of Appx 'B' application-cum-sanction of leave encashment.
- (c) Requisite information vide Appx'A' to AFRO letter No RO/2901/1/1/Pen-Wel (Admin) dated 05 Feb 1999.
- (d) Copy of service pension claim form.
- (e) List of certificate issued to the airman
- (f) Photocopy of PPO and receipt of PPO from superannuating airmen.
- (g) All loose papers maintained in Dossier cover of UCSR are to be retained in NE file of PBOR and not (R) not to be forwarded to AFRO until specified for:

**Legends**

DOD	-	Date of Discharge
SOC	-	Statement of Case
NE POR	-	Non-Effective Personnel Occurrence Report
PPO	-	Pension Payment Order

**CHECKLIST FOR ADJUTANT– 1**

**1. IAFF (P) 61 Pension Claim Form**

- (a) Name of individual as per Discharge Order.
- (b) Date of Birth and date of enrolment as per Unit Copy of Sheet Roll.
- (c) Permanent and pension correspondence address is to be specified clearly and/or separately alongwith Contact No. if any.
- (d) Dates of promotion as per Section II of Sheet Roll.
- (e) Non-qualifying service as per Sheet Rolls (Section II & IV) & Section VI for AWL regularized as EOL.
  - (i) AWL Period.
  - (ii) Period under civil custody
  - (iii) Detention period awarded by court-martial.
  - (iv) Period of AWL regularized as Extra Ordinary Leave.

**2. IAFF (F) 28 (Revised) Descriptive Roll**

- (a) Pension Disbursing Office details on page-1.
- (b) Bio-data and service history of individual as per Sheet Rolls.
- (c) Self and Wife's specimen signature with thumb and finger impressions of left and right hand respectively on Page 3 and 6 to be attested by Commissioned Officer (Adjt).
- (d) Affixing of attested joint photographs on Page 6 in civil dress only.

**3. Annexure 'A' Family Particulars**

Details of family members of self as per Sheet Rolls and countersigned by Adjt/ Commanding Officer. It is also to be ensured that the Date of Birth of wife and children as per the Sheet Roll is mentioned against their age.

**4. Form 'A' – Nomination form for Family Pension**

- (a) Pension Disbursing Office details.
- (b) Name of Next-of-kin (wife) and Name of first nominee for Family Pension as per Unit Copy of Sheet Rolls (Section V).
- (c) Name of Second Nominee (Children) as per Unit copy of Sheet Rolls and below 25 years of age and unmarried.
- (d) Individual signature with two-witness signature.
- (e) Parents are to be made nominee only in absence of wife & children (AFO 133/98 refers).

**5. F-340 Commutation Form**

- (a) Particulars of individual filled correctly.
- (b) Pension Disbursing Office Details.
- (c) Commutation Form be addressed to Addl CDA (Air Force) New Delhi – 10.

**6. Medical Certificate.**

(a) To be in original and duplicate signed by SMO affixing rubber stamp with unit seal for Cat 'A4G1' personnel. Med Certificate is to be attached as per Air HQ letter No. Air HQ/26481/Med-7 dated 24 Jun 2002.

(b) Medical Certificate if subjected to approval by DGMS(Air) in respect of low Medical categories. To obtain final medical certificate with or without loading of age as early as possible for processing of Commutation claims. However, an extract of the same signed by SMO must be enclosed immediately with the pension claim forms.

**7. Attested Joint Photographs.**

The photographs are to be attested on front side by a Commissioned Officer and to be in Four copies in civil dress only.

**8. IAFF (F) 17 Unit Copy of Sheet Roll**

(a) Section II, III, IV & VI are to be updated.

(b) AWL entries whether regularised or not in Section IV.

(c) Promotion entries.

(d) Leave record till the date of Final Clearance in Section VI.

9. All signatures by Pensioner/Adj/ Medical Officer/CO should be full signature. Initials are not acceptable.

10. Originating of Signal intimating NE POR number and date of SOS immediately.

11. Individual must acquaint himself with the Hand Book on Pensionary benefits issued alongwith Discharge Order.



**CHECKLIST FOR ADJUTANTS – 2**

Adjutants will ensure that following points are correctly recorded in the UCSRs before submitting it to OIC RW (Coord) AFRO.

1. **SECTION – I**

(a) Spelling of name, date of birth, date of enrolment are correctly recorded. In case there is variation in DOB, then attested photocopy of matric certificate is to be attached.

2. **SECTION - II**

(a) Enrolment and attestation entries are made with POR No.

(b) AWL entry is supported with cessation (AWL period is to be either regularised as leave or punishment entry is made in Section VI/Section IV) with supporting POR No.

(c) Civil custody period are regularized.

(d) All classification/reclassification and promotion entries from AC to his present rank are available with POR No.

(e) All Extn of service entries are made with supporting POR Nos.

(f) Admission to hospital entry is supported with discharge from hospital entry.

3. **SECTION – III**

(a) Ensure that I/II/III rate of GCB Pay is awarded after 04/08/12 years of reckonable service taking into account the following.

(i) Detention/forfeiture of pay and allowances for AWL period is to be deducted while calculating reckonable service.

(ii) In case airman has more than one Red Ink entry or he has been convicted by Court Martial/Imprisoned/awarded detention on preceding two years from the date he was due for GCB Pay, then he will be now authorised for award of GCB pay, two years after date of award of such punishment.

(iii) Ensure any service rendered for which pay is not allowed under Rule 256 Pay & Allowances Regulations for the Air Force is not counted as reckonable service for award of GCB Pay.

(iv) Airmen who have completed two years of reckonable service as NCs(E) will be awarded 1<sup>st</sup> rate of GCB pay after completion of two years of reckonable service as an airman.

(b) Special Increment Pay, if any, to be recorded with POR No. In case there are POR entries in section III for birth of child after authorisation of SIP then, SIP to be cancelled and entries made by quoting POR No.

4. **SECTION – IV**. All punishment entries made correctly with corresponding entries in section II (AWL entries) wherever applicable.

5. **SECTION – V**. Marriage/Divorce/Birth of child/Next-of-kin entries/Date of Birth of wife are recorded correctly with supporting POR NO.

6. **SECTION – VI.** Proper record of complete 60 days of Annual Leave (availed and encashed)/Sick leave from 1983 onwards with POR No. is available for each year till date of discharge along with time bar sanction authority in case POR in case POR has not been promulgated within two years of occurrence. Special attention is to be paid to the following:

(a) The period after discharge from hospital/overstayal of leave on account of Sickness will first be debited to the Annual Leave or accumulated annual leave account and the excess, if any, will be regarded as Sick Leave.

(b) The period of hospitalisation from date of expiry of Sick Leave (in the case of airmen including WOs and MWOs and NCs (E) who are again admitted to MH during the currency of sick leave granted subsequent sick leave if any, will be debited to the annual leave or accumulated annual leave account and the excess if any, will be regarded as sick leave with full pay & allowances.

(c) The period of hospitalisation from the date of expiry of sick leave for check up and passing fit for duty will be treated as sick leave with full pay and allowances.

(d) Sick leave recommended on discharge from hospital will commence from the date following the date of discharge from hospital.

(e) In case of an individual who falls sick while on leave and is admitted to hospital and consequently overstays the leave sanctioned, the period of overstayal up to 60 days may be regularised by CO by treating first 30 days as sick leave and balance 30 days against the following year annual entitlement of the individual. All cases of overstayal beyond 60 days will be referred to Govt for orders.

(f) In case sick leave granted to an individual extends from one calendar year to next, the portion of such leave falling in the next year will be first debited to that year's annual leave entitlement of the individual.

Certified that UCSR has been correctly updated as per the checklist. I shall be solely accountable & responsible for any error, if detected subsequently at AFRO.

**Assistant Adjutant**

**COUNTER SIGNED BY ADJUTANT**

**CHECK LIST FOR FILLING UP DISCHARGE BOOK IAFF (P) – 53**

Sl No	Subject	Action From
1.	Particulars of Ex-airman	As per discharge order issued by AFRO
2.	Name of Wife	As per Section V of UCSR
3.	Personal Particulars	As per Discharge Order & Section I of UCSR
4.	Permanent Home Address	As promulgated in NE POR taken at the time of discharge.
5.	Date of Enrolment/Attestation	As per Section II of UCSR
6.	Total Service	As per Section II of UCSR
7.	Date of discharge and Authority	As per Discharge Order issued by AFRO
8.	Reason for Discharge	As per Discharge Order issued by AFRO
9.	Reserve Liability	As per Discharge Order issued by AFRO
10.	Terms of Engagement	As per Section I of UCSR
11.	Trade	As per Section II of UCSR
12.	Details of Sea/Air Service/War Service/Service Abroad	As per Record in UCSR along with POR
13.	Monthly pay and Allowances	As per Last Pay Drawn Certificate
14.	Medal/Decorations/Commendations	As per Section III of UCSR
15.	Character Assessed	As per Policies issued by Air HQ/AFRO.
16.	Education Qualification At the Time of joining the service	As per Section I of UCSR
17.	Educational qualification gained while in the service	As per Section III of UCSR
18.	Service test & Examinations Passed	As per Section III of UCSR
19.	Specialist/Service Courses & Foreign language Courses	As per Section III of UCSR
20.	Trade Proficiency	As per the policies issued by Air HQ/AFRO from time to time.
21.	Resettlement Courses	As per Section III of UCSR
22.	Details of Battle Wounds and Disability with percentage	As per Section III of UCSR & Medical Records
23.	Details Family Members	As per Section V of UCSR
24.	Sports & Extra Curricular Activities	As per records available in UCSR
25.	Occupational Records Prior to Joining Service	As per records available in UCSR
26.	Details of TA Services	As per records available in UCSR
27.	Priority for Re-employment	As per policies issued by DGR from time to time.
28.	Equation of service education qualification with civil education qualification	As per policies issued from time to time
29.	Proficiency in MT Driving	Only for concerned tradesman
30.	Emoluments Last Drawn	As per Last Pay Drawn Certificate
31.	Unit Last Served	As per records available in UCSR
32.	Details of Dependent	As per Para 1 (a) of Part I of Discharge Book
33.	Signature of Ex-airman	To be obtained before issuing the certificate
34.	Joint Photographs	To be attested by Unit Adjutant and Pasted in Discharge Book.

**Note:** UCSR = Unit Copy of Sheet Roll

**REQUISITE INFORMATION**

1. Date Of discharge
2. Date of Attestation
3. Promotion with date and POR
4. Extension of service with period and POR
5. GCB pay with date and POR
6. Sterilisation pays with date and POR, if any
7. Details of Hospitalisation period:

<u>Unit</u>	<u>Date of Admission/ Discharge from hospital</u>	<u>Place of admission/ Discharge</u>	<u>POR Number</u>

8. Details of AWL period and disposal thereof:

<u>Unit</u>	<u>AWL Period From</u>	<u>TO</u>	<u>POR Number</u>	<u>Disposal with POR Number</u>

9. Details of civil custody period, if any:

<u>Unit</u>	<u>Civil Custody Period From</u>	<u>TO</u>	<u>POR Number</u>

10. Record of Annual / Sick Leave availed / not availed / encashed as per format given below:

<u>Year</u>	<u>Unit</u>	<u>Period From</u>	<u>TO</u>	<u>No of days availed</u>	<u>POR No.</u>	<u>No of days encashed</u>	<u>POR No.</u>	<u>No of days not availed</u>

**Signature of Adjutant**

**THINK IT OVER**

**“AN ACRE OF PERFORMANCE IS WORTH THE WHOLE WORLD OF PROMISE”.**

**LIST OF DOCUMENTS TO BE DESPATCHED TO AFRO**

**(IAFF (P) 28-A (REVISED)**

(Govt of India, Min of Def letter No A/47266/AG/PS4/(b)/2095/B/D(Pen/Sers) dated 03 Aug 84)

**PENSION DISBURSING OFFICE**

A/C No. 0119006086

Name *STATE BANK OF INDIA* Treasury Serial ...**N/A** H/O.....**N/A**

BRANCH- *MAIN BRANCH*

DIST- *PRATAPGARH (UP)*

**DESCRIPTIVE ROLL OF**

Name *JAIBIND KUMAR SHUKLA* ... Rank... SGT Unit *AFRO*

**INSTRUCTIONS**

**THUMB AND FINGER IMPRESSIONS AND SPECIMEN SIGNATURES**

1. A small quantity of printers ink should be well rubbed on a tip slip until a very thin even layer is formed. The balls of the thumb and all the fingers of the left hand of the individual/after being wiped, should be laid on the inked slab and rolled from side to side (not rubbed) until sufficiently inked (this can be learned from experience) and then lightly and carefully rolled on the paper on which the print is to be taken in such a way that the pattern of the whole of the ball of the thumb and fingers from side to side is clearly impressed on it. It must be specially borne in mind that any side movement either at the time of applying or removing the thumb will cause a smudge and spoil the impressions.

2. The impression on page 3 is required for permanent record in the audit office that on page 6 is detached and retained by the pension disbursing office. In the case of family pensioners not with the unit the impression on the duplicate copy of IAFA-366 or A-368 will be removed therefrom and pasted on the space provided on pages 3 and 6 of this form.

3. However, the case of pensioners in respect of whom joint photographs in civil dress with the wife have been furnished and who are literate enough to sign their name in English, Hindi or any official regional language, instead of taking their thumb and finger impression as means of identifications they will be required to affix three specimen signatures on pages 3 and 6 of the Descriptive Roll.

**DESCRIPTIVE ROLL**

Class No.....

Serial No.....

Payee Station.....

Channel of payment.....

Date from which pensioned	Name, Rank and Last unit	Father's Name	Service No.	Length of service previous to be Pensioned	
				Unit Rank	Yrs/Months
01 MAY 2010	JAIBIND KUMAR SHUKLA AFRO	LATE SHRI KP SHUKLA	736358F	ATI AF (AC U/T)	04.04.90 to 20.05.91
				9 WG, AF (AC/CPL)	21.05.91 to 12.10.95
				5 AF HOSP (CPL)	13.10.95 to 08.10.99
				ETI, AF (CPL)	09.10.99 to 12.10.03
				AFRO (CPL/SGT)	13.10.03 to 30.04.2010
Height/age When pensioned	Colour of hair Of eyes	Complexion	Face	Figure	Country or Family residence
174 cm	Black				
38 year 04 months	Black	Fair	Round	Healthy	India

Disability & other Pension granted Temporarily for a Fixed period	City or Village	Parganah or Tehsil	Zila	State	Religion
N/A	Jagdishpur	Raniganj	Pratapgarh	UP	Hindu

Class/Tribe	For what period granted	Date on which pension is to cease
N/A	Life Long	On death
Prominent service and Character whilst serving	Indelible Marks	Remarks on examination by Pension Payee Officer
Exemplary	One Black Mole on upper chest	

Impression of balls or thumb and all fingers of the left hand in the case of individual/Right hand in the case of the wife of the individual to be repeated also on page 6.

**Left hand Thumb & Finger impression**  
(Individual)

**Right Hand Thumb & finger impression**  
(Wife)

Three specimen signatures of the individual and his wife duly attested:

**Individual**

**His wife**

(1) Sd/xxx  
(2) Sd/xxx  
(3) S/xxx

(1) Sd/xxx  
(2) Sd/xxx  
(3) Sd/xxx

Sd/xxx  
(R Rajkumar)  
Flt Lt  
Adjutant  
AFRO

The period of service in each unit and rank in which such service was performed must be separately entered.

**List attached**

**N.B.** In the event of an extension, the period of extension with number and date of the pension circular/Pension Payment –Order should be noted in red ink. The same procedure should be followed in the case of pension being made permanent.

\*\*In the column “Prominent Service” the number of battles sieges which the pensioner may have served and the occasions on which medals or other rewards were received are entered.

@% In the column “Indelible Marks”, the sign and situation of any wounds, scars, moles or other peculiarities tending to the identification of the pensioner are to be entered by medical officer of regiment in their own handwriting in plain intelligible terms after careful examination of the individual.

Next-of-Kin or other person to whom Arrears of pension are to be paid at the Demise of pensioner	Relationship	Signature of Pensioner
Asha Shukla	Wife	Sd/xxx

Signatures of two guarantors to whom he is known as the individual of the pension list.

**Signature of Guaranters**

1..... 2.....  
Address :..... Address.....  
.....  
Name of pension disbursing office (in case the Guarantors are military pensioners and their Treasury/Head Office)  
Name..... Serial  
No.....

**Full Signature and Designation of Pension Payee Officer**

Description of Pension	Rate to be entered in figures and words	Authority
Pension per mensem	Rs.	
Relief per mensem		
Personal allowances per mensem		
Personal allowances A.D.C. Per mensem		

**Gallantry Awards**

= + Certified that .....above named have been paid in my presence an advance of Rupees .....on this day.....of .....20....

Station..... Commanding.....

Date .....

Recorded in..... Register page No.....

Pension Payee Officer.....

\* In the column "Next-of-kin" the name, ages and occupation of the pensioner's son or nearest male relations are invariably to be noted also the names of person to whom he wishes all arrears due to him at the time of his death to be paid. Indian Military pensioners are permitted to nominate alternative heirs in order of priority of purposes of payment of any arrears of pension due to the state of the deceased pensioners. Heirs so nominated will be serially numbered in order of priority of right to the payment of ea arrears and will have successive right to the payment of the pensioners of the time of the first payment after the 1<sup>st</sup> January in each year.

% State the controller's pension circular/pension payment orders in which the continuance of personal allowance on transfer to the pension list notified.

X State the controller's pension circular/pension payment orders in which the continuance of annuity on transfer to the pension list notified.

X Expunge where no advance is given.



**PARTICULARS OF TRANSFER**

Pensioner transferred From To	Authority for transfer	Monthly Rate of Pension	Rate of payment	To what Date	Amount Paid	Signature of Payee Officer

Impression should be taken in as small a compass as possible before consistent with clearance----see instructions page 1.

Thumb and finger impression/specimen signature of late taken before (Name of the, Officer. Designation of Officer and date).

Left Hand Thumb & Finger impression  
(Self)

Right Hand Thumb & Finger impression  
(Wife)

**Individual**

**His wife**

1 Sd/xxx

1 Sd/xxx

2 Sd/xxx

2 Sd/xxx

3. Sd/xxx

3 Sd/xxx

**Sd/xxx**  
(R Rajkumar)  
Flt Lt  
Adjutant  
AFRO

Latest passport size joint photograph of the individual with his wife in civil dress duly attached.  
Should be pasted here

**Joint Photograph**  
(Duly attested by the Unit Adjt)  
(By Commissioned Officer)

**THE COMMANDING OFFICER**

- (a) Unit to be entered **Air Force Record Office**
- (b) Address to be entered **Pen & Wel Wg (SP), Subroto Park New Delhi-10**
- (c) Pensioner's Service/Number to be entered **736358-F**
- (d) Pensioner's Rank **SGT**
- (e) Pensioner's name **JAIBIND KUMAR SHUKLA**
- (f) Pension SI No., i.e. the No. given to his pension

Certified by Dy. CDA (AF)

*Sd/xxx  
(VK Chopra)  
Air Cmde  
Air Officer Commanding  
Air Force Record Office*

---

NOTE : \_ All the above to be filled in before the Descriptive Roll is sent to the Pension Disbursing Officer.

I acknowledge the receipt of IAFF (P) 28 in respect of the pensioner.

Station .....

Signature.....

Date .....

Designation of pension payee Officer..

**ROLL OF AN AIRMAN TO BE DISCHARGED/TRANSFERRED  
TO PENSION**

<b><u>Sl. No.</u></b>	<b><u>Information Required</u></b>	<b><u>Answers</u></b>
1.	Service Number	736358-F
2.	Rank & full name : (Name should be hand written)	SGT JAIBIND KUMAR SHUKLA
3.	Trade and Group :	CLK GD (Y)
4.	Date of birth/age on enrolment :	20.12.1971 / 18 Yrs, 03 Months & 16 days.
5.	Date of enrolment :	04.04.1990
6.	Height :	174 Cms
7.	<b>Permanent home address with PIN number (in block letters)</b>	<b><u>PPO is to be despatched to</u></b> C/O SHRI BN SHARMA H NO. 63/1252, VRI NDAVAN A.V. COLONY LUCKNOW (UP) Pin: 240 112 Tele / Mob No / E - Mail / ID No.
	(a) Village / H. No/Name: JAGDISHPUR	
	(b) Post Office / Street:: BIRAPUR	
	(c) Street / PB No:	
	(d) Tehsil: RANIGANJ	
	(e) District: PRATAPGARH (UP) Pin: 230 302	
	<b>Notes</b> : 1. If no village can be given, the house number, street and town is to be given. 2. If PPO is to be despatched on different address, specify separately.	
8.	Identification marks (Personal appearance):	A black mole on left cheek
9.	Dates of several promotions	Sub Cpl - 04.04.95, A/Sgt/Paid - 01.11.03, Sub Sgt - 07.11.07
10	(a) Date of discharge (the date will invariably be one preceding the individual's transfer to the pension establishment, i.e., the date up to and for which he has been paid):	<b>30 Apr 2010</b>
	(b) Total service to date of discharge (in years and days only) :	20 Years 27 days
	(c) Total service to date on which medical board proceedings are countersigned by D.M.S. (Air), in case of invalidment. :	N/A
11	(a) Period(s) not counting for pension. (See para, 207-A.3,4 & 8 or P & A Regs. (1942 Edition). (AWL/Detention by Court Martial/Civil custody period):	N/A
	(b) Any previous service towards pension or gratuity, as verified by the Dy. C.D.A. (AF), New Delhi (quoting authority) :	N/A.
12.	Total length of qualifying service for pension/gratuity :	20 yrs 27 days

13. Character : *Exemplary*
14. Prominent occurrences during service. (All records of field service from the date of Commencement to the date of termination should be entered here). *N/A*
15. Name of pension disbursing office from State Bank of India, Branch – *MAIN BRANCH* which desirous of drawing pension : *Dist – Pratapgarh (UP), A/C 01190006086*

**Note:** The bank should be authorised to disburse Defence Pension (check with authorised list of banks, available with O/Rooms of all AF Units). State the name of Head/District Treasury. If Payment is required from Sub-Treasury state the name in bracket

16. Amount of pension earned/recommended. : *Full*

**Note :** The sanction of competent authority is necessary for full pension to airman invalidated on account of disorders (including insanity) brought on by indulgence in drugs or drink. (The statement of competent authority as regards the grant of full pension should be given in the form of a certificate).

17. Other allowances to which entitled when pensioned such as :
- | <i>Sl No</i> | <i>Information's required</i>                 | <i>Answers</i>      |
|--------------|---|---------------------|
| (a)          | Param Vir Chakra/Maha Vir Chakra/Vir Chakra : | <i>N/A</i>          |
| (b)          | Ashoka Chakra :                               | <i>N/A</i>          |
| (c)          | Jangi Inam :                                  | <i>N/A</i>          |
| (d)          | Meritorious Service Medal :                   | <i>N/A</i>          |
| (e)          | Long Service Medal :                          | <i>09 Years LSM</i> |
| (f)          |   |                     |
| (g)          |   |                     |
18. Cause and clause of discharge: *On fulfilling the terms and conditions of his enrolment on RE Expiry AF Rules 1969, Chapter – III, Rule 15 Clause 2 (b)*
19. Reasons, if recommended for reductions of pension (Disability Pension) : *NA*
20. Whether he was granted any pension previously, if so the No. and date of the pension payment order with Descriptive Roll Serial No. notifying pension, should be quoted.: *N/A*
21. Name, relationship to the pensioner and full address of the person to whom arrears of pension are to be paid on the demise of the pensioner. : *Mrs ASHA SHUKLA (wife) VILL-JAGDISHPUR PO-BIRAPUR DISTT-PRATAPGARH (UP) UTTAR PRADESH*
22. Three specimen signatures of the pensioner:

- (1) Sd/xxx
- (2) Sd/xxx
- (3) Sd/xxx

Sd/xxx  
 (R Rajkumar)  
 Flt Lt  
 Adjutant  
 AFRO

Date :

**\*By a commissioned officer.**

I certify that the particulars given above are correct as far as can be ascertained from the records of the individuals held at this station/unit. I recommend that full/half/3/4<sup>th</sup> pension (applicable to Disability Pension only) admissible under rule may be sanctioned. (See A.F.I. 5/S/56.)

Station : AFRO, New Delhi

Sd/xxx  
 (VK Chopra)  
 Air Cmde  
 Air Officer Commanding  
 Air Force Record Office

Date :

**\*Delete whichever not necessary**

Certified that the above-named individual has held the following Substantive Rank, Trade and Group, during his last two years of service qualifying for pension.

**Recommended full/half/3/4<sup>th</sup> Pension  
 (Applicable to Disability Pension)**

Emoluments for the purpose of DCRG :-

- 1. Basic Pay (Last drawn) .....Rs.....p.m.
- 2. Dearness Allowance(DA).....Rs.....p.m.
- 3. Deduction, if any, applicable.....Rs.....p.m.
- 4. D.C.R.G. admissible.....Rs.....Paisa

OIC Pension

OIC NEAS.

AFRO

AFCAO

**FOR USE IN DEFENCE ACCOUNTS DEPARTMENT**

Admitted

Ordinary/Special

Rs.....(Rupees.....only) p.m. w.e.f..... For life.

(Vide P.P.O. No.....)

Assistant

Superintendent

A. A. O. (P)

**Joint Photograph**  
(Duly attested by Unit Adjt)  
(Commissioned Officer)

**DETAILS OF FAMILY**

Name **JAIBIND KUMAR SHUKLA** Ser NO. **736358-F**

Rank **SGT** Date of retirement/discharge **30 APR 2010**

Details of the members of my family as on *07 Aug 2009*

SI NO	Name of the Member Of the family	Age/Date of Birth	Relationship
01.	<b>MRS ASHA SHUKLA</b>	<b>35 Yrs / 24-5-1974</b>	<b>WIFE</b>
02	<b>VIPIN SHUKLA</b>	<b>12 Yrs / 12-3-1997</b>	<b>SON</b>
03.	<b>SHWETA</b>	<b>10 Yrs / 22.07.1999</b>	<b>DAUGHTER</b>

I hereby undertake to keep, the above particulars up-date by notifying to Air Force Record Office for any addition or alteration.

Date :

*Sd/xxx*  
Signature of individual

**COUNTERSIGNED BY**

Unit : **AFRO**

**Sd/xxx**  
**(VK Chopra)**  
Air Cmde  
Air Officer Commanding  
Air Force Record Office

Date :

“Certified and found correct with reference to entries recorded in kindred roll portion of sheet roll”

Date :

A F R O.

**FORM-A**

Pension disbursing authority/Head of office (name of Bank/Try/Post Office/Account Officer, (Account No) A/c No-01190006086, STATE BANK OF INDIA  
BRANCH- MAIN BRANCH, DIST- PRATAPGARH (UP)

I, **736358-F SGT JAIBIND KUMAR SHUKLA CLK GD** hereby nominate the person named below under (Min of Def) letter No.4(2)/84/868/B/D(Pens/Sers) dated 01 May 84.

Name & Address of the Nominee	Relationship	Date of birth	If the nominee is minor name & address of person who may receive the said pension during the nominee's Minority.
-------------------------------	--------------	---------------	--

(1)	(2)	(3)	(4)
<b>Mrs. ASHA SHUKLA</b> <b>VILL-JAGDISHPUR</b> <b>PO-BIRAPUR</b> <b>PRATAPGARH-230 302 (UP)</b>	<b>WIFE</b>	<b>24-5-1974</b>	<b>N/A</b>

Name & Address of other nominee in case the nominee under Col 1 above predeceases the pensioner.	Relationship with pensioner	Date of birth (If the other nominee is minor)	Name & Add of person who may receive pension during the other nominee's minority.
--	-----------------------------	---	---

(5)	(6)	(7)	(8)
<b>VIPIN SHUKLA</b> <b>VILL-JAGDISHPUR</b> <b>PO-BIRAPUR</b> <b>DISTT-PRATAPGARH (UP)</b> <b>PIN- 230 30</b>	<b>SON</b>	<b>12-3-1997</b>	<b>MR. SN SHUKLA</b> <b>VILL-JAGDISHPUR</b> <b>PO-BIRAPUR</b> <b>DISTT-PRATAPGARH (UP)</b> <b>PIN- 230 302</b>

Contingency on happening of which nomination shall become invalid  
(9)

**DEATH/DIVORCE/INSANITY/REMARriage**

Place : AFRO New Delhi  
Witness : Sd/xxx  
Address : *Sgt Ishwar Singh P&WW(SP), AFRO, ND-10*

Sd/xxx

(Sig & Name of Pensioner)

Signature of pension disbursing authority/Head office/(Acknowledgement to be sent by the pension disbursing authority/Head of Office.

Certified that application /Nomination has been received from *Jaibind Kumar Shukla* whose address permanent is *Vill-Jagdishpur PO-Birapur Distt-Pratapgarh (UP) PIN-230 302*

Signature of Pension Disbursing authority/Bank/Try/Accts Offr/Head of office.

Place

Signature :

Date :

Address :

to Min of Def Letter No 5621/AT-P(PC)/653/A/D(Pen/Ser)  
Dated 06 May 1983

**FORM OF APPLICATION FOR COMMUTATION OF A PORTION  
OF SERVICE PENSION**

To,  
Dy CDA(Air Force)  
New Delhi – 110 010

**COMMUTATION OF A PORTION OF PENSION**

Sir,

I desire to commute a portion of my pension vide particulars given below : -

Service Number: **736358-F**  
Rank : **SGT**  
Name: **JAIBIND KUMAR SHUKLA**  
Date of Birth: **20 DEC 1971**  
Residential Address: **C/O SHRI BN SHARMA  
H NO. 63/1252, VRINDAVAN  
A.V. COLONY  
LUCKNOW (UP) Pin: 240 112**

Amount/percentage of pension: **50%**  
Desired to be commuted

Name of the Pension : **A/c -01190006086  
STATE BANK OF INDIA  
BRANCH- MAIN BRANCH  
DIST- PRATAPGARH (UP)**

Disbursing Office

Unit: **AFRO**

Date: **07 Aug 2009**

*Sd/xxx*

Signature of the individual



## DECLARATION

Whereas the Deputy Controller of Defence Accounts (Air Force) New Delhi has consented, provisionally, to advance me pension @ Rs...As applicable... per month, DCRG @ Rs as applicable, relief @ Rs...As applicable..... and a sum of Rs...As applicable..... being the commuted value of **50%** of the anticipatory pension mentioned above, in anticipation of the completion of the enquiry/documents necessary to determine my pension entitlement viz pension relief, death cum retirement gratuity and a part of pension that may be commuted. I hereby acknowledge that, in accepting the advance, I fully understand that the same is subject to revision on the completion of necessary enquiries/documents, and I promise to raise no objection to such revision on the ground that the provisional payment now made to me exceed the aware to which I may be eventually found entitled. I further promise to repay other in cash or by reduction from subsequent payments of pension any amount advanced to me in excess of that which I may be eventually found entitled.

Signature : *Sd/xxx*  
Ser No. **736358-F**  
Rank : **SGT**  
Name : **JAIBIND KUMAR SHUKLA**  
**A/c -01190006086**  
**STATE BANK OF INDIA**  
**BRANCH- MAIN BRANCH**  
**DIST- PRATAPGARH (UP)**

Unit: **AFRO**  
Date : 07 Aug 2009

### COUNTERSIGNED BY UNIT / STATION ADJT (COMMISSIONED OFFICER)

Unit: **AFRO**

Date :

*Sd/xxx*  
(*R Rajkumar*)  
Flt Lt  
Adjutant  
AFRO

To,

The Branch Manager  
\_\_\_\_\_ (Bank)  
\_\_\_\_\_ (Branch and Address)

**Sub:- Payment of pension under PPO No..... through your bank branch.**

Dear Sir/Madam,

I wish to receive my pension under PPO No. .... by getting it credited to the saving/current bank account no..... which is operated jointly in your branch by me and my spouse, Mr./Mrs..... In whose favour an authorization for family pension exists in the Pension Payment Order (PPO).

I have read and understood the contents of the Government of India, Ministry of Finance, Department of Expenditure, and Central Pension Accounting Office OM No. CPAO/Tech/Amendments/Sch Book/2005-06/69 dated 09.06.2005 which contains the following terms and conditions. Once pension has been credited to a pensioner's bank account, liability of the government / bank ceases. No further liability arises, even if the spouse wrongly draws the amount.

- (a) As pension is payable only during the life of a pensioner, his/her death shall be intimated to the bank at the earliest and in any case within one month of the demise, so that the bank does not continue crediting monthly pension to the joint account with the spouse, after the death of the pensioner. If, however, any amount has been wrongly credited to the joint account, it shall be recoverable from the joint account and / or any other account held by the pensioner / spouse either individually or jointly. The legal heirs, successors, executors etc.,
- (b) Payment of Arrears of Pensions (nomination) Rules, 1983 would continue to be applicable to the joint account with pensioner's spouse. Thus, if there is an 'accepted nomination' in accordance with Rule 5 and 6 of these Rules, arrears mentioned in the Rules will be payable to the nominee.

I accept the above terms and conditions. My spouse too, in token of having accepted those terms and conditions, has put his/her signature below.

- 1. Signaute of Pensioner
- 2. Signature of Spouse

**CERTIFICATE FOR COMMUTATION OF PENSION**

(Appendix "H" to IAP – 4303/87 refers Para 4.4.66)

I have carefully examined Ser No **736358-F** Rank **SGT** Name **JAIBIND KUMAR SHUKLA** Trade **Cik GD** Unit **AFRO** and I am of the opinion that the individual is in good bodily health and has the prospect and average duration of life. Commutation of pension in his case is therefore recommended for acceptance without any loading of age. His date of discharge/release is **30 Apr 2010**.

Fit for release in Medical category '**A4G1**'.

SSQ/  
Medical  
Stamp

Place : WAC (U), AF New Delhi

Date:

Signature of Medical Officer

(with rubber stamp)

**For Low Medical Category only**

**CERTIFICATE FOR COMMUTATION OF PENSION**

The Medical Board having carefully examined Service No .....Rank.... Name.....Trade.....Unit.....are of the opinion that

The individual is suffering from .....but is otherwise in good bodily health and has the prospect of an average duration of life. Commutation of pension in his case is therefore, recommended for acceptance.

**Or**

The individual is suffering from .....and as the consequence thereof he is not in good ;bodily health and does not have the prospect of an average duration of life. The medical Board therefore does not recommended acceptance of commutation of pension in his case.

**Or**

The individual is suffering from .....the Medical Board is of the opinion that he is not in good bodily health and does not have the prospect of an average duration of life. The Medical Board however, recommended compliance with his application to be allowed to capitalize a portion of his pension by rank , on his age for the purpose of commutation ie, his age next birth day should be .....year (s) more than his actual age.

SMC/ Medical  
Stamp

Signature of Individual

Date :

Signature of President

(with rubber stamp)

Date :

**Note:** Part VI (page 8) of AFMSF-16 is also to be filled and attached with this certificate.

**POSTAL ADDRESS OF ECHS MAIN OFFICE AND REGIONAL OFFICES**

**Address of Main Office**

ECHS Central Organisation  
Adjutant General's Branch  
Army Headquarters, Maude Lines  
Delhi Cantt – 110 010  
Telephone : 011 – 25684846  
ASCON : 6830

**Address of the Regional Offices**

1. Regional Director (ECHS) Regional Centre, Jammu C/O Stn HQ Jammu	2. Regional Director (ECHS) Regional Centre, Delhi C/O Delhi Area , Delhi Cantt – 10
3. Regional Director (ECHS) Regional Centre, Chandimandir Chandimandir	4. Regional Director (ECHS) Regional Centre, Jabalpur Jabalpur
5. Regional Director (ECHS) Regional Centre, Jaipur C/O HQ 61 (I) Sub Area	6. Regional Director (ECHS) Regional Centre, Pune C/O HQ Pune Sub Area
7. Regional Director (ECHS) Regional Centre, Lucknow C/O HQ Lucknow Sub Area	8. Regional Director (ECHS) Regional Centre, Chennai C/O HQ ATNK & K Area, Chennai
9. Regional Director (ECHS) Regional Centre, Kolkata C/O Eastern Command , Kolkata	10. Regional Director (ECHS) Regional HQs ECHS (Kochi) C/O HQ Southern Naval Command Naval Base, Kochi
11. Regional Director (ECHS) Regional Centre, Patna C/O Stn HQ Patna	12. Regional Director (ECHS) Regional Centre, Hyderabad C/O AF Stn Begumpet, Hyderabad
13. Regional Director (ECHS) Regional Centre, Guwahati C/O HQ 51 Sub area C/O 99 APO	

**THINK IT OVER**

***“ LIFE ON EARTH IS SO SHORT; WE SHOULD MAKE  
THE MOST OF IT BY KEEPING OURSELVES WELL.”***

**APPENDIX 'J'**  
**(Refers to para 3 of Chapter IX)**

**LIST POLYCLINICS AT MILITARY /NON MILITARY STATIONS**

SINo	Regional Centre	Polyclinics	Mil/ Non Mil	Station HQ Location	Name of Mil Hosp	Telephone	Address
1	2	3	4	5	6	7	8
1	Chandimandir	Chandigarh	Non Mil	Chandimandir	CH (WC), Chandimandir	0172-2747702	ECHS Polyclinic Chandigarh, House No. 681, Sectoe 11 B Chandigarh (UT) PIN-160017
2	Chandimandir	Chandimandir	Mil	Chandimandir	CH (WC), Chandimandir	0172-2554133	ECHS Polyclinic Chandimandir, 409, Sec 12, Panchkula, Chandimandir-134 107
3	Chandimandir	Bikaner	Mil	Bikaner	107 MH Bikaner	01633-241116, 2068 (MIL)	ECHS Polyclinic Bikaner, 187 Mil Hosp, Bikaner
4	Chandimandir	Hamirpur	Non Mil	Jalandhar	MH Jalandhar	01972-223482	ECHS Polyclinic Hamirpur, Near Bhot Chowk, Ward No.9, Hamirpur, HP-177 001
5	Chandimandir	Bilaspur	Non Mil	Jalandhar	MH Jalandhar	01978-221707	ECHS Polyclinic Bilaspur, Sainik Rest House, Bilaspur-174001
6	Chandimandir	Una	Non Mil	Jalandhar	MH Jalandhar	01975-228210	ECHS Polyclinic Una, 77 Prem Nagar Distt- Una (HP)-174303
7	Chandimandir	Solan	Mil	Kasauli	MH Kasauli	01792-221917	ECHS Polyclinic Solan, C/o 4 KUMAON
8	Chandimandir	Shimla	Mil	Shimla	MH Shimla	0177-2838705, 28387040	ECHS Polyclinic Shimla, Military Hospital, Shimla , Jutogh Cantt (HP) 171008
9	Chandimandir	Amritsar	Mil	Amritsar	MH Amritsar	0183-2560422 (MIL) 2662	ECHS Polyclinic Amritsar, C/o Stn HQ Amritsar
10	Chandimandir	Bhatinda	Mil	Bhatinda	174 MH Bhatinda	0164-2291147, 3597, 3517	ECHS Polyclinic Bhatinda, MH Complex Bathinda , C/O 174 Military Hospital
11	Chandimandir	Mansa	Non Mil	Bathinda	174 MH Bathinda		
12	Chandimandir	Ropar	Non Mil	Chandimandir	CH (WC) Chandimandir	01881-223661	ECHS Polyclinic Ropar ,Sainik Rest House Deputy Director Welfare Officer, Ropar(PB)-140 001
13	Chandimandir	Fatehgarh Sahib	Non Mil	Chandimandir	CH (WC)	01763-222377	ECHS Polyclinic Fatehgarh Sahib, 48 Basdrigham Bldg, Bahman Majra, Bassi Road Serhind, GT Road Serhind
14	Chandimandir	Muktasar	Non Mil	Faridkot	173 MH Faridkot	01633-241116	ECHS Polyclinic Muktasar Zila Sainik Welfare Board Office, Bhatinda Muktasar Road, Muktasar(PB)-152 026, Muktasar
15	Chandimandir	Faridkot	Mil	Faridkot	173 MH	01639-255541	ECHS Polyclinic Faridkot, C/o Stn HQ Faridkot

1	2	3	4	5	6	7	8
16	Chandimandir	<b>Firozpur</b>	Mil	<b>Ferozepur</b>	159 GH	0163-287543	ECHS Polyclinic Ferozepur, C/o Stn 159 GH, Ferozepur (PB) -152001
17	Chandimandir	<b>Moga</b>	Mil	<b>Ferozepur</b>	159 GH	01636-237004, 9876135847 (Mobile)	ECHS Polyclinic Moga, C/O 196 FD Regt, Moga
18	Chandimandir	<b>Gurdaspur</b>	Mil	<b>Gurdaspur</b>	172 MH Gurdaspur	01874-247194	ECHS Polyclinic Gurdaspur, C/O Deputy Director Sainik Welfare office, Gurdaspur, PB-143 521
19	Chandimandir	<b>Hoshiarpur</b>	Non Mil	<b>Jalandhar</b>	MH Jalandhar	01882-247250	ECHS Plyclinic Hoshiarpur, 36-R Model Town Near Main Bus Stand, Distt Hoshiarpur, Punjab
20	Chandimandir	<b>Jalandhar</b>	Mil	<b>Jalandhar</b>	MH Jalandhar	0181-2260179	ECHS Polyclinic Jalandhar, C/o Mil Hosp Jalandhar Cantt
21	Chandimandir	<b>Kapurthala</b>	Mil	<b>Kapurthala</b>	MH Jalandhar	01822-220052, 2058(Army)	ECHS Polyclinic Kapurthala, C/o Stn HQ Kapurthala, House No. MES/T-260, Punjab- 144601
22	Chandimandir	<b>Ludhiana</b>	Non Mil	<b>Ludhiana</b>	MH Jalandhar	0161-2400694	ECHS Polyclinic Ludhiana, Near Jagraon Bridge, Ludhiana, Ludhiana, Punjab-141001
23	Chandimandir	<b>Sangrur</b>	Mil	<b>Patiala</b>	MH Patiala	01672-221225 2031(Mil)	ECHS Polyclinic Sangrur, C/o Stn HQ Sangrur
24	Chandimandir	<b>Patiala</b>	Mil	<b>Patiala</b>	MH Patiala	0175-2303466	ECHS Polyclinic Patiala, , New Mil Hosp, Sangrur Road, Patiala (PB)
25	Chandimandir	<b>Sriganganagar</b>	Mil	<b>Sriganganagar</b>	176 MH	0154-2440524	ECHS Polyclinic Sriganganagar, 3-J-18 Jawahar Nagar, Sri Ganganagar, Raj -335001
26	Chennai	<b>Vellore</b>	Non Mil	<b>Chennai</b>	MH Chennai	0416-2211650	ECHS Polyclinic Vellore, New No. 27, Old No. 05, Balaji Road, Krishna Nagar, Vellore - 632001
27	Chennai	<b>Chennai</b>	Mil	<b>Chennai</b>	MH Chennai	044-22314274	ECHS Polyclinic Chennai, Military Hospital, St thomas Mount, Chennai - 16
28	Chennai	<b>Avadi (Tiruvallur)</b>	Mil	<b>Chennai</b>	MH Avadi	044-26840270	ECHS Polyclinic Avadi, No. 4, 6th Cross defence Enclave MES Link Road Mukta Pudupet, Avadi, Chennai- 600055
29	Chennai	Kanchipuram	Non Mil	<b>Chennai</b>	MH Chennai		
30	Chennai	Cuddalore	Non Mil	<b>Chennai</b>	MH Chennai		
31	Chennai	Villupuram	Non Mil	<b>Chennai</b>	MH Chennai		
32	Chennai	<b>Coimbatore</b>	Mil	<b>AFAC</b>	6 AFH	0422-220233	ECHS Polyclinic Combatore, 6 Air Force Hospital, C/o AFAC, Red Fields, Coimbatore
33	Chennai	Krishnagiri	Non Mil	<b>Coimbatore</b>	MH Wellington		
34	Chennai	Salem	Non Mil	<b>Coimbatore</b>	MH Wellington		

1	2	3	4	5	6	7	8
35	Chennai	<b>Port Blair</b>	Mil	<b>INS Jarawa, Jarawa</b>	INHS Dhanvantari		
36	Chennai	<b>Srivilliputtur (Virudhnagar)</b>	Non Mil	<b>Tiruchirapalli</b>	MH Chennai	04562-280988	ECHS Polyclinic Virudhunagar, Building No. 9 & 10 CC Road Virudhunagar
37	Chennai	Dindigul	Non Mil	<b>Tiruchirapalli</b>	MH Chennai		
38	Chennai	<b>Madurai</b>	Non Mil	<b>Tiruchirapalli</b>	MH Chennai	0452-2682650	ECHS Polyclinic Madurai, Plot No. 4, 6th Cross Def Enclave, MES Link Road Mukta Pudupet, Avadi, Chennai - 55
39	Chennai	Tiruchi	Non Mil	<b>Tiruchirapalli</b>	MH Chennai		
40	Chennai	Nagapattinam	Non Mil	<b>Tiruchirapalli</b>	MH Chennai		
41	Chennai	Tanjavur	Non Mil	<b>Tiruchirapalli</b>	MH Chennai		
42	Chennai	Theni	Non Mil	<b>Tiruchirapalli</b>	MH Chennai		
43	Chennai	<b>Tirunelveli</b>	Non Mil	<b>Trivandrum</b>	MH Trivandrum	0462-2584864	ECHS Polyclinic Tirunelveli, Door No. 194/2, Jawan Bhawan, 1st Floor, Palayamkoti, Trichendur Road, Tirunelveli- 627 002
44	Chennai	Nagarcoil	Non Mil	<b>Trivandrum</b>	MH Trivandrum		
45	Chennai	Tuticorin	Non Mil	<b>Trivandrum</b>	MH Trivandrum		
46	Chennai	<b>Wellington</b>	Mil	<b>Wellington</b>	MH Wellington	0423-2200801	ECHS Polyclinic Wellington, Nilgiris District, Tamilnadu-643231
47	Chennai	<b>Thiruvannamalai</b>	Non Mil	<b>Chennai</b>	MH Chennai	04175-221163	ECHS Polyclinic Thiruvannamalai, New No. 53 (old No. 15) 10 th Street Gandhinagar, Rhiruvannamalai
48	Guwahati	<b>Jorhat</b>	Mil	<b>AF Stn Jorhat</b>	5 AFH Jorhat		ECHS Polyclinic Jorhat, 179/04 ROI Complex, Lichubari, Jorhat, 5 AFHosp C/O 10 Wing AF, C/O 99 APO
49	Guwahati	<b>Agartala</b>	Mil	<b>Agartala</b>	182 MH Agartala	0381-2397530, 2296(Mil)	ECHS Polyclinic Agartala, C/O Stn HQ Agartala (Tripura)
50	Guwahati	<b>Aizwal</b>	Non Mil	<b>Aizwal</b>	160 Masimpur	0389-2351143	ECHS Polyclinic Aizwal C/O 457 Fd Amb, Aizwal
51	Guwahati	<b>Kamrup (Guwahati)</b>	Mil	<b>Narangi</b>	151 BH Guwahati	0361-2306644, 2596429	ECHS Polyclinic Guwahati, C/O 151 Base Hosp, 99 APO, Guwahati
52	Guwahati	Dimapur	Mil	<b>Dimapur</b>	165 MH Dimapur		
53	Guwahati	<b>Imphal</b>	Non Mil	<b>Liemakhong</b>	183 MH Liemakhong	0385-2429406, 2429409, 2429405	ECHS Polyclinic Liemakhong C/o Stn HQ Liemakhong (Manipur)

1	2	3	4	5	6	7	8
54	Guwahati	<b>Masimpur (Silchar)</b>	Mil	<b>Masimpur</b>	160 MH	278244	ECHS Polyclinic Masimpur (Silchar), C/o 160 MH. Masimpur Mil Stn (Silchar)
55	Guwahati	<b>Shillong</b>	Mil	<b>Shillong</b>	MH Shillong	0364-2226789	ECHS Polyclinic Shillong, C/O MH Shillong, 99 APO, Meghalaya-793001
56	Guwahati	<b>Kohima</b>	Non Mil	<b>Zakhama</b>	154 GH Zakhama	0370-2233041, 5114	ECHS Polyclinic Zakhama (Kohima) C/o 154 GH, 99 APO
57	Hyderabad	<b>Bangalore (Urban)</b>	Mil	<b>IAM Banglore</b>	CHAF Bangalore	080-25578902	ECHS Polyclinic CH AF, Air Port Road, Bangalore- 560007
58	Hyderabad	<b>Bangalore (Yelahanka)</b>	Mil	<b>AF Stn Yelahanka</b>	CHAF Bangalore	080-28478088	ECHS Polyclinic Air Force Stn Yalahanka, Bangalore-560063, Karnatka
59	Hyderabad	<b>Kodagu (Madikeri)</b>	Non Mil	<b>Bangalore</b>	MH Kannur	08272-229406	ECHS Polyclinic Kodagu, Near Civil Bus Stand PO - Medikeri, Madikeri - 571201, Kodugu (Dist), Karnatka
60	Hyderabad	<b>Mangalore</b>	Non Mil	<b>Bangalore</b>	MH Kannur	2417549	ECHS Polyclinic Manglore, Opp Bhagini Samaj Ave- Maria Centre Near Jeppu Market Mangalore - 01
61	Hyderabad	Mysore	Non Mil	<b>2 AFSB Mysore</b>	SMC 2FSB		
62	Hyderabad	<b>Belgaum</b>	Mil	<b>Belgaum</b>	MH Belgaum	0831-2424718,0831-2425665	ECHS Polyclinic Belgaum, Near Military Hospital, Belgaum- 590009
63	Hyderabad	<b>Bijapur</b>	Non Mil	<b>Belgaum</b>	MH Belgaum	08352-262383	ECHS Polyclinic Bijapur, Bijapur - 586103, Karnatka
64	Hyderabad	Dharwad	Non Mil	<b>Belgaum</b>	MH Belgaum		
65	Hyderabad	<b>Vishakapatnam</b>	Mil	<b>INS Circars, Visakhapatnam</b>	INHS Kalyani	0891-2746213, 2578000/4107	ECHS Polyclinic Visakhapatnam, C/O INHS Kalyani, Gandhigram Post, Visakhapatnam - 530005
66	Hyderabad	<b>Karwar</b>	Mil	<b>Karwar</b>	INHS Jeevanti	08382-231333	ECHS Polyclinic Karwar, C/O Project Seabird , PN No. 12, Karwar - 581302, Karnatka
67	Hyderabad	<b>Guntur</b>	Non Mil	<b>Secunderabad</b>	MH Secunderabad	0863-2266139	ECHS Polyclinic Guntur , Plot No. B 1/55, Ravinder Nagar, 4th Line, Pattabhipuram, Guntur- 522006
68	Hyderabad	<b>Hyderabad (Secunderabad)</b>	Mil	<b>Secunderabad</b>	MH Secunderabad	040-27886294,	ECHS Polyclinic Secunderabad, J-79, Meadows Line, Next to Military Hospital, Secunderabad - 500015
69	Hyderabad	Chittur	Non Mil	<b>Secunderabad</b>	MH Secunderabad	8772-248603	ECHS Polyclinic Chittoor, C/o 29 Andhra Bn NCC, SV University, Tirupati - 517502 (AP)
70	Hyderabad	Giddalur	Non Mil	<b>Secunderabad</b>	MH Secunderabad	8992-221042	ECHS Polyclinic Ongole, C/o 34 Bn NCC , Ongole (AP)
71	Hyderabad	Golconda	Mil	<b>Secunderabad</b>	MH Golconda		
72	Hyderabad	Kakinada	Non Mil	<b>Secunderabad</b>	MH Secunderabad		



1	2	3	4	5	6	7	8
73	Hyderabad	Vijayawada	Non Mil	<b>Secunderabad</b>	MH Secunderabad		
74	Jabalpur	<b>Gorakhpur</b>	Mil	<b>AF Stn Gorakhpur</b>	12 AFH Gorakhpur	AF Exch 0551-2200201 Extn 386	ECHS Polyclinic Gorakhpur, Bldg No. E-18. ECHS Polyclinic Near Akash Vihar, Gorakhpur- 273001
75	Jabalpur	<b>Allahabad</b>	Mil	<b>Allahabad</b>	MH Allahabad	0532-2421704	ECHS Polyclinic Allahabad, C/o MH Allahabad
76	Jabalpur	<b>Fatehpur</b>	Non Mil	<b>Allahabad</b>	MH Allahabad	9838908348	ECHS Polyclinic Fatehpur ,74 Kheldar, GT Road Fatehpur
77	Jabalpur	Pratapgarh	Non Mil	<b>Allahabad</b>	MH Allahabad		
78	Jabalpur	Azamgarh	Non Mil	<b>Faizabad</b>	MH Faizabad		
79	Jabalpur	Sultanpur	Non Mil	<b>Faizabad</b>	MH Faizabad	05362-228904	ECHS Polyclinic Sultanpur, 966, Lal Diggii, Civil Lines, Sultanpur
80	Jabalpur	<b>Faizabad</b>	Mil	<b>Faizabad</b>	MH Faizabad	05278-220526	ECHS Polyclinic Faizabad, C/O MH Faizabad, Faizabad - 224001
81	Jabalpur	<b>Jabalpur</b>	Mil	<b>Jabalpur</b>	MH Jabalpur	2243, 2629010, 2629008	ECHS Polyclinic Jabalpur, C/o MH Jabalpur, Jabalpur, MP-482001
82	Jabalpur	<b>Raipur</b>	Non Mil	<b>Jabalpur</b>	MH Jabalpur		ECHS Polyclinic DODA, C/O HQ 4 Sect RR
83	Jabalpur	<b>Rewa</b>	Non Mil	<b>Jabalpur</b>	MH Jabalpur	07662-253484	ECHS Polyclinic Rewa, Tower Sirmaur Square Beside PK Scool Rewa
84	Jabalpur	Deoria	Non Mil	<b>Kundraghat</b>	MH Varanasi		
85	Jabalpur	<b>Mhow</b>	Mil	<b>Mhow</b>	MH Mhow	6198, 07324-271727	ECHS Polyclinic Mhow, C/o MH Mhow, Mhow, MP-453441
86	Jabalpur	<b>Ghazipur</b>	Non Mil	<b>Varanasi</b>	MH Varanasi	9839144894, 0548-2220946	ECHS Polyclinic Ghazipur, 119 SANSKAR, Tulsi Sagar, Near Convent School, Lanka,Ghazipur - 233001
87	Jabalpur	<b>Varanasi</b>	Mil	<b>Varanasi</b>	MH Varanasi	0542-2504055	
88	Jabalpur	Balia	Non Mil	<b>Varanasi</b>	MH Varanasi		
89	Jaipur	<b>Ajmer</b>	Mil	<b>Ajmer</b>	MH Nasirabad	0145-2633539	ECHS Polyclinic Ajmer, C/o Stn HQ Ajmer, Rajsthan- 305001
90	Jaipur	<b>Alwar</b>	Mil	<b>Alwar</b>	MH Alwar	0144-2338659	ECHS Polyclinic Alwar, C/o Mil Stn Alwar, Rajsthan
91	Jaipur	<b>Barmer (Jalipa)</b>	Mil	<b>Jalipa</b>	177 MH Barmer	224085	ECHS Polyclinic Barmer, 177 Mil Hosp,C/O 56 APO, Barmer, Rajsthan
92	Jaipur	<b>Bharatpur</b>	Mil	<b>Bharatpur</b>	MH Alwar	05644-238222	ECHS Polyclinic Bharatpur, Kanjoli Lines, Bharatpur (Rajsthan)
93	Jaipur	<b>Jhunjhunu</b>	Non Mil	<b>Jaipur</b>	MH Jaipur	01592-237299	ECHS Polyclinic Jhunjhunu, C/o DSS & A Board, Near Railway Stn Road, Jhunjhunu (Rajastan) PIN -333 001
94	Jaipur	<b>Jaipur</b>	Mil	<b>Jaipur</b>	MH Jaipur	0141-2200650	ECHS Polyclinic Jaipur, C/o Military Hospital Jaipur, Rajsthan
95	Jaipur	<b>Sikar</b>	Non Mil	<b>Jaipur</b>	MH Jaipur		

1	2	3	4	5	6	7	8
96	Jaipur	<b>Churu</b>	Non Mil	<b>Jaipur</b>	MH Jaipur		
97	Jaipur	<b>Jaisalmer</b>	Mil	<b>Jaisalmer</b>	MH Jodhpur	02992-255002	ECHS Polyclinic Jaisalmer, C/O Section Hospital Jaisalmer(Raj)
98	Jaipur	<b>Jodhpur</b>	Mil	<b>Jodhpur</b>	MH Jodhpur	0291-2515997	OIC ECHS Polyclinic Jodhpur, C/o Military Hospital, Jodhpur
99	Jaipur	<b>Nagaur</b>	Non Mil	<b>Jodhpur</b>	SWC	01582-241149	ECHS Polyclinic Nagaur, C/o Dhanwatri House, Behind Circuit House, Nagaur, Rajasthan
100	Jaipur	<b>Pali</b>	Non Mil	<b>Jodhpur</b>	MH Jodhpur		
101	Jaipur	<b>Kota</b>	Mil	<b>Kota</b>	MH Kota	2200375	ECHS Polyclinic Kota, C/o Military Hospital Kota
102	Jaipur	Sawai Madhopur	Non Mil	<b>Kota</b>	MH Kota		
103	Jaipur	<b>Udaipur</b>	Mil	<b>Udaipur</b>	185 MH, Udaipur	0294-2512931	ECHS Polyclinic Udaipur, C/O MH Udaipur, Udaipur (Raj)
104	Jammu	<b>Baramulla</b>	Mil	<b>Baramulla</b>	319 Fd Amb, Baramulla	238541	ECHS Polyclinic Baramulla, C/o 319 Fd Amb
105	Jammu	<b>Bakhloh</b>	Mil	<b>Dalhousi</b>	MH Dalhousi	01899-240519	ECHS Polyclinic Chamba, Near Balu Briz, District Chamba (HP)
106	Jammu	<b>Jammu</b>	Mil	<b>Stn HQ Jammu</b>	166 MH, Jammu	0191-2435849	ECHS Polyclinic Jammu, 166 Military Hospital, Jammu
107	Jammu	<b>Junglot (Kathua)</b>	Mil	<b>Junglot</b>	Sec Hosp Basoli	2207	ECHS Polyclinic Junglot C/O 401 (I) Arty Bde
108	Jammu	<b>Leh</b>	Mil	<b>Leh</b>	153 GH, Leh	2923	OIC ECHS Polyclinic Leh, C/O 153 General Hospital
109	Jammu	<b>Mandi</b>	Non Mil	<b>Stn HQ Palampur</b>	MH Palampur	01905-221710	ECHS Polyclinic Mandi, Vijay Palace Mandi, Distt : Mandi (HP), PIN- 175001
110	Jammu	<b>Pathankot</b>	Mil	<b>Pathankot</b>	MH Mamun		ECHS Polyclinic Poonch, C/o 425 Fd Amb
111	Jammu	<b>Rajouri</b>	Mil	<b>Rajouri</b>	150 GH, Rajouri		ECHS Polyclinic Rajouri, 150 General Hospital, Rajouri
112	Jammu	<b>Samba</b>	Mil	<b>Samba</b>	171 MH, Samba	3211	ECHS Polyclinic Samba, C/O 171 MH
113	Jammu	<b>Srinagar</b>	Mil	<b>Srinagar</b>	92 BH, Srinagar	2468086	ECHS Polyclinic Srinagar, 92 Base Hospital, Srinagar
114	Jammu	<b>Udhampur</b>	Mil	<b>Stn HQ Udhampur</b>	CH (NC) Udhampur	01992-2402230	ECHS Polyclinic Udhampur, Command Hospital, Northern Command, Udhampur
115	Jammu	<b>Yol</b>	Mil	<b>Stn HQ Yol</b>	MH Yol	01892-235792	ECHS Polyclinic Yol, Military Hospital, Yol Cantt (HP)-176052
116	Kochi	<b>Palakkad</b>	Non Mil	<b>Coimbatore</b>	MH Wellington	0491-2572023 & 2572024	ECHS Polyclinic Palakkad, 31 Chandra Nagar, Palakkad (Dist) - 678007
117	Kochi	<b>Kochi</b>	Mil	<b>INS Vendurthy, Kochi</b>	INHS Sanjeevani	0484-2666664	ECHS Polyclinic Kochi, C/O INHS Sanjivini, Naval Base, Kochi-682004
118	Kochi	<b>Kannur</b>	Mil	<b>Kannur</b>	MH Kannur	0497-2711429	ECHS Polyclinic Kannur, MH Road, C/O MH Kannur, Kerala - 670 001

1	2	3	4	5	6	7	8
119	Kochi	<b>Kozikode</b>	Non Mil	<b>Kannur</b>	MH Kannur	0495-2384437	ECHS Polyclinic kozhikode, C/o Grup HQ NCC, West hill Barra, kozhikode, Kerla, Pin- 673005
120	Kochi	Perintalmanna	Non Mil	<b>Kannur</b>	MH Kannur		
121	Kochi	Alleppy	Non Mil	<b>Kochi</b>	MH Trivandrum		
122	Kochi	Trissur	Non Mil	<b>Kochi</b>	MH Trivandrum		
123	Kochi	Kottayam	Non Mil	<b>Kochi</b>	MH Trivandrum		
124	Kochi	<b>Trivandrum</b>	Mil	<b>Trivandrum</b>	MH Trivandrum	0471-2358950	ECHS Polyclinic Trivandrum, Sanik Rest House, Pangode, Thirumala PO, Trivandrum- 695 006
125	Kochi	<b>Pathanamthitta</b>	Non Mil	<b>Trivandrum</b>	MH Trivandrum	0468-2621454	ECHS Polyclinic Pathanamitta, Building No OP VII 88 A & H 2 nd Floor, Anjali Auditorium, Omallur, Pathanamthitta, Kerla - 689647
126	Kochi	Quilon	Non Mil	<b>Trivandrum</b>	MH Trivandrum		
127	Kolkata	Barrackpore	Mil	<b>Barrackpore</b>	BH Barrackpore		
128	Kolkata	<b>Bengdubi (Jalpaiguri)</b>	Mil	<b>Bengdubi</b>	158 BH Bengdubi	0353-2550062, 6504(Mil)	ECHS Polyclinic Bengdubi, C/O - 158 Base Hospital
129	Kolkata	<b>Darjeeling</b>	Mil	<b>Darjeeling</b>	163 MH Darjeeling	2253263 & 2259420	ECHS Polyclinic Darjeeling C/O Stn Cell Jalapahar, Darjeeling (WB)
130	Kolkata	<b>Gangtok</b>	Mil	<b>Gangtok</b>	178 MH Gangtok	03592-231405, 2295(MIL)	ECHS Polyclinic Gangtok C/O Stn HQ Gangtok (Sikkim)
131	Kolkata	<b>Krishnanagar</b>	Non Mil	<b>Kolkata</b>	BH Barrackpore	03472-251141, 250476	ECHS Polyclinic Krishnanagar, C/o Monjuri, DC Das Road, Shimanta Pally Shaktinagar, Krishnanagar, Nadia (WB)
132	Kolkata	<b>Kolkota</b>	Mil	<b>Kolkata</b>	CH (EC) Kolkata	6322,033-24489234, 033-23582851(Res)	ECHS Polyclinic Kolkata, C/O Command Hospital(EC), Alipore, Kolkatta-27
133	Kolkata	Salt Lake	Mil	<b>Kolkata</b>	CH (EC) Kolkata		
134	Kolkata	Midnapur	Non Mil	<b>Kolkata</b>	CH (EC) Kolkata		
135	Kolkata	<b>Bardwan</b>	Non Mil	<b>Kolkata</b>	MH Panagarh	3729(Mil)	ECHS Polyclinic Burdwan, C/O MH Panagarh (WB)
136	Lucknow	<b>Kanpur</b>	Mil	<b>7 AFH</b>	7 AFH Kanpur	0512-2383724, 2383726	ECHS Polyclinic Kanpur, 7 Air Force Hosp, Nathu singh Road, kanpur (UP)
137	Lucknow	<b>Agra</b>	Mil	<b>Agra</b>	MH Agra	0562-2227688	ECHS Polyclinic Agra, Building No. 47, C/O- Mil Hosp Agra , Agra Cantt (UP), Pin - 282 001
138	Lucknow	Etawah	Non Mil	<b>Kanpur</b>	MH Agra		
139	Lucknow	<b>Mainpuri</b>	Non Mil	<b>Agra</b>	MH Agra		

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140	Lucknow	<b>Firozabad</b>	Non Mil	<b>Agra</b>	MH Agra		
141	Lucknow	<b>Etah</b>	Non Mil	<b>Agra</b>	MH Agra		
142	Lucknow	<b>Bulandshahr</b>	Non Mil	<b>Adhoc Stn HQ Babugarh</b>	MH Meerut		
143	Lucknow	<b>Bareilly</b>	Mil	<b>Bareilly</b>	MH Bareilly	0581-2421031	ECHS Polyclinic, Bareilly C/O Mil Hospital, Bareilly- 243 001
144	Lucknow	<b>Badaun</b>	Non Mil	<b>Bareilly</b>	MH Bareilly		
145	Lucknow	<b>Dehradun</b>	Mil	<b>Dehradun</b>	MH Dehradun	0135-2706560	ECHS polyclinic Dehradun, C/o Mil Hosp Dehradun Cantt-248003, Uttaranchal
146	Lucknow	<b>Fatehgarh</b>	Mil	<b>Fatehgarh</b>	MH Fatehgarh	235409	ECHS Polyclinic Fatehgarh, RRC Officers Mess, Fatehgarh-209601
147	Lucknow	<b>Gopeshwar</b>	Non Mil	<b>Joshimath</b>	MH Dehradun	01389-222242	Chamoli Polyclinic Chamoli, C/o 2009 Fd Amb, C/O- 56 APO, Chamoli
148	Lucknow	<b>Akbarpur (Matt) Kanpur Dehat</b>	Non Mil	<b>Kanpur</b>	MH Lucknow		
149	Lucknow	<b>Lansdowne</b>	Mil	<b>Lansdowne</b>	MH Lansdowne	01386-262510	ECHS Polyclinic Lansdowne, C/O- Mil Hosp Lansdowne Cantt(UA)
150	Lucknow	<b>Pauri Garhwal</b>	Non Mil	<b>Lansdowne</b>	MH Lansdowne	01368-221775	ECHS Polyclinic Pauri Gharwal, Bharat Bhawan, Near Distt Hosp, Pauri, Utranchal
151	Lucknow	<b>Lucknow</b>	Mil	<b>Lucknow</b>	CH (CC) Lucknow	0522-2482885	Augmented ECHS Polyclinic Lucknow, 3 Rani Laxmi Bai Marg, Lucknow Cantt - 226 002
152	Lucknow	<b>Rae Bareilly</b>	Non Mil	<b>Lucknow</b>	MH Lucknow		
153	Lucknow	<b>Mathura</b>	Mil	<b>Mathura Cantt</b>	MH Mathura	0565-2896367	ECHS Polyclinic Mathura, C/o MH Mathura, Mathura Cantt
154	Lucknow	<b>Aligarh</b>	Non Mil	<b>Mathura</b>	MH Agra		
155	Lucknow	<b>Meerut</b>	Mil	<b>Meerut</b>	MH Meerut	6651(OO, 9412220099(M)	ECHS Cell, Meerut, C/O - Mil Hospital, Meerut Catt
156	Lucknow	<b>Muzaffarnagar</b>	Non Mil	<b>Meerut</b>	MH Meerut	95131-2620793, 2622527@	ECHS Polyclinic Muzaffarnagar, C/o Dr Ravinder Kumar, Bldg 1315, 1st Floor, South Civil Lane, Circular Road, Muzaffarnagar
157	Lucknow	Haldwani	Mil	<b>Ranikhet</b>	MH Bareilly	Mil Exch 222043	ECHS Polyclinic Haldwani, C/o Stn HQ Haldwani
158	Lucknow	<b>Pithoragarh</b>	Mil	<b>Pithoragarh</b>	161 MH	266311	ECHS Polyclinic Pithoragarh, C/O - Stn HQ Pithoragarh (UA), UP
159	Lucknow	Roorkee	Mil	<b>Roorkee</b>	MH Roorkee		
160	Lucknow	<b>Almora</b>	Non Mil	<b>Ranikhet</b>	MH Ranikhet		
161	Lucknow	<b>Saharanpur</b>	Mil	<b>AF Stn Sarsawa</b>	SMC Sarswa	2646200 Extn 262	ECHS Polyclinic Sarsawa, C/O- Located with SMC Air Force Station, Sarsawa, Saharanpur

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162	Lucknow	<b>Shahjahanpur</b>	Mil	<b>Shahjahanpur</b>	Sec Hosp Shajapur Bareilly	05842-223631-2018	ECHS Polyclinic Shahjahanpur, C/O Sec Hosp, P-2 GGS Road, Shahjahanpur Cantt
163	New Delhi	<b>Faridabad</b>	Non Mil	<b>AF Stn Faridabad</b>	SMC Faridabad	2473633	ECHS Polyclinic Faridabad, AF Station, Sector-15, Faridabad
164	New Delhi	<b>Ghaziabad (Hindon)</b>	Mil	<b>AF Stn Hindon</b>	11AFH Hindon	2931401	ECHS Polyclinic Hindon, 11 Air Force Hosp, Air Force Stn Hindon, Ghaziabad (UP)
165	New Delhi	<b>Sirsa</b>	Mil	<b>AF Stn Sirsa</b>	SMC Sirsa	227620	ECHS Polyclinic Sirsa, C/O 45 Wing Air Force, C/o 56 APO
166	New Delhi	<b>Jhajjar</b>	Non Mil	<b>Ambala</b>	MH Ambala	9812011301	ECHS Polyclinic Jhajjar, Priya Colony, Jhajjar, Haryana
167	New Delhi	<b>Rewari</b>	Non Mil	<b>Ambala</b>	MH Ambala	01274-225157, 224708, 9812258314	ECHS Polyclinic Rewari, Opp Zila Sainik Board, Rewari
168	New Delhi	<b>Rohtak</b>	Non Mil	<b>Ambala</b>	MH Ambala	01262-213965	ECHS Polyclinic Rohtak, C/O GH (TA) PGI Complex, Rohtak, Haryana
169	New Delhi	<b>Karnal</b>	Non Mil	<b>Ambala</b>	MH Ambala	0184-2250455	ECHS Polyclinic Karnal, Red Cross Bhawan, Nayay Puri, Karnal, Haryana
170	New Delhi	<b>Ambala</b>	Mil	<b>Ambala</b>	MH Ambala	0171--2630169	ECHS Polyclinic Ambala, C/o MH Ambala, Ambala Cantt
171	New Delhi	<b>Jind</b>	Non Mil	<b>Ambala</b>	MH Ambala	245674	ECHS Polyclinic Jind, Primary Health Centre, Near Bus Stand, Jind
172	New Delhi	Narnaul	Non Mil	<b>Ambala</b>	MH Ambala		
173	New Delhi	Sonapat	Non Mil	<b>Ambala</b>	MH Ambala		
174	New Delhi	Panipat	Non Mil	<b>Ambala</b>	MH Ambala		
175	New Delhi	Yamunanagar	Non Mil	<b>Ambala</b>	MH Ambala		
176	New Delhi	Kaithal	Non Mil	<b>Ambala</b>	MH Ambala		
177	New Delhi	Kurukshetra	Non Mil	<b>Ambala</b>	MH Ambala		
178	New Delhi	<b>Delhi</b>	Mil	<b>Delhi</b>	BH Delhi Cantt	25684685, 9810128361	ECHS Polyclinic Delhi , C/o Base Hospital, Delhi Cantt-10
179	New Delhi	<b>Gurgaon</b>	Non Mil	<b>Delhi</b>	BH Delhi Cantt	95124-2349758	ECHS Polyclinic Gurgaon , Dughahera Army Camp (Old Gurgaon Road), C/O- 253 Med Regt, C/O- 56 APO
180	New Delhi	<b>NOIDA</b>	Non Mil	<b>Delhi</b>	AFC, New Delhi	95120-2433411	ECHS Polyclinic NOIDA, Sec-37 NOIDA, UP
181	New Delhi	<b>Delhi (Lodhi)</b>	Non Mil	<b>Delhi</b>	AFC, New Delhi	24364122	ECHS Polyclinic Lodhi Road, (Near Sai Baba Mandir), Bishma Pitahmah Marg, Pragati Vihar, New Delhi - 110 003
182	New Delhi	<b>Bhiwani</b>	Non Mil	<b>Hissar</b>	MH Ambala	01262-293923	ECHS Polyclinic Bhiwani, Sainik Rest House, Near Rly Station, Bhiwani, Dist Bhiwani, Haryana

1	2	3	4	5	6	7	8
183	New Delhi	<b>Hissar</b>	Mil	<b>Hissar</b>	MH Ambala	266380	ECHS Plyclinic Hissar, Near DOT CSD Canteen, C/O- Station HQ, Hissar
184	New Delhi	Fatehabad	Non Mil	<b>Hissar</b>	MH Ambala		
185	Patna	<b>Bhojpur(Ara)</b>	Non Mil	<b>Danapur</b>	MH Danapur	0618-223363	ECHS Polyclinic Bhojpur, Distt - Ara, Bihar
186	Patna	<b>Muzaffarpur</b>	Non Mil	<b>Muzaffarpur</b>	MH Danapur	0621-2211143	ECHS Polyclinic Muzaffarpur, C/O 151 Inf Bn (TA), Muzaffarpur, Bihar
187	Patna	<b>Danapur (Patna)</b>	Mil	<b>Danapur</b>	MH Danapur	06115-222033	ECHS Polyclinic Danapur, C/O Military Hosp, Danapur Cantt, Bihar
188	Patna	<b>Chhapra</b>	Non Mil	<b>Danapur</b>	MH Danapur		ECHS Polyclinic Chhapra, c/o RR Laboratory Building Complex, Bhagwan Bazar, Chhapra Bihar - 841301
189	Patna	Dharbanga	Non Mil	<b>Danapur</b>	MH Danapur		
190	Patna	<b>Gaya</b>	Mil	<b>Gaya</b>	MH Gaya	0631-2210259	ECHS Polyclinic Gaya, Paharpur, Gaya C/o Stn HQ Gaya, Bihar
191	Patna	<b>Ganjam (Brahmapur)</b>	Non Mil	<b>NOIC Orissa (Chilka)</b>	INHS Nivarini	0680-2296307	ECHS Polyclinic Berhampur, C/o Stn HQ, Gopalpur- 761052, Ganjam (Orissa)
192	Patna	<b>Bhubneswar</b>	Non Mil	<b>NOIC Orissa (Chilka)</b>	INHS Nivarini	0674-2564450	ECHS Polyclinic Cuttack/Bhubneswar, Plot No. 958, Prakriti Vihar, Baramunda, Bhubneswar - 751003, Orissa
193	Patna	<b>Balasore</b>	Mil	<b>NOIC Orissa (Chilka)</b>	INHS Nivarini	06782-280295	ECHS Polyclinic Balasore, P-10, Proof Park Colony, OT Road, Dist - Balasore (Orissa)-756025
194	Patna	<b>Ranchi</b>	Mil	<b>Ranchi</b>	MH Namkum	0651-2261370	ECHS Polyclinic Ranchi, C/o Stn HQ Ranchi, Jharkhand
195	Patna	Singhbhum (Jamshedpur)	Non Mil	<b>Ranchi</b>	MH Namkum		
196	Pune	<b>Nagpur</b>	Mil	<b>AF Stn Nagpur</b>	SMC Nagpur	0712-2510899	ECHS Polyclinic Nagpur, C/O SMC, IAF Maintenance Command, Vayu Nagar, Nagpur- 440007
197	Pune	<b>Ahmedabad</b>	Mil	<b>Ahmedabad</b>	MH Ahmedabad	079-22850004, 22850015	ECHS Polyclinic Ahmedabad, Near Stn HQ Ahmedabad, Gujrat
198	Pune	<b>Sholapur</b>	Non Mil	<b>Ahmednagar</b>	MH Ahmednagar	0217-2723357, 2303074, 9850679477	ECHS Polyclinic Sholapur, C/O Stn HQ Ahmednagar - 414002
199	Pune	<b>Ahmednagar</b>	Mil	<b>Ahmednagar</b>	MH Ahmednagar	0241-2323962	ECHS Polyclinic Ahmednagar, C/O Stn HQ, Ahmednagar-414002
200	Pune	Osmanabad	Non Mil	<b>Ahmednagar</b>	MH Ahmednagar	02472-223564	
201	Pune	Latur	Non Mil	<b>Ahmednagar</b>	MH Ahmednagar		
202	Pune	<b>Aurangabad</b>	Mil	<b>Aurangabad</b>	MH Aurangabad	0240-2373105	ECHS Polyclinic Aurangabad, Stn HQ Aurangabad, Aurangabad- 431002

1	2	3	4	5	6	7	8
203	Pune	<b>Bhopal</b>	Mil	<b>Bhopal</b>	MH Bhopal	0755-3959922	ECHS Polyclinic Bhopal, C/o Stn HQ Bhopal, Sultania inf lines, Bhopal - 462001 (MP)
204	Pune	Buldana	Non Mil	<b>Bhusawal</b>	MH Devlali		
205	Pune	Jalgaon	Non Mil	<b>Bhusawal</b>	MH Devlali		
206	Pune	<b>Devlali</b>	Mil	<b>Devlali</b>	MH Devlali	0253-2495286	ECHS Polyclinic Devlali, C/O MH Devlali, C/o Stn HQ Devlali, Nasik PIN-422402
207	Pune	<b>Bhind</b>	Non Mil	<b>Gwalior</b>	MH Gwalior	07534-236864, 236865	ECHS Polyclinic Bhind, C/o Distt Sainik Welfare Office, Bhind - 477001 (MP)
208	Pune	<b>Gwalior</b>	Mil	<b>Gwalior</b>	MH Gwalior	0751-2420829	ECHS Polyclinic Gwalior, C/o Stn HQ, Morar Cantt Gwalior
209	Pune	Morena	Non Mil	<b>Gwalior</b>	MH Gwalior		
210	Pune	<b>Mumbai</b>	Mil	<b>INS Angre, Mumbai</b>	INS Asvini	022-22151666, 22163632 Extn 3733	ECHS Polyclinic Mumbai, C/o INHS Asvini, Colaba, Mumbai - 400005
211	Pune	<b>Mumbai (Upnagar) Powai</b>	Mil	<b>CABS, Mankhurd</b>	INHS Asvini		
212	Pune	<b>Jamnagar</b>	Mil	<b>Jamnagar</b>	MH Jamnagar	0288-2663794, 2663694	ECHS Polyclinic Jamnagar, C/O Stn HQ, Jamnagar - 361005
213	Pune	<b>Jhansi</b>	Mil	<b>Jhansi</b>	MH Jhansi	6244	ECHS Polyclinic Jhansi, C/o Stn HQ Jhansi
214	Pune	Jalaun	Non Mil	<b>Jhansi</b>	MH Jhansi		
215	Pune	<b>Satara</b>	Non Mil	<b>Adhoc Stn HQ Kolhapur</b>	CH(SC) Pune	02162-237287	ECHS Polyclinic Satara, C/o Stn HQ Kolhapur, Maharashtra
216	Pune	<b>Kolhapur</b>	Non Mil	<b>Adhoc Stn HQ Kolhapur</b>	CH(SC) Pune	0231-2606773	ECHS Polyclinic, Stn HQ Tembai Hill Military Camp, Kolhapur - 416004 (Maharashtra)
217	Pune	Sangli	Non Mil	<b>Adhoc Stn HQ Kolhapur</b>	CH (SC) Pune		
218	Pune	Ratnagiri	Non Mil	<b>Adhoc Stn HQ Kolhapur</b>	CH (SC) Pune		
219	Pune	Sindudurg	Non Mil	<b>Panaji</b>	MH Panaji		
220	Pune	Thane	Non Mil	<b>Stn Cell Mumbai Sub Area</b>	MH Kirkee		
221	Pune	Mahad	Non Mil	<b>Stn Cell Mumbai Sub Area</b>	MH Kirkee		
222	Pune	<b>Panaji</b>	Mil	<b>Panaji</b>	MH Panaji	0832-2420829	ECHS Polyclinic Panaji (Goa), C/o Stn HQ, Panaji (Goa)
223	Pune	<b>Akola</b>	Non Mil	<b>Pulgaon</b>	MH Pulgaon	0724-2455244	ECHS Polyclinic Akola, C/o St HQ Pulgaon, Maharashtra
224	Pune	Amravati	Non Mil	<b>Pulgaon</b>	MH Pulgaon		
225	Pune	<b>Pune</b>	Mil	<b>Stn Cell Pune</b>	CH (SC) Pune	020-26823265	ECHS Polyclinic Pune, T-47 AFMCECHS Road, Pune - 411040

1	2	3	4	5	6	7	8
226	Pune	<b>Saugar</b>	Mil	<b>Saugar</b>	MH Saugar	2161	ECHS Polyclinic Sagar, C/o MH Saugor, Stn HQ, Sagar (MP)-470001
227	Pune	<b>Vadodra</b>	Mil	<b>Vadodra</b>	MH Vadodra	0265-2781762	ECHS Polyclinic Vadodra, C/O Stn HQ, Vadodara - 390008

**THINK IT OVER**

**“ COMMON SENSE + WILL POWER = HEALTH ”.**



**Appendix 'K'**  
**(Refers to para 20 of Chapter IX)**

**LIST OF HOSPITALS RECOGNISED BY ECHS AND DGAFMS FOR  
EMPANELMENT WITH EX-SERVICEMEN CONTRIBUTORY HEALTH SCHEME**

<b>SI No</b>	<b>State</b>	<b>City</b>	<b>Hospital/Diagnostic Centre</b>	<b>Purpose for which recognised</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1	Andra Pradesh	Hyderabad	Apollo Hospital, Deccan Hospital Ltd. Jubilee Hills, Phase – 3	Heart, Cancer, Renal Total Hip/Knee Joints Replacement, Prostate Surgery (TURP) and Lithotripsy
2	Andra Pradesh	Hyderabad	Medwin Hospital Raghava Ratna Towers Chirg Ali Lane	Heart, Cancer and Renal
3	Andra Pradesh	Hyderabad	Kameieni Hospital LB Nagar	Heart Renal Transplant/Dialysis, Lithotripsy, Kidney/Urethral Stone, Prostate Surgery (TRUP), Total Hip/Knee Joint Replacement, Acute Phase management of Stroke (CVA) and Arterial Surgery.
4	Andra Pradesh	Hyderabad	LV Prasad Eye Institute, LV Prasad Marg, Banjara Hills	Retinal Detachment Surgery
5	Andra Pradesh	Hyderabad	Yashoda Super Specialty Hospital	Super Specialty Referrals
6	Andra Pradesh	Hyderabad	Osmania General Hospital	All Purpose
7	Andra Pradesh	Hyderabad	Gandhi General Hospital	All Purpose
8	Andra Pradesh	Hyderabad	Niloufer General Hospital	Gynae, Obst & Pediatrics
9	Andra Pradesh	Hyderabad	Fever Hospital	All Purpose
10	Andra Pradesh	Hyderabad	Institute of Chest Diseases	TB and Chest Diseases
11	Andra Pradesh	Hyderabad	Govt Maternity Hospital	Obst & Gynae
12	Andra Pradesh	Hyderabad	Govt Mental Hospital	Mental
13	Andra Pradesh	Hyderabad	Govt Dental Hospital	Dental
14	Andra Pradesh	Hyderabad	ENT Hospital	ENT
15	Andra Pradesh	Hyderabad	Cancer Hospital MNJ	Cancer
16	Andra Pradesh	Hyderabad	Sarojini Devi Eye Hospital	Eye
17	Andra Pradesh	Hyderabad	Institute of Preventive Medicine	Lab Investigations
18	Andra Pradesh	Hyderabad	Share Medical Care (Medicity)	General & Specialised Acute Medical Care, Cardiology, Cardio Thoracic Gastroenterology Nephrology, Lab Science and Radiology
19	Andra Pradesh	Hyderabad	Vijaya Diagnosti Centre	General Purpose Obst & Gynae
20	Andra Pradesh	Hyderabad	Gagan Mahal Nursing Home	General Purpose Obst & Gynae
21	Andra Pradesh	Hyderabad	Medinova Diagnostic Centre	General Purpose Obst & Gynae
22	Andra Pradesh	Hyderabad	Sharavana Nursing Home	General Purpose
23	Andra Pradesh	Hyderabad	Kailash Disgnostic & Rehabilitation Centre	Diagnostic Facilities
24	Andra Pradesh	Hyderabad	Tapadia Disgnostic Centre	Diagnostic Facilities
25	Andra Pradesh	Hyderabad	Eshwar Lakshmi Hospital	General Purpose
26	Andra Pradesh	Hyderabad	Sagar Lal Memorial General Purpose Obst & Gynae	General Purpose
27	Andra Pradesh	Hyderabad	Geetha Maternity & Nursing Home	General Purpose
28	Andra Pradesh	Hyderabad	Ashok Kumar Hospital	General Purpose ENT Treatment procedures
29	Andra Pradesh	Hyderabad	CC Shroof Memorial Hospital	General Purpose treatment
30	Andra Pradesh	Hyderabad	New City Hospital	General Purpose Treatment
31	Andra Pradesh	Hyderabad	Central Diagnostic and Research Institute	General Purpose Diagnostics
32	Andra Pradesh	Hyderabad	Princes Dhrru Shever Children's Hospital	General Purpose treatment and diagnostic
33	Andra Pradesh	Hyderabad	Hari Prasad Memorial Hospital	General Purpose treatment and diagnostic

34	Andra Pradesh	Hyderabad	Shri Bhagwan Devi Mateernity and Orthopedic Hospital	General Purpose treatment and diagnostic
35	Andra Pradesh	Hyderabad	CDR Hospital	General Purpose treatment and diagnostic
36	Bihar	Patna	Patna Medical College & Hospital	All Purpose
37	Bihar	Patna	NMCH Patna	All Purpose
38	Bihar	Patna	R Nagar Hospital	All Purpose
39	Bihar	Patna	City Hospital	All Purpose
40	Bihar	Patna	Dr. Ruben Memorial Hospital	All urological Surgery, Dialysis and Laparoscopic surgery
41	Bihar	Patna	Drishthi Eye Care & Research Centre	Ophthalmology
42	Bihar	Patna	Jeeval Heart Hospital & Research	Cardiac Surgical Work
43	Bihar	Patna	Ram Ratan Hospital	Orthopedic, Dermatology, Obstetrics, Dental
44	Bihar	Patna	Balaji Cardiac Diagnostic Centre	TMT Holter, ECG, Pulmonary Function Test
45	Bihar	Patna	Paln View Hospital	Urological Services and Laparoscopic Procedures
46	Bihar	Patna	Nalanda Hospital and Scan Centre	X Ray, MRI, CT Scan & Ultrasound
47	Bihar	Patna	Central Diagnostic	For Bio-chemistry Hematology, Microbiology and Drug Monitoring
48	Bihar	Patna	Heart Hospital Pvt. Ltd.	Cardiology and Cardiothoracic Surgery
49	Bihar	Patna	Pachlok Diagnostic	For Diagnostic
50	Bihar	Patna	Tara Hospital & Medical Research Centre	General Purpose & specialised treatment in Cardiac thoracic surgery, Nephrology and Laparoscopy
51	Bihar	Patna	Mahavir Cancer Sansthan	Cancer
52	Bihar	Patna	Sahyog Hospital	General Purpose
53	Bihar	Patna	HAI Medi Acre and Research Institute	General Surgery & Diagnostics
54	Bihar	Patna	Harsh Advanced Diagnostic and Research Centre	Pathology, Biochemistry and Ultrasound
55	Bihar	Patna	Alok Medical Centre	Therapeutic and Diagnostic including endoscopic procedures
56	Bihar	Patna	Chikitsa Nursing Home, Mithapur, Patna	Maternity Services
57	Bihar	Patna	Sahyog Hospital, 50, Patliputra Colony, Patna	General Purpose treatment in Medicines, General Surgery and Obst & Gynae
58	Bihar	Patna	Shahi Hospital Road No 2 B, Rajendra Nagar	Urology Including Lithotripsy
59	Bihar	Patna	Dr. Ruben Memorial Hospital, Ratan Stone Clinic, Minar Plaza	All Urological Surgery including lithotripsy, Dialysis and Laparoscopic Surgery
60	Bihar	Patna	Jeevvak Heart Hospital & Research Institute Pvt Ltd.	Cardiac Surgical work
61	Bihar	Patna	Golghar Chikitsa Kendra Golghar	Cardiac Investigation
62	Bihar	Patna	Surabhi Imaging Centre Opp Sales Tax Office, Guzri	Ultrasonography
63	Bihar	Patna	Panchlok Diagnostic Centre Opp Tara Mandal, Bailery Road	Aemotology, Bio chemistry
64	Bihar	Patna	Central Diagnostics Shanti Priya Apts Boring Road	Pathology, Micro biology, Bio chemistry and Hormonal Essay
65	Bihar	Patna	Maurya Laboratories Pvt. Ltd. Rajendra nagar, Road No 3 Biolad and Pawan Ultrasound	All Pathological, Biological, Micro Biology & Histopathology Investigations Pathology, Bio-chemistry and Micro Biology

66	Chandigarh	Chandigarh	PGI Chandigarh	Renal and Heart
67	Delhi	Delhi	AIIMS Ansari Nagar	All purpose
68	Delhi	Delhi	GB Pant Hospital Jawaharlal Nehru Marg	Heart
69	Delhi	Delhi	Dharamshila Cancer Hospital and Research Centre, Vasundhara Enclave	Cancer
70	Delhi	Delhi	National Heart Institute and Research Centre East of Kailash	Cancer
71	Delhi	Delhi	Escorts Heart Institute and Research Centre Okhla Road, Near Frienda Colony	Heart and Arterial Surgery
72	Delhi	Delhi	Batra Hospital & Memorial Research Centre, 1 Tughlakabad Institutional Area MB Road	Cardiac, Diagnostic Cancer
73	Delhi	Delhi	Sir Ganga Ram Hospital, Sir Ganga Ram Hospital marg	Heart, Cancer, Renal, Total Hip/Knee Joint Replacement and Prostate Surgery
74	Delhi	Delhi	Sir Mool Chand Khairati Ram Hospital and Ayurvedic Research Institute, Lajpat Nagar – III	Cancer, Renal and Total Hip/Knee Joint replacement.
75	Delhi	Delhi	Orthonova Hospital, C-5/29, Safdarjung Development Area Opp IIT Gate	Total Hip/Knee Replacement
76	Delhi	Delhi	Indraprastha Apollo Hospital, Sarita Vihar, delhi Mathura Road	Heart, Cancer, Arterial Surgery, Acute Phase Management of Stroke, Lithotripsy for Kidney/Urethral Stone and Total Hip/Knee Joint Replacement.
77	Delhi	Delhi	Maharaja Agarasain Hospital	General Purpose
78	Delhi	Delhi	Malhotra Heart Institute & Medical Research Centre, 14, Ring Road Lajpat Nagar	Heart
79	Delhi	Delhi	Rajiv Gandhi Cancer Institute & Research Centre, Sector IV, Rohini	Cancer
80	Delhi	Delhi	Mata Chanan Devi Hospital, C – 1, Janak Puri	Renal Dialysis, Acute Phase management of Stroke (CVA) and Prostate Surgery (TURP)
81	Delhi	Delhi	Dr. Rajendra Prasad Centre for Ophthalmic Sciences All India Institute of Medical Science, Ansari Nagar	Retinal Detachment Surgery
82	Delhi	Delhi	Gusamal M Modi Hospital & Research Centre for Medical Sciences	
83	Delhi	Delhi	Jaipur Goldern Hospital	General Purpose & Diagnostic
84	Delhi	Delhi	Dr. RM Lohia Hospital	
85	Delhi	Delhi	Safdarjung Hospital	
86	Delhi	Delhi	Lady Harding Hospital	
87	Delhi	Delhi	Kalavati Saran Children Hospital	
88	Delhi	Delhi	M&G Hospital, RK Puram	
89	Delhi	Delhi	LNJP Hospital	
90	Delhi	Delhi	Dindayal Hospital	
91	Delhi	Delhi	Kasturba Hospital	
92	Delhi	Delhi	Girdhari Lal Hospital	
93	Delhi	Delhi	RBTB Hospital Kingway Camp	
94	Delhi	Delhi	Escort Hospital & research Centre	

95	Delhi	Delhi	Dr. Anand's Ultrasound & CT Scan	
96	Delhi	Delhi	GMR Institute of Imaging Research, MRI Scan Centre	
97	Delhi	Delhi	Medical Laboratory Services	
98	Delhi	Delhi	South Delhi Ultrasound & X-Ray Clinic	
99	Delhi	Delhi	Delhi CT & MRI Centre	Radiology, CT, MRI
100	Delhi	Delhi	CISR Hospital	Asthma
101	Delhi	Delhi	DNR Institute	CT
102	Delhi	Delhi	Indian Spinal Injuries Centre	Orthopedic and Spinal Injuries
103	Delhi	Delhi	Dr. Lal Path Lab (P) Ltd	Lab
104	Delhi	Delhi	RG Stone Urological Research Institute	Lithotripsy
105	Delhi	Delhi	Delhi National CT Scan & Diagnostic Centre, Punjabi Bagh	CT, MRI
106	Delhi	Delhi	Scan Research Institute at Ganga Ram Hospital	CT, MRI
107	Delhi	Delhi	GMR Institute of Imaging and Research	CT, MRI
108	Delhi	Delhi	Speciality Ranbaxy Lab, ISIC Vasant Kunj	Lab
109	Delhi	Delhi	NMC Imaging and Diagnostic Centre (Vimhans)	CT, MRI
110	Gujrat	Ahmedabad	Civil Hospital	General Purpose
111	Gujrat	Ahmedabad	Mental Hospital	Mental Diseases
112	Gujrat	Ahmedabad	Dental Hospital	Dental
113	Gujrat	Ahmedabad	TB Hospital	TB
114	Gujrat	Ahmedabad	VS Hospital	General Purpose
115	Gujrat	Ahmedabad	Nagri Eye Hospital	Eye
116	Gujrat	Ahmedabad	Shrardabai Hospital	General Purpose
117	Gujrat	Ahmedabad	LG Hospital	General Purpose
118	Gujrat	Ahmedabad	Karnavati Hospital	Specialised Treatment & Diagnostic Procedures
119	Gujrat	Ahmedabad	Parekhs Hospital	Laparoscopy and Joint replacement
120	Gujrat	Ahmedabad	Krishna Heart Institute	Cardiac and Cardiothoracic procedures
121	Gujrat	Ahmedabad	Sterling Hospital	General and Specialised incl Cardiac and Cardiothoracic procedures.
122	Gujrat	Ahmedabad	Laxmi Heart and Medicare	General Purpose
123	Gujrat	Ahmedabad	The Gujarat Cancer and Research Centre new Civil Hospital Compound	Cancer
124	Gujrat	Ahmedabad	The Gujarat, Research and Medical Institute Camp Road, Shahibaug	Heart
125	Gujrat	Ahmedabad	Usmanpura CT Scan Centre	CT, MRI and Radiology
126	Haryana	Faridabad	Faridabad CT Scan Centre	CT
127	Haryana	Faridabad	Escort Hospital and Research Centre	General Purpose
128	Haryana	Gurgaon	Distt Hospital	
129	Haryana	Gurgaon	Modern Diagnostic and Research Centre	Conventional Radiology, CT, Lab
130	Haryana	Gurgaon	Uma Sanjeevani Health Centre	Diagnostic Purpose
131	Jharkhand	Ranchi	Raj Hospital and Research Centre	Specialised General and Diagnostic
132	Jharkhand	Ranchi	St Barnavas Hospital	General Purpose and Diagnostic Procedures
133	Jharkhand	Ranchi	Nagarmal Modi Seva Sadan	General Specialised Treatment
134	Jharkhand	Ranchi	Abdur Razzak Memorial Weavers Hospital (Apollo)	General Specialised Treatment
135	Jharkhand	Ranchi	Dr. PS Rohatagi Investigation	Diagnostics

136	Jharkhand	Ranchi	Dr. AK Verma Pathology	Diagnostics
137	Jharkhand	Ranchi	Dr. J Sharan Pathology	Diagnostics
138	Karnataka	Bangalore	Kidwai Memorial Institute of Oncology Hosur Road	Cancer
139	Karnataka	Bangalore	Manipal Hospital, 98, Rustam Bag, Airport Road	Heart and Cancer
140	Karnataka	Bangalore	Wockhardt Hospital and Heart Institute Sharif Chambers, 14, Cunningham Road	Heart and Arterial surgery
141	Karnataka	Bangalore	St. John's Medical College Hospital Sarjapur Road	Heart Renal and Prostate Surgery (TURP)
142	Karnataka	Bangalore	Bangalore Institute of Oncology (Bangalore Cancel Hospital 44 – 45/2, 2 <sup>nd</sup> Cross Raja Ram Mohan Ray	Cancer
143	Karnataka	Bangalore	Hosmat 45, Magarath Road, Off Richmond Road Next to the corporate Officers	Cancer
144	Karnataka	Bangalore	MS Ramaiah Medical teaching Hospital	General and specialised
145	Karnataka	Bangalore	Curie Centre Oncology St. John's College and Hospital Campus. Pom-Koramangla	Cancer (Surgery, Radiotherapy and Chemotherapy)
146	Karnataka	Bangalore	Santosh Hospital	
147	Karnataka	Bangalore	Bhagwan mahaveer Jain Heart Institute	Cardiology and Cardiac Surgery
148	Karnataka	Bangalore	Bangalore Baptisit Hospital	General Purpose
149	Karnataka	Bangalore	Victoria Hospital	
150	Karnataka	Bangalore	Bowering and Lady Curzon	
151	Karnataka	Bangalore	Vani Vilas	
152	Karnataka	Bangalore	Minto Ophthalmic Hospital	
153	Karnataka	Bangalore	KG Hospital	
154	Karnataka	Bangalore	Isolation Hospital	
155	Karnataka	Bangalore	Lady Willingdo and TB De Monstration Centre	
156	Karnataka	Bangalore	HSIS Hospital	
157	Karnataka	Bangalore	SDS Sanitorium	
158	Karnataka	Bangalore	Govt TB Hospital	
159	Karnataka	Bangalore	Central Laprasorium	
160	Karnataka	Bangalore	Govt Dental Hospital	
161	Karnataka	Bangalore	Jayangar General Hospital	
162	Karnataka	Bangalore	Chimaya Mission Hospital	
163	Karnataka	Bangalore	Medinova Diagnostic Services Ltd	
164	Karnataka	Bangalore	KIMS Hospital & Research Centre	
165	Karnataka	Bangalore	Yellama Dassappa Hospital	
166	Karnataka	Bangalore	PD Hinduja Sindhi Hospital	
167	Karnataka	Bangalore	Republic Hospital	
168	Karnataka	Bangalore	Sevak Shetra Hospital	
169	Karnataka	Bangalore	NIMHANS	Mental & Neurological Disorders
170	Karnataka	Bangalore	Sanjay Gandhi Accident and Rehabilitation Centre	Accident and Orthopedic
171	Karnataka	Bangalore	Shri Jayadev Institute of Cardiology	Cardiology
172	Karnataka	Bangalore	MS Ramaiah Hospitals	General/Specialised procedures
173	Karnataka	Bangalore	Bhagwan Mahavor Jain Hospital	General/Specialised procedures
174	Karnataka	Bangalore	Indira Gandhi Institute of Child Health	Pediatrics
175	Karnataka	Bangalore	Agadi Hospital and Research Centre	General and specialised treatment
176	Karnataka	Bangalore	CSI Hospital	General purpose
177	Karnataka	Bangalore	Chord Road Hospital	General purpose

178	Karnataka	Bangalore	Gayatari Hospital	General purpose
179	Karnataka	Bangalore	ITI Hospital	General Purpose
180	Karnataka	Bangalore	Narayan Nethralaya	Eye
181	Karnataka	Bangalore	Rajsekhar Hospital and Maternity Centre	General Purpose
182	Karnataka	Bangalore	Ravi Kirloskar Memorial Hospital	General Purpose
183	Karnataka	Bangalore	Shekhar Hospital	General and specialised treatment
184	Karnataka	Bangalore	Bangalore Heart Hospital	Cardiology and Cardiac Surgery
185	Karnataka	Bangalore	Bangalore Children Hospital	Pediatrics
186	Karnataka	Bangalore	Bangalore West Lions Eye Hospital	Eye
187	Karnataka	Bangalore	KR Hospital	General and specialised
188	Karnataka	Bangalore	Narayan Hirdiyalaya	Cardiology and Cardiac Surgery
189	Karnataka	Bangalore	Sri Raghvendra Hospital	General & Specialised Treatment
190	Karnataka	Bangalore	Bangalore Kidney Stone	Lithotripsy
191	Karnataka	Bangalore	Trinity Hospital and heart Hospital	General and specialised
192	Karnataka	Bangalore	Govt Medical College& Hosp	All purpose
193	Maharashtra	Nagpur	General Hospital	All Purpose
194	Maharashtra	Nagpur	Govt Indira Gandhi Medical College and Hospital	All purpose
195	Maharashtra	Nagpur	Daga Memorial Hospital	Children maternity
196	Maharashtra	Nagpur	Govt Mental Hospital	Mental diseases
197	Maharashtra	Nagpur	Central Neurological Institute	Nero Surgery
198	Maharashtra	Nagpur	Jayneeta Pathological and Cytology Laboratory	Pathological
199	Maharashtra	Nagpur	Shri Radhakrishna Hospital and Research Centre	General Purpose
200	Maharashtra	Nagpur	Janta maternity Home and Hospital	General
201	Maharashtra	Nagpur	Lata Mangashkar Hospital	General
202	Maharashtra	Nagpur	Crescent Nursing Home and ICCU	Cardiology and Nephrology
203	Maharashtra	Nagpur	Khemka X-Ray and Ultra Sound Clinic	X-Ray and Ultrasound
204	Maharashtra	Nagpur	Matru Seva Sangh Maternity Home	Obst and Gynae
205	Maharashtra	Nagpur	Central Indira Institute of Medical Sciences	Neurology
206	Maharashtra	Nagpur	Nagpur Neurological Research Centre	CT Scan
207	Maharashtra	Nagpur	Laxmi Narayan Institute of Technology	Pathology
208	Maharashtra	Nagpur	Central India Institute of Medical Sciences 88/2 Bajaj Nagar	Heart and Cancer
209	Maharashtra	Nagpur	Mure Memorial Hospital	General
210	Maharashtra	Mumbai	Bombay Hospital & Research Centre, 12 Marine Lines	Heart, Cancer, Renal and Total Hip/Knee joint replacement.
211	Maharashtra	Mumbai	KEM Hospital, Parel	Heart, Cancer and Renal
212	Maharashtra	Mumbai	Mangal Anand Hospital	All Purpose
213	Maharashtra	Mumbai	JJ Hospital	All Purpose
214	Maharashtra	Mumbai	St Geroge Hospital	All purpose
215	Maharashtra	Mumbai	GT Hospital	All purpose
216	Maharashtra	Mumbai	Cama and Albless Hospital	Maternity Cases
217	Maharashtra	Mumbai	NM Mental Hospital	Mental Cases
218	Maharashtra	Mumbai	LTG Hospital	All purpose
219	Maharashtra	Mumbai	BYL Nair Hospital	All purpose
220	Maharashtra	Mumbai	KEM Hospital	All purpose
221	Maharashtra	Mumbai	RG Stone Urological Research Institute Khar	Nephrology, Urology, Laser, Prostatectomy, Laparoscopic, Surgery and Lithotripsy.

222	Maharashtra	Mumbai	Tata Memorial Hospital Dr Ernest Borges Marg, Parel, Mumbai	Cancer
223	Maharashtra	Mumbai	Jaslok Hospital and Research Centre 15, Dr. DG Deshmukh Marg	Heart Cancer, Renal and Prostate Surgery (TRUP)
224	Maharashtra	Mumbai	Cumballa Hiss Hospital Heart Institute, 95 August Kranti marg	Heart
225	Maharashtra	Mumbai	Mahatma Gandhi Missions New Bombay Hospital, Vashi	All Purpose
226	Maharashtra	Mumbai	Inlaks General Hospital, Chembur	General Purpose
227	Maharashtra	Mumbai	Holy Spirit Hospital, Andheri	General Purpose
228	Maharashtra	Mumbai	Specialty Ranbaxy Ltd	Diagnostics
229	Maharashtra	Mumbai	Clinical Diagnostic Centre	Radiology, CT, MRI
230	Maharashtra	Mumbai	Bai Jerbai Wadia Hospital, Parel	General and specialised in pediatrics
231	Maharashtra	Mumbai	Nowrojee Maternity Hospital	General and specialised
232	Maharashtra	Mumbai	Smt. Susheela Rani Ben R	Cardiology
233	Maharashtra	Mumbai	Shroff Eye Clinic N Subhash Road	Eye
231	Maharashtra	Mumbai	Guru nanak Hospital, Bandra (East)	General purpose
232	Maharashtra	Mumbai	SL Raheja Hospital, Mahim	Specialised procedures
233	Maharashtra	Mumbai	Shroff Eye Clinic N Subhash Road	Eye
234	Maharashtra	Mumbai	Guru Nanak Hospital	General Purpose
235	Maharashtra	Mumbai	SL Raheja Hospital, Mahim	specialised procedures
236	Maharashtra	Mumbai	Radhbai Watumul global Hospital, Mahim	General and specialised in Chest
237	Maharashtra	Mumbai	Karuna Hospital, Borivali (W)	General Purpose
238	Maharashtra	Mumbai	Mangal Anand Hospital Chembur	General Purpose
239	Maharashtra	Mumbai	NM Medical Centre, Ram Bai Road	Diagnostic – General and specialised
240	Maharashtra	Mumbai	VT shah Diagnostic Centre, Dr. Ambedkar road	Diagnostic – General and specialised
241	Maharashtra	Mumbai	Sterling Imaging Centre, Worli	Specialised diagnostics
242	Maharashtra	Mumbai	Andheri Pathological Lab	Diagnostic General
243	Maharashtra	Mumbai	Nirman High Tech diagnostic Centre, Malad Kandivali (west)	Specialised imaging
244	Maharashtra	Mumbai	Ashwani Laboratory, Andheri	Diagnostic – General and specialised
245	Maharashtra	Pune	Ruby Hall clinic, Grant Medical foundation 40, Sassoon Road PB No – 70	Hear Cancer, Real, Prostate Surgery (TRUP) and
246	Maharashtra	Pune	Jehangir Nursing Home 32, Sassoon Road	Heart and Cancer
247	Maharashtra	Pune	NM Wadia Institute of Cardiology 32, Sassoon Road	Total Hip/Knee Joint Replacement
248	Maharashtra	Pune	Sancheti Institute for Orthopaedics and Rehabilitation 16 Shivaji Nagar	Orthopedics, Joint replacement
249	Maharashtra	Pune	Morbai Naraindas Budhrani Cancer Institute Sadhu Vaswant Medical Complex 7-9 Koregaon Park	JJ Cancer and Prostate Surgery (TRUP)
250	Maharashtra	Pune	Poona Hospital and Research Centre, 27 Sadashivpeth	Renal, Total Hip/Knee Joint replacement, Prostate surgery (TRUP) and Acute Phase Management of Stroke (CVA)
251	Maharashtra	Pune	Maharashtra Medical Foundation, Hjoshi Hospital	General Purpose
252	Maharashtra	Pune	Maharashtra Medical	General purpose

			Foundation, Ratana Memorial Hospital 968/969, Senapati Papat Road	
253	Maharashtra	Pune	Sasoon Hospital	General
254	Maharashtra	Pune	Aundh Chest Hospital	Chest
255	Maharashtra	Pune	Central Mental Hospital	Psychiatric Cases
256	Maharashtra	Pune	Sharda Clinic	Orthopedic
257	Maharashtra	Pune	Merdinova Diagnostic	CT Scan & Cardiology
258	Maharashtra	Pune	Uni Scan Centre	CT Scan
259	Maharashtra	Pune	KEM Hospital	All purpose except : MRI, Lithotripsy, Radiotherapy & Liver Transplant
260	Maharashtra	Pune	Colony Nursing Home	Obst and Gynae
261	Maharashtra	Pune	National Institute of Ophthalmology	Ophthalmology diseases
262	Maharashtra	Pune	Mediavision	Ultrasound and CST Scan
263	Maharashtra	Pune	ACT's General Hospital	All purpose
264	Maharashtra	Pune	Medivision Whole Body CT Scan	Radiological Investigation
265	Maharashtra	Pune	Sahayadri Laboratory and Diagnostic Centre	General Specialised Pathological Investigations
266	Maharashtra	Pune	Kotbhagi Hospital	All Purpose except Dental, Vascular Surgery
267	Maharashtra	Pune	Gulati Sonographic clinic	Ultrasound only
268	Maharashtra	Pune	Dr. DY Patil Medical college and Hospital Pimpri	General Purpose
269	Maharashtra	Pune	Bharathi Vidyapeeth Medical Foundations Bharathi Hosp	General Purpose
270	MP	Jabalpur	National Hospital	General purpose and specialised procedures
271	MP	Jabalpur	Jabalpur Hospital and Research Centre	General purpose and Specialised procedures
272	MP	Jabalpur	The Mannulal Jaganath Trust Hospital and Research Centre	General; Purpose and specialised diagnostic procedures
273	MP	Jabalpur	Maha Koshal Hospital	General Purpose and specialised procedures including Cardiac Surgery
274	MP	Jabalpur	Charak Diagnostic and Research Centre	Radiology and CT Scan
275	MP	Jabalpur	Hi – tech Scan Centre	Radiology and CT Scan
276	MP	Jabalpur	Bansal Blood Bank and Transfusion Services	Diagnostic and Blood bank
277	MP	Jabalpur	Sweta Diagnostic Centre	Pathological Investigations
278	MP	Jabalpur	Sanjivan Hospital and Research Centre, Ramnagar, Dhartal	General purpose treatment and diagnostic procedures
279	MP	Jabalpur	SC Gupta Memorial Near TV Tower, Katanga Jabalpur	General purpose treatment except Dental Orthopedic and Ophthalmology
280	MP	Jabalpur	Mahakoshal Hospital, Wright Town, Jabalpur	General purpose treatment (except Dental ) and specialised treatment in cardiac surgery and burn and Plastic Surgery
281	MP	Jabalpur	Havakoyr X-Ray Sonography Centre, Near Telegraph gate No – 2, Wright town	Radiographic and routine sonographic procedure
282	MP	Jabalpur	SS Sonography and Z-Ray Centre Ranjhi, Jabalpur	Routine Radiographic and Sonographic procedures
283	MP	Jabalpur	Sandhu Diagnostics, Bus Stand, Sright Town Jabalpur	OPG, X-Ray and Sonographic Procedures
284	MP	Jabalpur	Disha X-Ray and Sonography Cente, Ganjipuram Main Road	Radiographic, Sonographic and Echo Cardio graphic procedures



			Jabalpur	
285	MP	Jabalpur	Silver Oak Hospital, Silver Oak, Napier Town Jabalpur	General Purpose treatment except ENT and Dental
286	MP	Jabalpur	Marbal City Hospital and Research 21, North Civil lines, Jabalpur	General purpose and specialised treatment for laparoscopic and Dialysis.
287	MP	Jabalpur	Saxena X-Ray and Sonography Centre, Rupam Tower, Wright Town, Jabalpur	Routine Radiographic and Sonographic procedures.
288	Punjab	Jalandhar	BBC Heart Care Pruthi Hospital, 301, Lajpat Nagar	Heart
289	Rajasthan	Jaipur	Sawai Mansingh Medical College Hospital	All Purpose
290	Rajasthan	Jaipur	JK Len Hospital	All Purpose
291	Rajasthan	Jaipur	Mental Hospital	Mental Diseases
292	Rajasthan	Jaipur	TB and Chest Hospital	TB & Chest Diseases
293	Rajasthan	Jaipur	Rungta Hospital	General purpose treatment
294	Rajasthan	Jaipur	Soni Hospital	General Purpose treatment
295	Rajasthan	Jaipur	Jain Eye Hospital	Specialised Treatment for Ophthalmology
296	Rajasthan	Jaipur	Heart and General Hospital	Specialised treatment for Cardiology
297	Rajasthan	Jaipur	Laxmi Imagine and Medical Research Hospital	Specialised services for MRI and CT Scan
298	Rajasthan	Jaipur	Rajdhani Clinic and Nursing Home	Specialised Service for General Surgery
299	Rajasthan	Jaipur	KC Memorial Eye Hospital	Specialised treatment for Ophthalmology
300	Rajasthan	Jaipur	Urology and medical Care Centre	Urology
301	Rajasthan	Jaipur	Sharda Nursing Home	Ophthalmology
302	Rajasthan	Jaipur	Shri Amar Jain Medical Relieve Society	General Purpose Treatment and Diagnostic Procedures
303	Tamilnadu	Chennai	Apollo Hospitals 21, Greams Lane (Off Greams Road)	Heart, Cancer, Renal and total Hip/Knee Joint replacement and Prostate Surgery (TRUP)
304	Tamilnadu	Chennai	Sri Chennai Scan and Research Centre	CT Scan, Doppler
305	Tamilnadu	Chennai	Ehrlich Laboratory	Diagnostic Procedures
306	Tamilnadu	Chennai	Bharat Scans	CT Radiology
307	Tamilnadu	Chennai	Arma Clinical Services and Hospital	Diagnostic Procedures
308	Tamilnadu	Chennai	RSRM Hospital	
309	Tamilnadu	Chennai	Institute for Obst and Gynae	Maternity
310	Tamilnadu	Chennai	Institute for Rehabilitation	Rehabilitation
311	Tamilnadu	Chennai	Arignar Anna Govt Hospital	
312	Tamilnadu	Chennai	Dr. Agarwals Eye Hospital	
313	Tamilnadu	Chennai	The Madras Medical Mission Unit : Institute of Cardio Vascular Diseases, 4 A Dr JJ Nagar Mogappair	Heart
314	Tamilnadu	Chennai	Malar Hospital 52, 1 <sup>st</sup> Main road Mylapore	Heart, Renal and Prostate Surgery (TRUP)
315	Tamilnadu	Chennai	Trinity Acute Care Hospital 33, Desikan Road Mylapore	Heart, Renal Transplant/Dialysis and Prostate Surgery (TRUP)
316	Tamilnadu	Chennai	RG Stone Urological Research Institute	Urology and Lithotripsy
317	Tamilnadu	Chennai	General Hospital	All Purpose
318	Tamilnadu	Chennai	Stanley Hospital	All Purpose
319	Tamilnadu	Chennai	Rayapethen Hospital	All Purpose
320	Tamilnadu	Chennai	Woman and Children Hospital	All Purpose
321	Tamilnadu	Chennai	Kasturba Gandhi Hospital	Women and Child Diseases
322	Tamilnadu	Chennai	Institute of Mental Health	Mental Diseases
323	Tamilnadu	Chennai	Institute of Child Health	

324	Tamilnadu	Chennai	TB Sanatorium, Tambaram	Pediatric
325	Tamilnadu	Chennai	TTB Hospital, Otteri	Tb and Chest diseases
326	Tamilnadu	Chennai	Institute of Thoreic Medical	Tb and Chest Diseases
327	Tamilnadu	Chennai	Artificial Limbs Centre	Orthopedic
328	Tamilnadu	Chennai	Peripheral Hospital	General Purpose
329	Tamilnadu	Chennai	Dental Medical Cell	Dental
330	Tamilnadu	Chennai	Ophthalmology Hospital	Ophthalmology Treatment
331	Tamilnadu	Chennai	KJ Hospital Pvt Ltd	All Purpose
332	Tamilnadu	Chennai	CSI Rainy Hospital	General Purpose Treatment & Diagnostic Procedure
333	Tamilnadu	Chennai	National Hospital	General Purpose Treatment & Diagnostic Procedure
334	Tamilnadu	Chennai	CSI Kalyani Hospital	General Purpose Treatment & Diagnostic Procedure
335	Tamilnadu	Chennai	Andhra Mahila Sewa	General Purpose Treatment & Diagnostic Procedure
336	Tamilnadu	Chennai	Voluntary Health Services	General Purpose Treatment & Diagnostic Procedure
337	Tamilnadu	Chennai	Public Health Care	General Purpose Treatment & Diagnostic Procedure
338	Tamilnadu	Chennai	Shifa Hospital & Research Centre	General Purpose Treatment & Diagnostic Procedure
339	Tamilnadu	Chennai	Shri Chennai Scan and Research Centre	CT Scan, Ultrasound & ECG
340	Tamilnadu	Chennai	Sir Rama Chandra Hospital	General Purpose
341	Tamilnadu	Chennai	Moti Hospital	General and specialised
342	Tamilnadu	Chennai	Hande Hospital	General Purpose
343	Tamilnadu	Chennai	Sugam Hospital	General Purpose
344	Tamilnadu	Chennai	Balaji Hospital Pvt Ltd	General Purpose
345	Tamilnadu	Chennai	Vijaya Heart Foundation	Cardiac and Cardiothoracic Procedures
346	Tamilnadu	Chennai	KHM Hospital Hospital	General and specialised
347	Tamilnadu	Chennai	Rigid Hospital	Specialised in Gastroenterology
348	Tamilnadu	Chennai	Billroth Hospital	General and specialised incl Neurosurgery and Orthopedics
349	Tamilnadu	Chennai	Sri Devi Hospital	General purpose
350	Tamilnadu	Chennai	Nagmani Hospital	General Purpose
351	Tamilnadu	Chennai	Dr. Mehta Nursing Home	General Purpose
352	Tamilnadu	Chennai	Harvey Heart Hospital	Specialised in Cardiology and Cardiothoracic Surgery
353	Tamilnadu	Chennai	Kasthuri Hospital	Specialised in Laparoscopy
354	Tamilnadu	Chennai	Aswene Soundra Hospital	General and Specialised incl Orthopedics, Gastroenterology and Renal Transplant
355	Tamilnadu	Chennai	Bharathi Rajaa Hospital	General
356	Tamilnadu	Chennai	Chennai Kalippa Hospital	General and Specialised
357	Tamilnadu	Chennai	Devaki Hospital	General and Specialised
358	Tamilnadu	Chennai	Sooriya Hgospital	General and specialised
359	Tamilnadu	Chennai	Sapthagiri Diagnostic Centre	Diagnostic
360	Tamilnadu	Chennai	Sarath Diagnostic Centre	Diagnostic
361	Tamilnadu	Chennai	Arma Diagnostic Centre	Diagnostic
362	Tamilnadu	Chennai	Christian Medical College	Renal Transplantation
363	UP	Allahabad	Medical College and Hospital	General Purpose
364	UP	Allahabad	Kamala Nehru Hospital	Maternity
365	UP	Allahabad	Nazareth Hospital	General and Specialised purposes
366	UP	Allahabad	Prayag Scaning Pvt Ltd	CT Scan
367	UP	Allahabad	Pathology Clinic	Diagnostic
368	UP	Allahabad	Shri Narayan Ashram Hospital, Shivkuti, Allahabad	General Purpose treatment and Oncology
369	UP	Allahabad	Jivan Hyoti Hospital	General Purpose
370	UP	Allahabad	Vatsalya Maternity and Surgical Centre Pvt Ltd Eligin Road (Lal Bahadur Shastri Marg)	General purpose treatment

			Allahabad	
371	UP	Allahabad	Priti Hospital Panna Lal Road, Allahabad	General Purpose treatment
372	UP	Allahabad	Raj Nursing Home, Park Road, Allahabad	General Purpose Treatment
373	UP	Allahabad	Parakh Ultrasound X-Ray and Pathology, North, Malaka	X-Ray only
374	UP	Allahabad	Pragya Scanning Cente, AN Jha Marg, George Town, Allahabad	X-Ray, Ultrasonography and colour Doppler
375	UP	Allahabad	Kiriti Scanning Centre (P) Ltd	Radio Diagnostic Procedures
376	UP	Allahabad	Prayag Scanning Pct Ltd North Malaka, Opp SRN Hospital, Allahabad	CT Scan
377	UP	Allahabad	Rani Basanti Diagnostic Centre Looker Ganj, Bara Bangalia	X-Ray and Ultrasonography
378	UP	Ghaziabad	Narender Mohan Hospital	General Purpose
379	UP	Ghaziabad	Santosh Medical and Dental College	General Purpose
380	UP	Ghaziabad	Yashoda Hospital and Research Centre	General Purpose
381	UP	Kanpur	Medical College and Hospital	General Purpose
382	UP	Kanpur	Regency Hospital Ltd A2 Sarvodaya Nagar	Heart and Total Hip/Knee Joint Replacement
383	UP	Kanpur	Sanjeevani	Pathological Investigation and Blood Bank
384	UP	Kanpur	Rattan MRI and Spinal CT	Radiology, CT, MRI
385	UP	Lucknow	Civil Hospital	General Purpose
386	UP	Lucknow	Balrampur Hospital	General Purpose
387	UP	Lucknow	KGMC	General Purpose
388	UP	Lucknow	Mahila Hospital	General Purpose
389	UP	Lucknow	Awadh Hospital and Heart Centre	Cardiology
390	UP	Lucknow	Sarkar Diagnostics	Radiology, CT Scan, MRI, USG, Color Doppler
391	UP	Lucknow	Dental Clinic, Tribeni House – 1, Nawal Kishore Road, Hazrat Ganj, Lucknow	Dental Care and Dental X-Ray
392	UP	Lucknow	Javitui Hospital, Talibagh Lucknow	Obst and Gynae, Treatment, USG
393	UP	Lucknow	Jagrani Hospital, Ring Road, Lalyanpur, Near Kuchkrail Picnic Spot Crossing, Lucknow	General Purpose Treatment
394	UP	Lucknow	KK Hospital, 87/88 Nabibullah Road, River Bank Colony, Near Suraj Kund Park, Lucknow	General Medicine and General Surgery
395	UP	Lucknow	Mother and Child Care Centre, MCC Nursing Home Opp Kalyan Giri Mandir, Hardoi Road, PO Chowk, Lucknow	Obst and Gynae and Pediatrics Surgery
396	UP	Lucknow	Diagnostic Medical Centre Pvt Ltd B-52, J Part	X-Ray, USG and Echo
397	UP	Lucknow	Nidan Diagnostic	
398	UP	Meerut	PL Sharma Hospital	All Purpose
399	UP	Meerut	Dufferin Hospital	All Purpose
400	UP	Meerut	LLRM Medical College	All Purpose
401	UP	Meerut	Jawant Rai Speciality Hospital	General Purpose and Specialised
402	UP	Meerut	Dhanvantari Jeevan Rekha Hospital	General Purpose and Specialised
403	UP	Meerut	Dr. M Prakakash Hospital and Medical Research Centre	General Purpose and Specialised
404	UP	Meerut	Meerut Scan Centre	CT & Radiology
405	UP	Meerut	Health Care Imaging Centre	CT & Radiology

406	UP	NOIDA	Metro Hospital and Heart Institute	General Purpose and Specialised procedures Cardiology
407	UP	NOIDA	Kailash Hospital and Research Centre	General Purpose and diagnostic. Diagnostic
408	UP	NOIDA	NOIDA Medicare Centre	General Purpose and Specialised procedures Cardiology
409	West Bengal	Kolkata	Cancer Centre and Welfare Home, Mahatma Gandhi Road, Thakurpukur, Kolkata – 63	Cancer
410	West Bengal	Kolkata	NRS Medical College and Hospital, Kolkata	All Purpose
411	West Bengal	Kolkata	National Medical College, Kolkata	All Purpose
412	West Bengal	Kolkata	RK Kar Medical College Hospital, Kolkata	All Purpose
413	West Bengal	Kolkata	SSKM Hospital Kolkata	All Purpose
414	West Bengal	Kolkata	Suraksha Diagnostic and Eye Research (Pvt) Ltd Kolkata	All Diagnostic Procedure Incl CT Cardio logical Investigations, Uro Dynamic and other tests.
415	West Bengal	Kolkata	Bell Vue Clinic Kolkata	All Diagnostic procedure and Day Care Except Skin, ENT and Orthopaedics
416	West Bengal	Kolkata	Clinical Laboratories Pvt Ltd, Kolkata	Investigations e.g. Clinical Pathology, Hematology, Bio-Chemistry
417	West Bengal	Kolkata	Bansal Health Care Centre	Investigations e.g. X-Ray, Ultrasound Clinical Pathology
418	West Bengal	Kolkata	Maa Durga Diagnostic Institute, Kolkata	Investigations e.g. X-Ray, Ultrasound Clinical Pathology
419	West Bengal	Kolkata	Kolkata Hearth Research Centre	All Diagnostic Procedure except CT Scan
420	West Bengal	Kolkata	Heart Care and Ultrasound Centre Kolkata	ECG and Ultrasound Only
421	West Bengal	Kolkata	Behala Balanda Barahamachari Hospital Kolkata	All Purpose
422	West Bengal	Kolkata	Nightangale Diagnostic Centre, Kolkata	All Diagnostic procedures except Orthopaedics
423	West Bengal	Kolkata	Dr. Nihar Munshi Eye Foundation, Kolkata	Ophthalmology incl IOL
424	West Bengal	Kolkata	Jalpriya Hospital, corporation Ltd. (Duncan Apollo), Kolkata	All Diagnostic Procedures and Laparoscopic Surgery
425	West Bengal	Kolkata	Lumbini Park Mental Hospital and Clinic	Mental Diseases
426	West Bengal	Kolkata	Wockhardt Medical and Research Centre	CT, Cardiology, Urology, Laparoscopic Surgery
427	West Bengal	Kolkata	Ramakrishna Mission Seva Prathistham	General Purpose
428	West Bengal	Kolkata	BM Birla Heart Research Centre, 1/1 National Library Avenue Kolkata – 27	Heart
429	New Delhi	New Delhi	Jeevan Mala Hospital 67/1, New Rohtak Road New Delhi – 110 005	General Medicine, ENT Microbiology, Orthopaedics, General Surgery, Ophthalmology, Obstetrics and Gynaecology, Paediatrics, Dermatology, Pathology and Radio Diagnosis.
430	New Delhi	New Delhi	G.M. Modi Hospital and Research Centre, Press Enclave Road, Saket, New Delhi – 110 017	General Medicine, General Surgery, Obstetries and Gynaecology and Paediatrics.
431	Uttar Pradesh	Noida	Bhardwaj Hospital, NH-I, Sector-29, Noida, Uttar Pradesh – 201 301	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychinaty, Paediatrics, Dermatology, Pathology and Radio diagnosis.

432	Uttar Pradesh	Noida	Fortis Hospital, B-22, Sector-62, Noida, Uttar Pradesh – 201 301	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
433	Uttar Pradesh	Noida	Prakash Hospital Pvt. Ltd., D-12, Sector-33, Noida, Uttar Pradesh-201 301	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
434	New Delhi	New Delhi	Mahajan Imaging Centre, K-18, Hauz Khas, New Delhi-16	Radio diagnosis imaging CT Scan and MRI
435	Uttar Pradesh	Meerut	Metro Hospital and heart Instigate, 47/g5, Boundary Road, Lal Kurti, Meerut - 205001	Medicine: cardiology (non-invasive)
436	Madhya Pradesh	Bhopal	RK Hospital and Reasearch Centre 226, C-Sector, Indrapuri, Raisen Road, Bhopal, MP-462021	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
437	Madhya Pradesh	Bhopal	Hajela Hospital Geetanjali Complex, Kotrasulatabad, Bhopal, MP-462 003	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
438	Madhya Pradesh	Bhopal	Chirayu Health and Medicare P. Ltd. 6 Malipura Peergate, MP – 462 001	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
439	Madhya Pradesh	Bhopal	Venus Scan and Research Centre 41 Malviya Nagar, Opp. Apex Bank Bhopal – 462 003	Pathology and Radio Diagnosis.
440	Madhya Pradesh	Bhopal	Bhopal Medical Centre 203 Zone-I, MP Nagar Bhopal-011	Pathology and Radio Diagnosis.
441	Madhya Pradesh	Jabalpur	Mahakoshal Hospital, Opposite Wright, Town Stadium Gate No 3, Jabalpur-482 002	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
442	Madhya Pradesh	Jabalpur	JK Hospital, 2006 Wright Town, Behind Bus Stand, Jabalpur-482 002	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
443	Madhya Pradesh	Jabalpur	Shweta Diagnostic Centre Suyily Depot Cantt., Jabalpur-001	Microbiology and Pathology.
444	Uttar Pradesh	Kanpur	Kanpur Medical Centre Pvt. Ltd. 120/500 (24), Lajpat Nagar, Kanpur-208 005	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery, Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
445	Uttar Pradesh	Kanpur	Tulsi Hospitals Ltd. 14/116-A, Civil Lines, Kanpur-208 005	General Medicine, ENT Orthopaedics, Dental, Microbiology, General Surgery,

				Psychiatry, Paediatrics, Dermatology, Pathology and Radio diagnosis.
446	Uttar Pradesh	Kanpur	Deys Hospital 491, Kazikhera Lal Bangla, Kanpur – 208 007	General Medicine, ENT General Surgery, Ophthalmology, Obstetrics and Gynecology, Paediatrics and Radio Diagnosis.
447	Uttar Pradesh	Kanpur	Escorts Heart Centre Ltd, 117/H-2/414-A, Pandu Nagar, Kanpur-208 005	-----
448	Uttar Pradesh	Agra	Pankaj Scanning and Pathology Research Centre, E-14151615/1, A-13 14, Shopping Arcade, Sadar Bazar, Agra, UP-282 001	Pathology and Radio Diagnosis.
449	Uttar Pradesh	Varanasi	Kashi Netralaya, Dr. R Singh 27A, Bhuvaneshvar Nagar Colony, Orderly Bazar, Varanasi-221 002	Ophthalmology.
450	Haryana	Faridabad	Sun Flag Hospital, Sector-16A, Faridabad Haryana-121002	General Medicine, Orthopaedics, Microbiology, General Surgery, Blood Bank, Obstetrics & Gynaecology, Paediatrics, Pathology and Radio Diagnosis.

**LIST OF HOSPITALS RECOGNISED BY RAILWAY FOR  
EMPANELMENT WITH EX-SERVICEMEN CONTRIBUTORY HEALTH SCHEME**

SI No	City	Zone	Hospital/Diagnostic Centre	Purpose for which recognised
1	2	3	4	5
1	Guntakal	SCR	NMDC/Ranjitpura, Guntakal	General Purpose
2	Hyderabad	SCR	Bibi Cancer Hospital, Hyderabad	Cancer Tt
3	Hyderabad	SCR	Global Hospital, Hyderabad	Gastroenterology & Lap
4	Hyderabad	SCR	Care Hospital, Hyderabad	Cardiac Surgery & Cardiology
5	Hyderabad	SCR	Indo American Cancer, Hyderabad	Cancer
6	Vijayawada	SCR	City Cardiac Research Centre, Vijayawada	Heart Speciality
7	Vishakhapatnam	SCR	Apollo Hospital, Vishakhapatnam	Cardiac
8	Guwahati	NF	Guwahati Neurological Centre, Guwahati	Neurology
9	New Delhi	NR	North Point Hospital, Jangpura, New Delhi	Urinary Lithiasis
10	New Delhi	NR	PSRI, Delhi	Renal Treatment
11	Ahmedabad	WR	Instt. Of Kidney Diseases, Ahmedabad	Renal
12	Rajkot	WR	Nathalal Parikh Ca Instt., Rajkot	Cancer
13	Ambala	NR	Aneja Hospital, Ambala Cantt	Lap & General Surgery
14	Ambala	NR	MK Dutta Hospital, Ambala Cantt	General
15	Kalka	NR	JN Shori Hospital, Kalka	General
16	Dhanbad	FR	RCCI Hospital, Dhanbad	General Treatment
17	Jamshedpur	SER	Tata Main Hospital, Jamshedpur	General
18	Naisarai	ER	Central Hospital, Naisarai	Specialised Treatment
19	Bijapur	SCR	Siber Ca. Hosp. & Rch. Centre, BZA	Cancer
20	Hubli	SCR	Karnataka Catherapy & Research Institute	Cancer
21	Cochin	SR	Cochin Port Trust/Willington Island, Cochin	General
22	Ernakulam	SR	Lissle Hospital, Ernakulam	General
23	Quilon	SR	Bishop Benzigar Quilon	Emergencies
24	Tiripunithra	SR	Vijay Kumar Meon Hospital, Tripunitha	General
25	Trivandrum	SR	PRS Hospital, Trivandrum	General Emergencies
26	Mumbai	CR	Aditya Jyot Hospital, Mumbai	Eye
27	Pune	CR	Deen Dayal Memorial Hospital, Pune	Cardiac & Emergencies
28	Bhopal	CR	Jawahar Lal Cancer Hospital, Bhopal	Cancer
29	Gwalior	CR	Birla Institute of Med Research, Gwalior	Emergencies
30	Indore	WR	Choiith Ram & Research Centre, Indore	Specially in Emergency
31	Panchgani	CR	Bel Air Sanatorium, Panchgani	Tubercuiosis
32	Bacheli	SER	NMDC Bacheli	General
33	Baraipali	SER	JMJ Hospital, Baraipali	General
34	Birmitrapur	SER	BSL Hospital, Birmitrapur SER	Emergencies
35	Cuttack	SER	Christian Hospital Bisam, Cuttack	Emergencies
36	Kirandul	SER	NMDC Hospital, Kirandul	General
37	Rourkela	SER	Ispat General Hospital, Rourkela	General
38	Talcher	SER	Nehru Shatabdi Central Hospital, Talcher	General
39	Ferozpur	NR	Francis Newton Mission Hospital, Ferozpur	Gyneac/Obstr
40	Jagadari	NR	Christian Mission Hospital, Jagadri	Specialized Treatment
41	Jagadari	NR	Lal Maternity Hospital, Jagadri	Maternity
42	Jalandhar	NR	Gurunanak Mission Hospital, Julander Cantt	Emergent Cases
43	Jalandhar	NR	Sacred Heart Hospital, Jullunder City	Heart Cases
44	Ludhiana	NR	CMC, Ludhiana	Emergent Cases

45	Ludhiana	NR	Dayanand Medical Collage, Ludhiana	General & Specialised
46	Chennai	SER	VHS Adyar, Chennai	Cancer & Neurological cases
47	Chennai	SR	Rai Memorial Centre, Chennai	Oncology Radio Therapy
48	Chennai	SR	Shankar Netralaya, Chennai	Eye
49	Kodikanal	SR	Van Allen Mission Hospital, Kodikanal Hills	General
50	Trichirapalli	SR	GVN Cancer Hospital, Trichy	Cancer
51	Agra	CR	Jai Hospital, Agra	General
52	Ghaziabad	NR	Ganesh Hospital, Ghaziabad	Emergency Cases
53	Moradabad	NR	Vivekananda Hospital, Moradabad	Superspl. Gyneac
54	Mussorie	NR	Landoure Community Hospital, Mussorie	Emergencies
55	Kasganj	NER	Christian Hospital, Kasganj	General Emergencies

**THINK IT OVER**

***“ LIFE ON EARTH IS SO SHORT; WE SHOULD MAKE  
THE MOST OF IT BY KEEPING OURSELVES WELL.”***





**IMPORTANT AFNET NUMBERS**

<b>SI No</b>	<b>Section</b>	<b>Code</b>	<b>Numbers</b>
1	OIC P & W Wing	2311	7770
2	PA to OIC P & W Wing	2311	7772/7773
3	WO i/c P & W Wing	2311	7774
4	OIC P & W Wg (SP)	2311	7775
5	OIC P & W Wg (FP)	2311	7776
6	OIC P & W Wg (DP)	2311	7777
7	WO i/c SWIFT	2311	7778
8	P & W Wg Enquiry	2311	7779
9	WO i/c ECHS	2311	7780
10	OIC Placement Cell	2311	7782
11	Placement Cell	2311	7784/7785
12	Information & Query Cell	2311	7796/7797
13	OIC R W	2311	7760
14	PA to OIC R W	2311	7762/7763
15	WO i/c R W	2311	7764/7765
16	OIC RW – I	2311	7766
17	OIC RW – II	2311	7767
18	OIC AFCAO (NEAS)	2311	7841
19	WO i/c AFCAO (NEAS)	2311	7854
20	AFCAO (NEAS Cell 0-4)	2311	7869
21	AFCAO (NEAS Cell 5 – 9)	2311	7890
22	AFGIS Enquiry	2311	6183
23	IAFBA Enquiry	2311	6193/6194

## CORRIGENDUM TO THE REVISED PENSIONARY HANDBOOK ON PBORs

### DISABILITY PENSION

1. Refer page No. 18, Note 2, the word 'at own request or' may be deleted.
2. Refer page 19, Pare 5, add the following as 'Note' :

**Note : 'Not applicable to Post – 2006 retiree as DP for them is calculated on last drawn emolument'**

### FAMILY PENSION

1. Refer page No. 32, the word 'about' may be deleted from the second last line of Note.

### WELFARE

1. Refer page No. 41, Para 4 (c), delete the whole sub-para and add the following :

**'Defence Security Corps (DSC) provides avenues for re-employment as JCOs and ORs to retiring/retired airman. The responsibility of recruiting them in DSC is entrusted to Air Force. Desirous and eligible individuals may contact Central Airmen Selection Board, Brar Square, Delhi Cantt – 110 010 and refer IAF Placement Cell website at [www.iafpc.co.in](http://www.iafpc.co.in) for application form and further details on declaration of vacancies.**

### ECHS

1. Refer page 58, Para 17, third line, the word 'Parent Polyclinic' to be replaced by 'Stn HQs'.

### APPENDIX 'E'

1. Refer page 68, D – 11, Sub – Para (e), the word 'alongwith Declaration' is to be added.

### IAFF (P) 61

1. Refer page No. 84, Para No. 21, the word 'Mrs' to be deleted.

### ANNEXURE 'A' : DETAILS OF FAMILY

1. Refer Page No. 86, SI No. 01, the word 'Mrs' to be deleted.

### FORM 'A'

1. Refer page No. 87, details of nominee, the word 'Mrs' at column No. 1 to be deleted.
2. The word '(If the other nominee is minor)' is to be deleted at column No. 3 below the Date of Birth.