14. ALL INDIA SERVICES (COMMUTATION OF PENSION) REGULATIONS, 1959

In pursuance of rule 25 of the All India Services (Death-cum-Retirement Benefits) Rules, 1958, the Central Government, after consultation with the Governments of the States concerned, hereby makes the following regulations, namely: -

1. **Short title.** - These regulations may be called the All India Services (Commutation of Pension) Regulations, 1959.

2. **Definitions.** -(1) In these regulations, unless the context otherwise requires-

(a) ‘government’ in relation to the members of the Service borne on a joint cadre, means the Joint Cadre Authority.

(b) ‘Medical Board’ means medical board set up by the Government.

(c) ‘Member of the Service’ means a member of [all India Services as defined in section 2 of the All India Services Act 1951 (61 of 1951)].

(d) ‘Retirement Benefits Rules’ means the All India Services (Death-cum-Retirement Benefits) Rules, 1958.

2(2) All other words and expressions used in these Regulations but not defined shall have the meanings respectively assigned to them in the Retirement Benefits Rules.

3. **Limit of Commutation.** - 3(1) A member of the Service shall be entitled subject to the provisions of these Regulations to commute for lump payment any portion not exceeding forty percent of the pension to which he was entitled under the Retirement Benefits Rules.

Provided that a member of the Service, against whom judicial or departmental proceeding has been instituted or a pensioner against whom any such proceeding has been instituted or continued under sub rule (1) of Rule 6 of the Retirement Benefits Rules, shall not be permitted to commute any part of his pension during the pendency of such proceeding.

Provided further that if a member of the Service retiring between the 1st day of January, 1996 and the 31st day of December, 1997 has opted for retaining the pre-revised scale of pay, the commutation of pension in such case shall be admissible in accordance with the rules and orders in force prior to the 1st day of January, 1996.

**Explanation.** - The compassionate allowance granted to a member of the Service under proviso to sub-rule (1) of rule 5 of the Retirement Benefits Rules, shall be treated as pension for the purpose of commutation under these rules.

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4 Inserted vide Notification No.11025/3/77-AIS(II) dated 06.04.1978 (GSR No.227-E dt. 06.04.1978)
3(2) Such commutation shall be subject to the following conditions namely:

(a) if the amount of annual pension is Rs.2,057 or more, not less than Rs.1,714 shall remain uncommuted, and

(b) if the amount of annual pension is less than Rs.2,057, not more than Rs.343 shall be commuted, and not less than Rs.1,371 shall remain uncommuted:

Provided that in calculating the amount of annual pension for the purposes of clauses (a) and (b) of this sub-regulation, there may be added to it the uncommuted portion of any permanent extraordinary pension granted to a member of the Service.

4. Commutation of anticipatory pension.- Subject to the provisions of these regulations a member of the Service shall be entitled to commute an anticipatory pension that may be granted to him under rule 27 of the Retirement Benefits Rules. The commuted value of such pension shall be paid to him only after obtaining from him a declaration in the form set forth in Schedule "A"

5. Application for commutation.- An Application for commutation of pension shall be addressed to the Government. On receipt of an application for commutation of pension, the Government shall transmit to the applicant a copy of the Account Officer's Certificate of the lump sum payable on commutation in the event of his being reported by a Medical Board to be a fit subject for commutation and shall at the same time instruct him to appear for examination before the medical board within three months of its order or if he has applied for commutation in advance of the date of his retirement, within three months of that date but in no case, earlier than the actual date of retirement.

5(2) The intimation for medical examination shall constitute the administrative sanction to commutation but shall lapse if the medical examination does not take place within the period prescribed in the sanctioning order. If the applicant does not appear for examination before the said medical board within the prescribed period the Government may at its discretion, renew the administrative sanction for a further period of three months without obtaining a fresh application for commutation of pension.

5(3) the applicant may withdraw his application by a written notice to the Government at any time before the date of the medical examination:

Provided that if the medical board directs that his age for the purpose of commutation shall be assumed to be greater than the actual age, the applicant may withdraw application by written notice dispatched within two weeks from the date on which he receives information of the revised sum payable on commutation or if the sum is already stated in the sanctioning order, within two weeks from the date on which he receives intimation of the finding of the medical board and if the applicant does not withdraw his application in writing within the period of two weeks prescribed above, he shall be assumed to have accepted the sum offered.

5(4) If the applicant requests within the prescribed period that the amount to be commuted might be reduced, this request is tantamount to a withdrawal of his application for commutation; such a request shall be treated as a new application.
5(5) Subject to the provision contained in regulation 8 and to the withdrawal of an application under the proviso to sub-regulation (3), the commutation shall become absolute, i.e. the title to receive the commuted value shall accrue), on the date on which the medical board signs the medical certificate.

7Note.- A pensioner whose application for the commutation of a portion of his pension is expressed as a percentage or fraction of the total pension admissible to him and is allowed in the first instance to commute such percentage or fraction of his anticipatory or provisional pension shall, in event of his final pension being more than his anticipatory or provisional pension, be allowed to commute a further sum, without producing a fresh certificate of medical examination, so as to make the commuted amount equal to the specified percentage or fraction of the amount of pension as finally sanctioned. In such cases, commutation as finally sanctioned shall also take effect from the date of original commutation of the anticipatory or provisional pension and the amount of residual pension shall also be readjusted from the same date.

6. Second medical examination. - Where a pensioner who applied for commutation has once been rejected on the recommendation of the medical board as not being a fit subject for commutation or after he has once declined to accept commutation on the basis of an addition of years to his actual age recommended by such board, he may be allowed to present himself once more before a medical board of medical examination with a view to the revision of the original finding at his own cost, provided that an interval of not less than one year shall elapse between the date of the first medical examination and the date of such a subsequent examination. The medical board shall in such a case be furnished with a copy of the report of the medical board which had previously examined the pensioner.

7. Payment of commuted value. - 7(1) Payment of the commuted value shall be made to the applicant as expeditiously as possible, but in the case of a member of the Service (hereinafter referred to as impaired members) in whose case the medical board has directed that his age for the purpose of commutation shall be assumed to be greater than his actual age, no payment shall be made until either a written acceptance of the commutation has been received or the period within which the application for commutation may be withdrawn has expired. The reduction in the amount of pension on account of commutation shall become operative from the date of receipt of the commuted value of pension by the pensioner or three months after the issue of the authority asking the pensioner to collect the commuted value of the pension by the Accountant General, whichever is earlier. This date will be entered in both halves of the pension payment order by the treasurer under intimation to the Accountant General.

7(2) The lump sum payable on commutation shall be calculated in accordance with the table given in Schedule B.

8\[ \] Substituted w.e.f.11.07.1975 vide MHA Notification No.11025/1/77-AIS(II) dated 30.08.1977(GSR No. 1197 dt.17.09.1977)

9\[ \] Substituted by MHA Notification No.28/2/62-AIS(II) dated 25.06.1973
Explanation.- For the purpose of this Regulation the age in the case of the impaired member shall be assumed to be such age not being less than the actual age, as the medical board may direct.

7(3) In the event of the table of present values applicable to an applicant having been modified between and the date on which the commutation is due to become absolute payment shall be made in accordance with the modified table but it shall be open to the applicant if the modified table is less favourable to him than that previously in force to withdraw his application by notice in writing dispatched within fourteen days of the date on which he receives notice the date of administrative sanction to commutation of the modification.

7(4) If the pensioner dies on or after the date on which the commutation became absolute but before receiving the commutation value, this value shall be paid to his legal heirs.

7-A Special provision for commutation.- (1) Notwithstanding anything contained in regulations 5 and 6, if a pensioner, who-

10(a) retired under sub-rules (1), (2) and (2A) of rule 16 of the Retirement Benefits Rule, or

(b) is retired by Central Government under sub-rule (3) of rule 16 of the Retirement Benefits Rules, or

(c) retired under sub-rule (1) of rule 5A of the Retirement Benefits Rules and elected for monthly pension and retirement gratuity.

makes an application for commutation of pension within one year of the date of his retirement, shall not be subjected to medical examination under these regulations and the commutation shall become absolute (i.e. the title to receive the commuted value shall accrue) on the date on which the application for commutation is received by the State Government;

7A(2) The provisions contained in sub-regulations (1) to (4) of regulation 7 shall apply mutatis, mutandis to commutation of pension under sub-regulation (1) of this regulation.

7A(3) A pensioner shall have no option to withdraw the application made under sub-regulation (1).

8. Cancellation of sanction for commutation in certain cases.- If the applicant makes any statement found to be false within his knowledge or wilfully suppresses any material fact in answer to any question, written or oral, put to him in connection with his medical examination, the Government may cancel the sanction at any time before payment is actually made and such a statement or suppression may be treated as grave misconduct for the purpose of rule 3 of the Retirement Benefits Rules.

10 Substituted vide Notification No.11025/4/78-AIS(II) dated 25.6.79(GSR No 941 dt.14.7.79)
9. **Miscellaneous.**—9(1) The sanction and payment of commuted value and matters incidental thereto shall be regulated by such procedural instructions as may be issued from time to time by the Central Government.

9(2) Application for commutation, administrative sanction and report of the medical board shall be made in such form as may be by prescribed by the Central Government.

9(3) Any fees payable to the medical board for medical examination in connection with commutation of pension shall be borne by the member of the Service desiring such commutation.
SCHEDULE A
(Regulation 4)

Form of Declaration

Whereas the President of India through ..........(here state the designation of the officer sanctioning the commutation) (hereinafter called the Government) has consented, provisionally, to advance to me the sum of Rs..............being the commuted value of part of the anticipatory pension in anticipation of the completion of the enquires necessary to enable the Government to find the amount of my pension and consequently the part of the pension that may be commuted, I hereby acknowledge that in accepting the advance, I am fully conversant that the commuted value now paid is subject to revision on the completion of the necessary formal enquires and I have no objection to such revision and I am aware that the provisional amount now to be paid to me as the commuted value of the part of anticipatory pension may exceed the amount to which I may be eventually found entitled. I further promise and undertake to refund and pay on demand any amount advanced to me in excess of the amount to which I may be eventually found entitled and in default the Government shall be at liberty to have the said excess amount realised from the subsequent pension payable to me.

Witness to signature.

(with address)

1..................

2..................

Signature..............

Station..............

Date.................
### SCHEDULE B

**Regulation 7 (2)**

*Commutation Table*

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<th>Age on the Next Birth day</th>
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**Notes:**
- **11** This is based on rate of interest of 3 per cent per annum.
- **12** These are based on a rate of interest of 3.5 per cent per annum.
- **13** This is based on rate of interest at 4 per cent per annum introduced vide MHA Notification No.1/2/59-AIS(III) dated 25.11.1959, No.28/2/62-AIS(II) dated 25.06.1963 and 28/1/63-AIS(II) dated 01.04.1964 and amended vide Notification No.28/1/63-AIS(II) dated 22.06.1964.
- **14** This table is based on rate of interest of 4.75% per annum and the improvement in the mortality rate as indicated by the experience of posted Life Insurance holders, vide DP&AR Notification No.28/1/71-AIS(II) dated 05.02.1972.
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FORM A

Commutation of Pension under A.I.S. Commutation of Pension Regulation, 1959

PART I-Form of Application

[Vide Regulation 9 (2)]

I....................desire to commute Rs.............. P. of my 15 pension of Rs.............. P....... @month. I certify that I have answered correctly each and all of the questions below:

Signature..............

Place..............

Designation............

Date..............

Address..............

Questions Answers

1. What is the date of your birth? ..................................

2. How much of your pension do you wish to commute?.....................

3. (a) Have you already commuted a portion of your pension? If so, give particulars........

   (b) Has any application from you for commutation of pension ever been rejected,
or have you ever accepted/declined to accept commutation of pension on the basis of an addition of years to your actual age recommended by the medical authority? If so, give particulars

4. From what treasury do you draw or propose to draw your pension and commutation money? ..............................

5. If you are already drawing your Pension quote the number of your Pension Payment Order ...........................................................

6. From what date approximately do you wish this commutation to have effect?  See Regulation 5 of the A.I.S.(Commutation of Pension) Regulations, 1959 ............................

7. State the amount of provident fund money (including any non-refundable withdrawals) and the amount of death-cum-retirement gratuity received by you ..........

---

15 The class of pension (superannuation, retiring, invalid compensation) should be stated and if the amount is not known, a suitable modification should be made in the Form.

16 The portion of the pension to be commuted should consist of whole Rupees or of rupees and a multiple of five naye paise. In case of anticipatory pension, the pensioner may, if he so desires, indicate his intention to commute the maximum amount in the event of his final pension being more than anticipatory pension. In such case, the amount proposed to be commuted may, alternatively be expressed in terms of a percentage of full pension within the maximum permissible limit.

17 This is without prejudice to the discretion of the sanctioning authority.
8. Name the Accounts Officer who authorised the payment of provident fund money (including any non-refundable withdrawal) and death-cum-retirement gratuity to you...

9. At what station (near the area in which you are ordinarily resident) would you prefer your medical examination to take place? ................

Place................  Signature ................
(here enter the designation and address of the Account Officer)

Date ............
Forwarded for report to ........

Place ................  Signature ................
Date ............
Designation .............

PART II

Forwarded to .............
(here enter the designation and address of the sanctioning authority)

1. % Sum Payable if the commutation becomes absolute before the applicant's next birthday which day falls on

   Years
   DO  DO
   1. Year, i.e..............................................................
       DO  DO
   2. Year, i.e..............................................................
       DO  DO
   3. Year, i.e..............................................................
       DO  DO
   4. Year, i.e..............................................................
       DO  DO
   5. Year, i.e..............................................................
       DO  DO

2. Sum Payable if the commutation becomes absolute after the applicant's next birthday but before his next birthday but one.

Year
DO  DO
1. Year, i.e..............................................................
   DO  DO
2. Year, i.e..............................................................
   DO  DO
3. Year, i.e..............................................................
   DO  DO
4. Year, i.e..............................................................
   DO  DO
5. Year, i.e..............................................................
   DO  DO
3. The sum payable will be charged on:
   Central Revenues
   The Government of.........(State Government)
   Rs.......... 
   Station.........
   Dated.......... 

2. Subject to the medical authority’s recommending commutation, the lump sum payable will be as stated below:-

% On the basis of normal age i.e.................................Rs.

   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus

   PART II

On the basis of normal age i.e. ................Rs.
   plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus
   Years............................Rs.......................
   Plus

Signature and Designation of Accounts Officer.
PART III

Administrative sanction of.................is accorded to the above commutation. A certified copy of paragraph 2 of Part II of the Form has been forwarded to the applicant in Form B.

Place..............

Dated..............

Signature..............

Designation..............

Forwarded 18 to..........................................................

(here enter the designation and address of the Chief Administrative Medical Officer).

..........................in ...........original on(Date)..................with the request that he will arrange for the medical examination of the applicant by the proper medical authority as early as possible within three months from the .....................(here enter the date) but not earlier than the(here enter the date of retirement).....................and inform the applicant direct in sufficient time where and when he should appear for the examination.

19 The next birthday of the applicant falls on..............and his medical examination may be arranged before that date but within the period prescribed in the sanctioning order.

(Signature and designation of the sanctioning authority)

FORM B

[Vide Regulation 9(2)]

PART I

Subject to the medical authorities recommending commutation and the conditions prescribed in Part II of this Form, the lump sum payable will be stated below:

Sum payable if the commutation becomes absolute before the applicant's next birthday which fall on.

..........................................................
Sum payable if the commutation becomes absolute after the applicant's next birthday but before his next birthday but one.

Years
Do  DO
1. Year, i.e.................................................................
DO  DO
2. Year, i.e.................................................................
DO  DO
3. Year, i.e.................................................................
DO  DO
4. Year, i.e.................................................................
DO  DO
5. Year, i.e.................................................................
DO  DO

On the basis of normal age i.e...........Rs.
plus
Years
Years  Rs. ..................
Plus
Years  Rs. ..................
Plus
Years  Rs. ..................
Plus
Years  Rs. ..................
Plus
Years  Rs. ..................

On the basis of normal age i.e. ............Rs.

plus
Years  Rs. ..................
Plus
Years  Rs. ..................
Year                      Rs. ...........................
Plus
Year                      Rs. ...........................
Plus
Year                      Rs. ...........................

Station………………….                                                 Signed  ...............  

Date…………………….

Signature and Designation of Accounts Officer.

PART II

The commutation for lump payments of the pension of.............is administratively sanctioned on the basis of the report of the Accounts Officer contained in Part I above. The table of present values, on the basis of which the calculation in The Account Officer's report have been made, is subject to alteration at any time without notice, and consequently they are liable to revision before payment is made. The sum payable will be the sum appropriate to the applicant's age on his birthday next after the date on which the commutation becomes absolute or, if the medical authority directs that years shall be added to that age, to the consequent assumed age.

2. The ..........................  
(here enter the designation and address of the Chief Administrative Medical Officer). has been requested to arrange for the medical examination and inform Shri..................direct where and when he should appear for the examination. He should bring with him the enclosed Form C, with the particulars required in Part I completed except for the,

Signature..................

Station....................

Date.......................  

Signature...................

Designation..............

To

..........................

..........................

(The name and address of the applicant)
FORM C

[Please see regulation 9(2)]

Medical Examination by the ................................................

(here enter the medical authority)

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

PART I

Statement to be filled by the applicant for commutation of a portion of his pension.

The applicant must complete this Statement prior to his examination by the (here enter the medical authority) and must sign the declaration appended thereto in the presence of that authority.

1. State your name in full (in block letters)
2. State place of birth
3. State your age and date of birth.
4. Furnish the following particulars concerning your family:

<table>
<thead>
<tr>
<th>Father’s age if living and state of health</th>
<th>Father’s age at death and cause of death</th>
<th>Number of brothers living, their age and state of health</th>
<th>Number of brothers dead, their ages and cause of death</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>2.</td>
<td>3.</td>
<td>4.</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>-----------------------------------------</td>
<td>-------------------------------------------------------</td>
<td>-------------------------------------------------------</td>
</tr>
<tr>
<td>Mother’s age if living and state of health</td>
<td>Mother’s age at death and cause of death</td>
<td>Number of sisters living, their ages and state of health</td>
<td>Number of sisters dead, their ages and cause of death</td>
</tr>
<tr>
<td>5.</td>
<td>6.</td>
<td>7.</td>
<td>8.</td>
</tr>
</tbody>
</table>

5. Have you ever been examined?

(a) For Life Insurance, or/and
(b) by any Government medical officer or State Medical Board, Civil or State? If so, state details and with what result?

6. Have you ever been granted leave on medical certificate in the previous five years? If so, state period of leave and nature of illness?

7. Have you ever:

(a) had small pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood. Asthma, inflammation of

---

20 DPAR letter No. 11025/1/80-AIS(II) dated 10.06.1980
lungs, pleurisy, heart disease, fainting, attacks, rheumatism, appendicitis, epilepsy, insanity or other disease of the ear, syphilis, gonorrhoea or, (b) had any other disease or injury which required confinement to bed or medical or surgical treatment or (c) undergone any surgical operation, or (d) suffered from any illness, wound or injury sustained while on active service during war?

8. Have you Hernia?

9. Have you varice-cele, varicose veins or piles?

10. Is your vision in each eye good?

11. Is your hearing in each ear good?

12. Have you any congenital or acquired malformation, defect or deformity?

13. Is there any further matter concerning your health not covered by the above questions such presence of albumen or sugar in the urine marked increase or decrease in your weight in the last three years or being under treatment of any doctor within the last three months and the nature of illness which such treatment was taken?

Declaration by the Applicant

(To be signed in presence of the medical authority)

I declare all the above answers to be to the best of my belief, true and correct.

I will fully reveal to medical authority or circumstances within my knowledge that concern my health & fitness.

I am fully aware that by wilfully making a false statement or concealing relevant fact I shall incur the risk of losing the commutation I have applied for and of having my pension withheld or withdrawn under Rule 3 All India Services (DCRB) Rules, 1958.

Signed in presence of..............

Applicant's signature..............

Signature and designation of Medical Authority
PART II

(To be filled by the examining medical authority)

General Examination-

1. Apparent age

2. Height

3. Weight

4. Pulse
   (a) Sitting
   (b) Standing

   What is the character of pulse?

5. Blood pressure
   (a) Systolic
   (b) Diastolic

6. Is there any evidence of disease of the main organs-
   (a) Heart
   (b) Lungs
   (c) Liver
   (d) Spleen
   (e) Kidney

7. Investigations-
   (i) Urine
   (ii) Blood
   (iii) X-Ray Chest
   (iv) E.C.G. (State specific gravity)

8. Has the applicant a hernia? If so, state the kind and if reducible.

9. Describe any scars of identifying marks.

10. Any additional information.

PART III

We have carefully examined Shri/Shrimati/Kumari........................................ and are of opinion that:-

He/She is in good bodily health and has the prospect of an average duration of life.

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21 DPAR letter No. 11025/2/80-AIS(II) dated 10.06.1980
OR

He/She is not in bodily health and is not a fit subject for commutation.

OR

Although he/she is suffering from..................................He/She is considered a fit subject for commutation but his/her age for the purpose of commutation i.e. the age next birthday should be taken to be........................................... (in words) years more than his/her actual age.

Station......................

Dated......................

(Signature and designation of the member examining Medical Board).

FORM D

FORM OF APPLICATION FOR COMMUTATION OF A FRACTION OF SUPERANNUATION PENSION WITHOUT MEDICALEXAMINATION WHEN APPLICANT DESIRES THAT THE PAYMENT OF THE COMMUTEDVALUE OF PENSION SHOULD BE AUTHORISED THROUGH THEPENSION PAYMENT ORDER

(To be submitted in duplicate 3 months before the date of retirement)

PART I

To

The Chief Secretary to the Government of.........................

Subject:- Commutation of pension without medical examination.

Sir,

I desire to commute a fraction of my pension in accordance with the provisions of the AIS (Commutation of Pension) Regulations 1959. The necessary particulars are furnished below:

1. Name in block letters: ...........................................

2. Father's Name (and also husband's name in the case of female member of the Service) ...........................................

3. Designation: ...........................................

4. Name of office/Department/Ministry in which posted ...........................................
5. Date of Birth (by Christian era)          .. .. ..

6. Date of retirement on superannuation or on the expiry of extension in service  .. .. ..

7. Fraction of superannuation pension proposed to be commuted (Maximum amount of pension that can be commuted is 40%)  .. .. ..

8. Disbursing authority from which pension is to be drawn after retirement.
   (a) Treasury/sub-Treasury.  (Name and complete address of the Treasury/Sub-Treasury to be indicated).
   (b) (i) Branch of the nationalised bank with complete postal address.
         (ii) Bank Account No. to which monthly pension is to be credited each month.
   (c) Designation and address of the Account Officer.  (Applicable in a case where the pension is proposed to be drawn through an Account Officer other than the A.O. issuing PPO)

Signature

Present Postal Address

Postal address after retirement

Place:

Date:

Note:- The payment of commuted value of pension shall be made through the disbursing authority from which pension is to be drawn after retirement. It is not open to an applicant to draw the commuted value of pension from a disbursing authority other than the disbursing authority from which pension is to be drawn.

PART II

(ACKNOWLEDGEMENT)

Received from Shri/Smt./Kumari.............................................
   (name and designation)
   application in part I of form D for commutation of fraction of pension without medical examination.
Note:- This acknowledgement should be detached from the form and handed over to the applicant. If the form has been received by post, the acknowledgement should be sent to the applicant by registered post. If this form has been received by the State Government after the retirement of the officer, it should be returned to him asking him to submit fresh application in Form E.

PART III

Forwarded to the Accounts Officer.
(here indicate the address and designation)..................

with the remarks that:-

(i) the particulars furnished by the applicant in part I have been verified and are correct:
(ii) the applicant is eligible to get a fraction of his pension commuted without medical examination:
(iii) the commuted value of pension determined with reference to the Table applicable at present comes to Rs. .......; and
(iv) the amount of residuary pension after commutation will be Rs.............

2. The pension papers of the applicant completed in all respects were forwarded under this Government's letter No............dated........ It is requested that the payment of commuted value of pension may be authorised through the Pension Payment Order which may be issued one month before the retirement of the applicant.

3. The receipt of Part I of this Form has been acknowledged in Part II which has been forwarded separately to the applicant.

4. The commuted value of pension is debitable to Head of Account

Place: 

Signature

Date: 

Head of Office.
FORM E
FORM OF APPLICATION FOR COMMUTATION OF A FRACTION OF PENSION
WITHOUT MEDICAL EXAMINATION

(To be submitted in duplicate after retirement but within one year of the date of the
date of retirement)

PART I

To

The Chief Secretary to the Government of.................................

Subject:- Commutation of pension without medical examination.

Sir,

I desire to commute a fraction of my pension as indicated below in accordance
with the provisions of the All India Services (Commutation of pension) Regulations
1959. The necessary particulars are furnished below:

1. Name in block letters ..........................................

2. Father's Name (and also husband's name in
the case of female member of the Service) ......................

3. Designation of the post held at the time
of retirement ..................................................

4. Name of the Office/Department/Ministry in
posted ..........................................................

5. Date of Birth (by Christian era) ..........................

6. Date of retirement ...........................................

7. Class of pension on which retired (i.e.
superannuation pension, retiring pension etc.) ..................

8. Amount of pension authorised. [In case final
amount of pension has not been authorised,
indicate the amount of anticipatory pension
sanctioned under the rule 27 of AIS (DCRB)
rules 1958] ..................................................

9. Fraction of pension proposed to be commuted
(Maximum amount of pension that can be
10. Designation of the Accounts Officer who authorised the pension and the No. and date of the Pension Payment Order, if issued. ...........................................

11. Disbursing authority for payment of pension ..........................

(a) Treasury/sub-Treasury. (Name and complete address of the Treasury/Sub-Treasury to be indicated).

(b) (i) Branch of the Nationalised Bank with complete postal address.
    (ii) Bank Account No. to which monthly pension is being credited each month.

(c) Designation and address of the Accounts Officer. (Applicable in a case where pension is being drawn through an Accounts Officer other than the Accounts Officer who issued the P.P.O.)

Signature
Present Postal Address.

Place:
Date:

Note:- The payment of commuted value of pension shall be made through the disbursing authority from which pension is being drawn. It is not open to an applicant to draw the commuted value of pension from a disbursing authority other than the disbursing authority from which pension is being drawn.

PART II

(ACKNOWLEDGEMENT)

Received from Shri..........................................................
(name) (Designation of the post held at the time of retirement)

application in Part I of Form E for the commutation of a fraction of pension without medical examination.

Signature
Head of Office

Place:
Date:

------------------------------------------------------------------------------------------------------------------
Note:- This acknowledgement is to be signed, stamped and dated and is to be detached from the Form and handed over to the applicant, if the form has been received by the post, it has to be acknowledged on the same day and the acknowledgement sent under registered cover. If this application has been received after the expiry of one year from the date of retirement, it should be returned to the applicant directing him to submit the application in form A for undergoing medical examination.

PART III

Forwarded to the Accounts Officer_______________________________________

(here indicate the address and designation)

With the remarks that

(i) the particulars furnished by the applicant in Part I have been verified and are correct;

(ii) the applicant is eligible to get a fraction of his pension commuted without medical examination;

(iii) the commuted value of pension determined with reference to the Table applicable at present comes to Rs...........

2. It is requested that further action to authorise the payment of the amount of commuted value of pension may be taken under AIS (Commutation of Pension) Regulations.

3. The receipt of Part I of the Form has been acknowledged in Part II which has been forwarded separately to the applicant on...........

4. The commuted value of pension is debitable to Head of Account.

__________________________
Signature

Head of Office

Place:

Date:
GOVERNMENT OF INDIA'S DECISIONS

1. Report from the Audit officer will have to be called for in the prescribed form for the commutation of pension twice for commutation from anticipatory and final pension: - A pensioner is not required to apply afresh for commutation of the difference between the percentage or fraction of the final pension and the anticipatory pension. However, as the commutation in such case is payable in two instalments one out of the anticipatory pension and the other after final assessment of pension, the report from the Audit officer will have to be called for in the prescribed form for the commutation of pension twice. A fresh sanction of the administrative authority for the difference of the commuted value i.e. the maximum value accrued minus value commuted provisionally, will also be necessary.

[G.I., MHA letter No. 28/1/60-AIS(II) dated 15.9.1960]

2. The application for commutation, administrative sanction and report of medical board shall be made in forms A, B, & C respectively which have been prescribed for this purpose by the Government of India.

[G.I., M.H.A. letter No. 28/1/60-AIS(II), dated 26th October, 1960.]