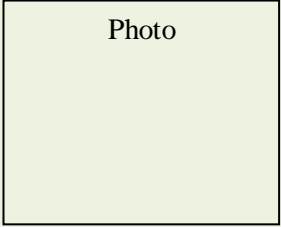




GOVERNMENT OF INDIA
MINISTRY OF COMMUNICATIONS
DEPARTMENT OF TELECOMMUNICATIONS



KNOW YOUR PENSIONER (KYP) FORM

Category of Pensioner (tick the correct option)		Pensioner Family Pensioner							
Pension Disbursing Authority		Directly through CCA office Directly through Bank Directly through Post office							
Pensioner details (to be filled by Pensioner)									
S. No.	Description	Details							
1	Name								
2	PPO No.								
3	Pensioner's Code/ New PPO No. (If available)								
4	Date of Birth								
5	Date of Retirement								
6	Post Held on Retirement								
7	Group of the post held on retirement (TICK THE BOX)	A		B		C		D	
8	Mobile No.								
9	Aadhar No. (Self attested copy to be enclosed)								
10	PAN No. (Self attested copy to be enclosed)								
11	Email ID								
12	Family Details :								
	Sl. No	NAME	RELATION	DOB	Contact No				
	(i)								
	(ii)								
	(iii)								
	(iv)								
	(v)								

FAMILY PENSIONER'S DETAILS (To be filled by Family Pensioner if Pensioner expired)		
1.	Pensioner Name	
2.	Family Pensioner Name	
3.	Relation to Pensioner	
4.	PPO No.	
5.	Date of Birth of Family Pensioner	
7.	Date of Death of Pensioner	
8.	Mobile No.	
9.	Aadhar No. (Self attested copy to be enclosed)	
10.	PAN No. (Self attested copy to be enclosed)	
11.	Email ID	
BANK/POST OFFICE DETAILS		
1.	Name of Bank & IFSC	
2.	Address of Bank/Post office	
3.	A/C No. of Bank / Post office	
CORRESPONDENCE DETAILS		
1.	Permanent Address with Pin code	
2.	Correspondence Address with Pin code	

CONSENT LETTER

FOR O/o CONTROLLER OF COMMUNICATION ACCOUNTS, DEPT. OF TELECOMMUNICATIONS

I hereby give permission to O/o Controller of Communication Accounts, Department of Telecommunications, Govt. of India for use of my above information for pension payment.

Note: The information provided above will not override the Form-3 details present in the Service Book.

Place:

Date:

Signature of the Pensioner/Family Pensioner

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