

VERIFICATION OF DATA SHEET

Date : 05 Jun 2024 11:20:59 AM

PERSONAL DETAILS

First Name	AK	Middle Name	-	Last Name	SUGUMAR
Date of Birth	08/01/1972	Nationality	Indian	Aadhaar Number	XXXXXXXXX7591
PAN	XXXXXX911E	Email ID	-	Gender	Male
Address Line 1	madurai				
Address Line 2	MADURAI SOUTH				
Pin Code	625009	Country	India	State	-
District	-	Mobile Number	9994463686	Marital Status	Married
ECHS Recovery	Yes	Fixed Medical Allowance	No		

SERVICE DETAILS

Record Office	RO EME SECUNDERABAD	Nature of Discharge	Retirement	Clause of Discharge	At own request
Initial Rank	Sepoy	Rank Last Held	Naik		
Regimental No.	14620534A	TA Personnel	No	Old Regimental Number	-
MACP Granted	NO MACP	AICTE Diploma Holder	No	Group	Y
Date of Enrollment	25/02/1994	Date of Discharge	31/12/2009	Discharge - FN/AN	Afternoon
Non-Qualifying Service	00/00/10	Forfeited Service	00/00/00		
Former Service	00/00/00				
Extension of Service	Yes	Service Condoned (MM/DD)	00/00		
Net Qualifying Service	15/09/24	Any Disciplinary action pending?	No	Is Penalty Imposed ?	No
Pension Recommended (%)	100.0	Gratuity Recommended (%)	100.0		
Commutation Recommended	Yes	Recommendation upto date	0	Shape-1	Yes

SPOUSE DETAILS

First Name	TM	Middle Name	USHA	Last Name	DEVI
Spouse Alive	Yes				
Marital Status	Married	Date of Birth	29/08/1978	Nationality	Indian
Aadhaar Number	-	PAN	-	Email ID	-
Mobile Number	9994463686	Eligible for Family Pension	Yes		

BANK DETAILS

Account Number	30577022887	IFSC Code of Paying Branch	SBIN0000988
IFSC Code of Paying Branch	STATE BANK OF INDIA	Branch	MADURAI CITY

PAY DETAILS

Central Pay Commission (CPC)	6					
Level in Pay Matrix	-		Pay in Pay Matrix (in Rs)		-	
NPA(in Rs)	0					
Last Pay (in Rs.)	-		Avg. Pay of Last 10 Months (in Rs.)		0	
CPC	6	Date From		01/03/2009	Date to	31/12/2009
Level In Pay Matrix		Pay In Pay Matrix		0		
Total Demand (in Rs.)	0					

OTHER DETAILS

Receiving any other Pension	No	PPO Number	-
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Declarations Undertaken during PDV

Undertaking of Refund of Excess Payment

I, the undersigned, agree and undertake to refund or make good any amount to which I am not entitled or any amount which may be credited to my account in excess of the amount to which I am or would be entitled. I further hereby undertake and agree to bind myself and my heirs, successors, executors and administrators to indemnify the PCDA(Pensions) Allahabad from and against any loss, suffered or incurred by the PCDA(Pensions) Allahabad in so crediting my pension to my account under the scheme and to forthwith pay the same to the PCDA(Pensions) Allahabad and also irrevocably authorize the PCDA(Pensions) Allahabad to recover the amount due by by making recoveries from future pension payments in terms of existing instructions issued by RBI and PCDA(Pensions) Allahabad regarding recovery of overpayment of pension.

Consent for use of Aadhaar to avail pensionary benefits through SPARSH

I, the holder of Aadhaar number **XXXXXXXX7591**, hereby give my consent to PCDA(Pensions) Allahabad to use my Aadhaar Number and Fingerprint/Iris/OTP for annual identification and generation of Digital Life Certificate(DLC).

I also give my consent for sharing my Aadhaar number and my DLC for e-KYC and authentication from UIDAI through Meity/NIC/NPCI/other ASA.

PCDA(Pensions) Allahabad has informed me on behalf of Meity/NIC/NPCI/other ASA that during authentication, Meity/NIC/NPCI/other ASA shall submit my information to UIDAI and that my core biometrics (Fingerprint and/or Iris scans will not be stored/shared).

I have also been informed that the information submitted to PCDA(Pensions) Allahabad shall not be used for any purpose other than that mentioned above or as per any requirement of law.

Consent for receiving notification on mobile number and email id

I hereby give my consent to receive regular notifications on the mobile number and email id mentioned in my Personal details.

Acceptance Declaration

I hereby confirm that I have verified my details available in the audited pension claim and found those correct, exc