



LIFE INSURANCE CORPORATION OF INDIA
P&GS Unit, "Jeevan Prakash", DO - I, IV Floor, J.C. Road,
Bangalore - 560 002 Ph : 22234911/22248951, FAX : 22293471,
E-mail : bo_g501@licindia.com

**THE EMPLOYEE'S GROUP SUPERANNUATION SCHEME-
MASTER POLICY NO. GS (CA)_____**

INTIMATION OF RETIREMENT/DEATH/LEAVING SERVICE

(To be completed in accordance with the terms and conditions as laid down in the Rules of the Scheme)

1. Name of the Member

2. (a) LIC Membership No.
(b) Salary Roll No./Identity No.

3. Date of entry into Scheme

4. Date of Birth

5. Date of Exit

6. (a) Cause of Exit
(b) In case of death, (Death Certificate and Age Proof of Beneficiary to be attached)

7. Final Contribution in respect of the member : a. Amount Rs.
b. Paid On

8. Income Tax Pan No:

9. Whether Member is eligible for Gratuity :

10. Whether option to commute part of pension exercised or not
if yes, what proportion (1/3rd if eligible for Gratuity or 1/2 if not) : :

11. Type of Pension Option selected by the Member :

12. In case of Joint Life Pension, Name and DOB of the spouse : Name :
: Date of birth

13. Specimen Signature of the Member : 1. 2.

14. Income Tax on Commutation & Annuity to be Deducted at the rate of :

For Self and Co-Trustees of
Employees' Group Superannuation Scheme

Place:

Date:

(TRUSTEE)

N.B:- If no Income Tax is to be deducted against the above account, please write 'NIL' to question no.14.

TO BE COMPLETED BY ANNUITANT

I, Shri/Smt. _____ opt for the following:

A. PAYMENT OF PENSION

(Mention one of the following types of Pension)

- a) Pension for life with return of Corpus
- b) Pension for life (without return of Corpus)
- c) Pension guaranteed for 5/10/15/20 years and life thereafter
- d) Joint Pension without return of corpus

(Note: In case of Joint Pension Options (d), please give the Date of Birth of Spouse)

B. COMMUTATION

(Please indicate one of the following options)

- a) With commutation
- b) Without commutation

C. PAYMENT OF ANNUITY

Monthly OR Quarterly OR Half-yearly OR Yearly

b. I request you to credit the Annuity payments directly to my Bank Account.

✦ Account Number. _____ ✦ MICR Number _____
✦ IFSC CODE _____ ✦ Name of the Bank _____
✦ Address of the Bank _____ ✦ PAN NO _____

(Enclose a cancelled blank cheque leaf for the above ECS facility).

D. NOMINATION

I, Shri/Smt. _____, a member of the
_____ (Name of the company) Employees'

Superannuation Scheme, hereby nominate Shri/Smt _____
aged _____ years who is related to me as _____, to receive the Pension in the event of
my death during the guaranteed period as per the Rules of the Scheme/the Pension Corpus on my death. I
further agree and declare that upon such payment, the Corporation will be discharged of all liability in this
respect under the Master Policy No. _____.

I, Shri/Smt. _____ do hereby acknowledge receipt from the Life
Insurance Corporation of India, the sum of Rs. _____ in full satisfaction and discharge of my under
mentioned claims and demand under the Master Policy No. _____.

MY ADDRESS

(Signature of the Annuitant)

Phone No.: _____

Mobile No.: _____

email id : _____

1. Member residing away from Bangalore may opt for transfer of annuity records to the nearest P&GS Unit
2. Existence Certificate needs to be submitted once in 3 years /1 year in case of ROC/Life pension cases