

**Govt. of Andhra Pradesh**  
**ANNUAL VERIFICATION CERTIFICATE**  
(As per Govt. Memo.No.28407-A/239/PSC/2007, Dated:04-01-2008)

1. Type of Pension : Service Pension / Family Pension

Name of Individual :  
(S/o,D/o,W/o,H/o)

Photo of the  
Individual  
(To be  
attested by  
the Gazetted  
Officer/Bank  
Manager or  
Notary.

2. Date of Birth/Age :

3. P.P.O.No. :

4. Name of Bank and Branch:

5. Bank Account No. :

<b>OLD:</b>
<b>NEW:</b>

6. Employee Particulars : (Applicable if Re-Employe after retirement/  
Appointed on Compassionate Grounds)

a. Name of Office :

b. Date of Employment / Re-Employment:

c. What is the D.A. being drawn


d. Date from which D.A. is drawn

7. Re-Marriage Particulars if any :

a. Date of Re-marriage :

b. Name of the spouse :

8. Present Residential address with Phone No.:

9. PAN No. if any :

**DECLARATION OF THE PENSIONER**

I hereby declare that:

- i. I am not drawing any other pension :
- ii. I am drawing other pension through PPO No:
- iii. I am not drawing any D.R. on that pension.
- iv. The particulars mentioned above are true to the best of my knowledge and belief
- v. If the above particulars proved wrong at any time, I am liable for disciplinary / criminal action as per rules.

Date:  
Place:

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(OR)

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Left hand Thumb  
Impression of the Pensioner

(Signature of the Pensioner)

**ACKNOWLEDGEMENT**

Received the Annual Verification Certificate dated \_\_\_\_\_ of Sri/Smt  
\_\_\_\_\_ Holder of PPO No. \_\_\_\_\_.

Receiver Signature, Date & Stamp

## C E R T I F I C A T E – I

(To be issued by the Drawing & Disbursing Other)

Certified that Sri/Smt \_\_\_\_\_ W/o of H/o of Late \_\_\_\_\_ was appointed as \_\_\_\_\_ on compassionate grounds in this office with effect from \_\_\_\_\_. She/He is being paid the Dearness Allowance eligible to her at the rates sanctioned by the government from time to time.

As per the declaration filed by the individual, she/he is not drawing any D.R. on the family pension beign drawn vide PPO No. \_\_\_\_\_ from the Sub Treasury/Pension Payment Office.

Signature & Office Seal.

Station:

Date:

## C E R T I F I C A T E – II

Certified that I have seen the pensioner as on \_\_\_\_\_ and he/she is alive on this date.

Date:

Place:

Signature of the Gazetted Officer/  
Bank Manager / (with name and seal)

Signature of the Treasury Officer,  
i.e. STO/ATO/APPO  
(with name and seal)

Note:

1. The Pension Disbursing Officer can sign the Certificate if the pensioner appears personality before the Pension Disbursing Officer.
2. If pensioner does not appear personally before the Pension Disbursing Officer, the Certificate shall be signed by any Gazetted Officer / Bank Manager.
3. The Annual Verification certificates are obtained form 1<sup>st</sup> November on wards.
4. The Non-receipt of the Annual Verification Certificate the pension shall be stopped form 1<sup>st</sup> April on wards (i.e.) March payable on 1<sup>st</sup> April.