## UNIVERSITY OF CALICUT

(Administration 'H' Section')

## FORM OF APPLICATION FOR RESTORATION OF COMMUTED PORTION OF PENSION

(Vide G.O.(P) No.385/83 Fin. dated 13.07.1983 and G.O.(P) No.670/89 Fin. dated 26.12.1989)

1	. Name of pensioner with address	
*		
2.	Pension payment order No.	
3.	Date of retirement & designation	
4.	Date of commencement of pension	
5.	Amount of original pension	:
6.	a) Amount commuted	:
	b) Date of effect of deduction in pension	
	c) Amount of reduced pension	
.7.	Date of completion of 12 years after commutation	
8.	Date of restoration of original pension	
9.	Amount of pension after restoration	
10.	Name of District/Sub Treasury from which pension is now drawn	
		Signature of applicant
NB:I	life Certificate should be attached alongwith the applica This should be from 01.07.1988 even in case where 12 y	
	LIFE CERTIFI	CATE
T	his is to certify that Sri./Smt	
	pensioner and P.P.O. holder N	Io.
	day of His/Her sign	is alive today
	nis/Her sign	nature is attested below.
Place:		
Date:		
Signatu	re of pensioner:	Gazetted Officer Name and Designation