

मुंबई पोर्ट प्राधिकरण - वित्त विभाग

मोबाईल नं -

संमती पत्र

मी आम्ही खाली सही करणार, स्वर्गीय श्री. /श्रीमती _____

माजी _____ (हुद्दा) _____

(खाते) _____ मुंबई पोर्ट प्राधिकरण यांचा/यांची हयात वारस असून शपथपूर्वक असे लिहून देतो / देते

की मुंबई पोर्ट प्राधिकरण कडून उपरोक्त मृतास देय असलेली सर्व रक्कम

मृताचा/ची _____ श्री/श्रीमती _____ यांना देण्यास

माझी /आमची कोणतीही हरकत नाही.

क्रमांक	नाव	सही
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

वरील मजकूर वारसांना समजावून देण्यात आला असून त्या पूढील सही/सह्या माझ्या समक्ष केली/केल्या आहे/आहेत.

नोटरी

आवश्यक कागदपत्रे :

- नोटरी केलेले संमती पत्र आणि मृत्यू व उत्तराधिकार प्रमाणपत्र
 - Bank Mandate form attested by bank manager
 - अर्जदाराची आधार कार्ड, रेशन कार्ड, पॅनकार्ड, मतदान कार्ड, बँक पासबुक यांची झेरॉक्स सत्यप्रत (Attested by S.E.O., Gazetted officer or notary)
 - पेंशनरचा मृत्यू चा दाखला, मयत बहीण /भाऊ झेरॉक्स सत्यप्रत
 - बहीणांच्या लग्नाचा दाखला / पॅनकार्ड, आधार कार्ड सत्यप्रत
 - Brother's PAN card attested
 - पेशन बुक मूळप्रत
 - Affidavit on Rs. 500/- stamp paper
 - Closure letter, NOC
- सदर अर्ज दाखल करण्यापूर्वी दावा करणाऱ्या व्यक्तीने/अर्जदाराने खाते बंद केल्याबाबतचे पत्र कार्यालयात सादर करणे बंधनकारक आहे."

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Certificate of Death and Heirship

मृत्यु व उत्तराधिकार प्रमाणपत्र

Certified that Shri/Smt. _____ employed in the _____ Department, Mumbai Port Authority died at _____ on _____ and that the following persons are his/her sole surviving legal heirs and the persons at Sr. No. _____ are minor and under the guardianship of _____.

प्रमाणित किया जाता है कि श्री. श्रीमती _____ मुंबई पोर्ट प्राधिकरण के विभाग में नियुक्त का _____ मे _____ को देहान्त हुआ और यह कि निम्नलिखित उनके अकेले उत्तराधिकारी है और क्रमांक _____ की व्यक्तियों संख्या नाबालिग है और _____ के संरक्षण में है.

Sr. No क्र.	Name in full पूरा नाम	Relationship with employee मृत से संबंध	Age/years आयु	Whether dependant on the deceased for support क्या मृतक पर निर्भर थे	Remark
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Place:

स्थान:

Signature:

हस्ताक्षर:

नोटरी

Date:

तारीख

Seal:

मुहर

Affidavit
To be prepared on the stamp paper of Rs. 500/- only

I _____, age _____ years son/daughter
of Late _____ aged _____ years, residing
at _____ do hereby solemnly affirm and
declare as under:

That my late mother _____ who was in receipt of family
pension from Mumbai Port Authority, has expired on _____ at _____

I say that the following are the only surviving children of late
Smt./Shri. _____

- i) _____ aged _____
- ii) _____ aged _____
- iii) _____ aged _____
- iv) _____ aged _____

who have given consent to Mumbai Port Authority to settle the unclaimed amount of
family pension and arrears if any, due to my parent Shri/Smt. _____.

This affidavit is made by me to submit the same to the Financial Advisor & Chief Accounts
Officer, Mumbai Port Authority to facilitate the settlement of the unclaimed dues in the
aforesaid matter.

I say that whatever has been stated hereinabove is true and correct to the best of my
knowledge and contains no untrue information and if the same is found to be untrue, I
am liable to be punished under the laws applicable for the same.

_____ dated this _____ day of _____

Solemnly affirmed and signed by within named

Smt/Shri _____

_____ in the presence of

Deponent

MUMBAI PORT AUTHORITY

NEFT Mandate Form

1. Details of Pensioner

(i) Name : _____

(ii) PPO No : _____

(iii) Address : _____

Pin

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(iv) Aadhar Card No. :

(v) Mobile No

(vi) Email

(vii) PAN

2) Particulars of Bank account

(i) Name of the Bank : _____

(ii) Name of the branch : _____

(iii) Address : _____ Pin: _____

(iv) Telephone No. _____ (with std code)

(v) Aadhar Card linked

**Bank Account
number**

(as appearing on the Cheque book and Bank Pass book)

(vii) MICR Code of Bank
(9 digit code as appearing on the Cheque book)

(vii) MICR Code of Bank

(viii) Bank IFSC code

(In lieu of the bank certificate to be obtained as under, please attach a blank cancelled cheque or photocopy of a cheque and front page of your savings bank passbook issued by your bank for verification of the above particulars)

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

(.....)

Date :

Signature / LHT of the Pensioner

Certified that the particulars furnished above are correct as per our records.

$$\left(\begin{array}{c} \dots \end{array} \right)$$

Signature of the authorised official of the Bank
and Bank's Stamp

Date: