

**Annexure - II**  
**No Object for settlement of Accumulated Pension Wealth in NPS**

{to be enclosed along with Nodal Office declaration where family pension is granted to the family member(s) of deceased Government servant or to the Government Servant [in case of disability]}

I / We, \_\_\_\_\_ (name of the claimant[s] / Subscriber), hereby confirm that I / We have no objection for release of NPS Accumulated Pension Wealth lying in PRAN of Subscriber (Late) Sri / Smt. / Ms. \_\_\_\_\_ with PRAN \_\_\_\_\_ or in my PRAN \_\_\_\_\_ to Nodal Office / Department where I / he / she was employed as I / We am / are receiving the family pension under Pension Payment Order No. \_\_\_\_\_, Dated \_\_\_\_\_ of the Principal Accountant General, Andhra Pradesh, Hyderabad / Audit Officer, District Audit Office, \_\_\_\_\_ / Audit Officer, O/o The Directorate of State Audit, Andhra Pradesh, Amaravati @ Ibrahimpatnam.

Details of pension being paid (in case of Death)			
Name of the Family member			
PRAN No. of deceased Subscriber			
Pension Payment Order (PPO) No.			
Signature / Thumb impression of Claimant			
Relationship with deceased Govt. servant			
Address			
Phone / Mobile No.			
e-Mail ID			
Place		Date	

Details of pension being paid (in case of Disability)			
Name of the Subscriber			
PRAN No. of Subscriber			
Pension Payment Order (PPO) No.			
Signature / Thumb impression of Subscriber			
Address			
Phone / Mobile No.			
e-Mail ID			
Place		Date	

**Attestation by Nodal Office**

It is certified that the above declaration and details have been entered and signed / thumb impressed by the family member(s) of deceased subscriber Sri / Smt. / Ms.

\_\_\_\_\_ (PRAN) \_\_\_\_\_

or by the subscriber before me. Further the above details have been verified from the service record of the deceased subscriber / Subscriber and found in order. Further,

- *I / We hereby declare that No Objection Certificate to transfer the Accumulated Pension Wealth from the NPS account of the deceased subscriber / Subscriber to this office have been collected from the family member(s) of the deceased subscriber / Subscriber.*
- *I / We hereby declare that details furnished above are true and correct as per our office records. PFRDA / NPS Trust / CRA shall not be responsible in case of any wrong information furnished in this regard. Further, I understand that funds will be transferred to TO / PAO Bank account on authorization of withdrawal request by office and physical documents is required to be forwarded to CRA for record keeping within sixty (60) days of authorization of withdrawal request.*

Date:	Seal / Stamp	
Place:		Signature of the N.3 / DDO
Name of the N.3 / DDO		
DDO Registration No.		

**Countersigned by Nodal Officer.2 / TO / PAO**

Date:	Seal / Stamp	
Place:		Signature of the N.2 / TO / PAO
Name of the N.2 / TO / PAO		
DTO Registration No.		