

आयुक्त का कार्यालय , केंद्रीय माल एवं सेवा कर , दक्षिण-दिल्ली ई. आई. एल. एनेक्स बिल्डिंग, भीकाजी कामा प्लेस, नई दिल्ली – 110066

<u> "पेंशन अदालत"</u> आयोजन

केंद्रीय माल और सेवा कर आयुक्तालय, दिल्ली-दक्षिण दिनाक 12.07.2024 को अपराह्ण 03:30 बजे कांफ्रेंस हॉल, ऊपरी तल, ई. आई. एल. एनेक्स बिल्डिंग, भीकाजी कामा प्लेस, नई दिल्ली -110066 में एक "पेंशन अदालत" आयोजित करा रहा है, जो कि केंद्रीय माल और सेवा कर, दिल्ली-दिक्षण/पश्चिम/ऑडिट-II/अपील-II (पूर्व सेवा कर I/II/III/ ऑडिट/अपील एवं केंद्रीय उत्पाद I/II/ऑडिट/अपील) से रिटायर हुए पेंशनरों एवं पारिवारिक पेंशनरों की शिकायतों के निपटान के लिए आयोजित की गयी है। सभी पेंशनर जो भी अपनी पेंशन से सम्बंधित शिकायत दर्ज करना चाहते है, अपना प्रारूप फॉर्म जो कि नीचे दी गयी वेबसाइट पर उपलब्ध है भर कर, दिनांक 04.07.2024 से पहले भेजें।

अधिक जानकारी के लिए www.gstdelhizone.gov.in/south/index-south.php पर जाये।

सहायक आयुक्त (पी & वी0) केंद्रीय माल और सेवा कर, दक्षिण-दिल्ली



OFFICE OF THE COMMISSIONER, CENTRAL GOODS AND SERVICE TAX, GST DELHI SOUTH, EIL ANNEXE BUILDING, BHIKAJI CAMA PLACE, NEW DELHI – 110066

HOLDING OF PENSION ADALAT

CGST Delhi South is holding a "Pension Adalat" pertaining to CGST Delhi South/West/Audit-II/Appeal-II (Erstwhile Service Tax I/II/III/IV/Audit/Appeal and Central Excise I/II/Audit/Appeal) for taking on the spot decisions for prompt resolution of pensioners' grievances at Conference Hall, Upper Ground Floor, EIL Annexe Building, Bhikaji Cama Place, New Delhi-110066 on 12.07.2024 from 03:30 pm onwards. All the pensioners or family pensioners, whose pension cases are pending for settlement/decision, may send their grievances to this office before 04.07.2024 in the prescribed format. The application format for submission of grievance is available on the official website given below.

For more details go to www.gstdelhizone.gov.in/south/index-south.php

Assistant Commissioner (P&V)

CGST Delhi South

	FORMAT OF ADDIS	
S.No.	FORMAT OF APPLICA	ATION
1.	I wante of Applicant the	Details
2.	The state of the s	
	(a) Name of Husband	
	(b) Date of death of Husband	(a)
	(c) Date of committee of Husband	(b)
	(c) Date of commencement of family	(c)
3	PPD No.	
4.		
6"	Designation/Department/Station (at the time of retirement)	
5.	Designation in which pensioner retired	
6.	Date of Birth	
7.	Date of Enrolment /Appointment	
8.	Date of discharge/retirement	
9.	Total service in Department	
10.	Last Basic Pay & Scale of Pay at the time of	1.
	retirement	
11.	Amount of original Pension sanctioned	:
12.	Present Pension/Family Pension	Basic Pension:
A Transition of the state of th		Disability Element:
		(If any)
		Dearness Relief:
		Medical Allowance:
		TOTAL:
e e e e e e e e e e e e e e e e e e e		Less Commutation:
		If any
The state of the s		Net parsion
	The control of the co	Net pension
13.	Name of your Pension disbursing Agency	
	111 Name of the Bank, Dialiti & Abbita	
	ALA hank with DINCODE	
	(2) Saving Bank Account Number	
	401 Marris of PAO	
	The state Complaint grievance	
14.	transparate sheet it hecessery/	,
	Complete Postal Address with Pin code	
A STATE OF THE PARTY OF THE PAR	Telephone & Mobile Number	1
The state of the s	Telephone & Modile Hollie	A company of the form of the f
17.	E-mail Id (if any)	
18.	Signature	
4.6	Date and Place	
	the following documents:	

- (1) Copy of Discharge Certificate/ Book (2) Copy of first two pages of your Pension Certificate/ Book
- (3) Copy of all PPO and Corr. PPOs issued in your case
- (4) Copy of updated Bank Pass Book last Four pages
- (5) Copy of pension paid statement issued by your Bankers/DPDO/Treasury office
- (6) Any other information/ documents related to your representation.

To be sent to: