

State Bank of India

Branch _____

Life Certificate

(to be submitted by Pensioner once a year in November)

Certified that I have seen the pensioner Shri / Smt/ Ms _____

holder of Pension Payment Order No. _____ and that he/ she is alive on this date.

Name: _____

Place: _____

Date: _____

Designation of Authorised Officer: _____

(Seal)

.....
(Signature of the Authorised Official)

Additional Information

I submit herewith additional details as under:

1. Income tax Permanent Account Number (PAN) _____
2. (a) Mobile number _____
(b) Alternate Mobile number _____
3. Date of birth of the spouse: _____
(Proof of date of Birth attached)
4. e-mail address: _____
5. Present Postal address of Pensioner: _____

.....
Signature

Name of the Pensioner: _____

Savings Bank Account No: _____

Date: _____