



**punjab national bank**

PERSONNEL ADMINISTRATION DIVISION

HO: 7-Bhikhaiji Cama Place, New Delhi-110 066.

PAD CIR.NO.124/2012

Dated: 19.09.2012

**TO ALL OFFICES**

**PERSONNEL ADMN DIVISION CIRCULAR NO.124/2012**

**PNB HOSPITALIZATION CONTRIBUTORY BENEFIT SCHEME FOR  
RETIRED EMPLOYEES – REOPENING OF MEMBERSHIP &  
ENHANCEMENT OF REIMBURSEMENT LIMIT.**

The Board in its meeting held on 18.02.2009 approved introduction of "PNB Hospitalization Contributory Benefit Scheme for Retired Employees" under the staff welfare fund. The scheme covers all the retired employees irrespective of cadre and the scheme stands circulated vide HRD Division Cir.No.515 dated 19.02.2009.

2 The funds for running the said scheme come from Staff Welfare Fund as well as by way of one time subscription of Rs.5000/- by retiring employees. The objective of the scheme is to provide hospitalisation assistance to the eligible retired employees and their spouses. Further, on the requests received from various unions/associations and also from retired employees, the Division vide its Circular No.527 dated 14.03.2009 extended the last date for receipt of application to 30.04.2009 and thereafter to 30.06.2009 vide Circular No.546 dated 06.05.2009.

3 The scheme was modified vide HRDD Circular No.530 dated 20.03.2009 to permit officers/workmen who had retired voluntarily under PNB Officers' Service Regulations/PNB Employees Pension Regulation after putting in 30 years of service in the bank or completing 55 years of age, whichever was earlier to become member of the scheme with the condition that such retirees shall be entitled to avail the benefits under the scheme only on attaining the age of 60 years.

4 Further, we have been receiving representations from various unions/associations of retired employees to open the membership in the scheme for PNBEVRS 2000 Retirees.

5. On the recommendations of the Core Working Group (in its meeting held on 19.06.2012), Board in its meeting held on 30.08.2012 has approved improvement in financial assistance under the scheme as under:

- The scheme is made available for PNBEVRS 2000 retirees with the condition that they shall be eligible for the benefits only after 60 years of age and they will be able to claim benefits under the Scheme after one year from the date of realization of cheque/draft towards the subscription.
- Annual limit of reimbursement of Rs.40000/- specified in the Scheme be enhanced to Rs.100000/- per year for self & spouse within the overall limit of Rs.200000/- up to the age of 75 years w.e.f. 01.10.2012.

All other terms and conditions of the scheme shall remain unchanged.

6. All such eligible PNBEVRS 2000 retirees who are desirous of becoming members of the scheme, may send their enrolment forms/ applications to Chief Manager, Personnel Administration Division, Head Office, 7 Bhikhaiji Cama Place, New Delhi along with CBS Cheque / Demand Draft of Rs.5000/- favouring '**PNB Centenary Welfare Trust- A/C PNB Hospitalization Contributory Benefit Scheme for Retired Employees**'. Enrolment/ Application Form as circulated vide HRD Division Cir. No. 515 dated 19.02.2009 is enclosed for ready reference (Annexure).

7. All the offices/branches are requested to display this circular on the Notice Board.

8. This circular is also available on bank's website: [www.pnbnet.net.in](http://www.pnbnet.net.in)

**DY. GENERAL MANAGER**

**APPLICATION/ENROLMENT FORM FOR PNB HOSPITALISATION  
CONTRIBUTORY BENEFIT SCHEME FOR RETIRED EMPLOYEES**

The Asstt. General Manager  
Punjab National Bank  
Personnel Admn. Division  
Head Office, 7 Bhikhaiji Cama Place  
New Delhi.-110066

<p><b>For Office use only</b> Enrolment No. _____</p>
<p>Please affix joint photograph of self and spouse</p>

Please **enrol** me as **Member** of the above scheme to which I hereby opt. I have gone through the rules and regulations of the scheme and agree to abide by the rules and regulations of the same as may be modified / amended from time to time. Particulars about me and my spouse are given below:

1. Name of Employee \_\_\_\_\_ 2. P.F No. \_\_\_\_\_  
(In Block Letters)

3. Name of Spouse \_\_\_\_\_  
(In Block Letters)

4 Father's/Husband's Name \_\_\_\_\_  
(In Block Letters)

5. Date of Birth a) Self \_\_\_\_\_ b) Spouse \_\_\_\_\_

6. Date of Retirement \_\_\_\_\_

7. Type of Retirement:

**(Attach documentary proof)**

(i) Superannuation (ii) Medical Ground (iii) Demitted the office of GM  
(iv) Dismissed (v) Compulsorily retired (vi) Voluntarily retired under Officers' Service  
Regulations (vii) Voluntarily retired under Pension Regulations)  
(viii) VRS under PNBEVRS 2000 (IX) any other

8. Office from which retired \_\_\_\_\_  
Under CO \_\_\_\_\_  
(Write the name) HO \_\_\_\_\_

9. Date of joining the bank \_\_\_\_\_

10. Enrolment No. of old PNB Hospitalisation Contributory Benefit Scheme for Retired Officers: \_\_\_\_\_

11. Present Address \_\_\_\_\_  
(in Capital Letters) \_\_\_\_\_

12. Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mob.No. \_\_\_\_\_ Landline Phone No. \_\_\_\_\_

13. I am enclosing herewith a Draft No. /CBS Cheque No. \_\_\_\_\_ dated \_\_\_\_\_ for Rs.5000/- only favouring PNB Centenary Welfare Trust -A/C **PNB Hospitalisation Contributory Benefit Scheme for Retired Employees** issued by the BO \_\_\_\_\_ (D. No \_\_\_\_\_) drawn on CDPC, New Delhi being my One Time Subscription to the Scheme.

**14. DECLARATION**

- (i) I have read and understood the PNB Hospitalisation Contributory Benefit Scheme for Retried Employees and agreed to abide by the terms and conditions of HRD Circular No. 515 dated 19.02.2009.
- (ii) The information given above by me is true to the best of my knowledge.
- (iii). I also undertake that if at any point of time, during the currency of my membership of the scheme, the information submitted by me, either in relation to application form or hospitalisation claim preferred by me, is found to be false/misleading, my membership to the scheme will be terminated without any notice to me. The amount deposited by me towards my subscription of the scheme will stand forfeited and I will not be eligible to become member of the scheme again.
- (iv) I will inform the change of my address to the Bank immediately by Registered Post.

Place \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF  
RETIRED EMPLOYEE**

\_\_\_\_\_  
**SIGNATURE /T.I.OF  
SPOUSE**

15. It is certified that Shri/Smt. \_\_\_\_\_ retired on  
(date) \_\_\_\_\_ from (Name of office \_\_\_\_\_  
as (Designation) \_\_\_\_\_.

Signature of retired employee and signature/Thumb Impression of his/her spouse given above are hereby verified.

\_\_\_\_\_

(Authorised Signatory)  
Circle/Head Office  
P.A. No. \_\_\_\_\_

**NOTE:**

- 1. Application form complete in all respects, must be sent to HO directly.
- 2. Strike off whichever is not applicable.