Ver 1.0 Mar. 2025

FORM B6

			<b>B</b>	[Se	e Re	gulat	tion 4	4,19	and	d 20	)] - ///			9				(							49	
Claim and Payout Form : S on or before 31/03																								Kei	tire	a
Before filling the			_														-									
Protean eGov Tech														_	Lto	d.)					Ph		grapł ouse			
																				3.			2.5 cm ort s		ze /	
			「 - A (to	ha fi	illad b	v tho	Snou	~ ~	- Do			ub	oori	bor	•					(			ign ao le / cl		s /	
		FARI	- A (10	be ii	neu b	y the	Spou	se oi	Det	Jeas	eu a	up	scri	Der	,											
1. Detail of Deceased Subscril	bers:																									
Name																										
PRAN     Date of Death (as per Death Certificate)     d     m     m     y     y     y																										
Date of Superannuation / Ret	irement u	nder FF	R 56(j) /	Reti	remen	t d	d m	n m	уJ	/ y	У															
Gender Male Female Transgender																										
Date of Joining Service	d d m	m y	у у	У																						
PAN																										
2. Details of Legally Wedded S	Spouse o	n the C	Date of S	Supe	rannu	ation	:																			
Name																						Τ				
DOB	d d m	my		V						_	PA		Ť	Ť				Ť	$\square$		$\neg$					
Gender	Male		Femal	e	Trai	nsgen	der											_								
3. KYC Details:						- 0 -																				
Document			_	_										_	_		_	_	_	,	Vali	ditv		_	_	_
(one of the documents)			Docume	nt T	уре				lden	tific	atior	n Nu	umt	ber			(in c	case	ofP				Drivii	ng L	icen	se)
Aadhaar* / Driving License / Passport / Voter ID / CKYC ID Letter issued by NPR	/																									
4. Current Address:																1										
Flat/House No./Bldg. Name										1												T	T	T		_
Street / Locality																								<u> </u>		
Village & Post Office / Block																					—	—	+	T		_
City / District									_		Sta	ite [						<u> </u>			—	-	+	+	1	
Country														+				1	Pir	n Co	de [	-	+	+		_
5. Contact Details:		1																					_	_		
Telephone No. (If any)										Mol	bile N	lo [						1					7			
E-Mail ID				_																	—	+				
6. Details of Bank A/C of Spou	ise for cri	edit of	LIPS Be	nofi	te ·						1 1												_	_		
Type of Bank A/C		g A/C	UF3 De	men	1	nt A/C																				
Bank A/C No.		5700																								
														╡		ESC	、	1				<u> </u>	<u> </u>	+		
Bank Name       IFSC         IFSC         Declaration:         I																										
I of Unified Pension Scheme (UI																										
Pension Scheme under Nationa	,	-																•	•							
UPS in terms of the aforesaid n		-											-						5.210				20			
I authorize the CRA, NPS Trust of the said scheme regulated un	•												-	/ nec	cess	sary	pers	onal	info	rma	ition	for t	he pı	oqır	se	
Place:				٨	lame:																			-		
Date: d d m m y y	у у																									
					(*	'LTI in c	ase of	males			ture / n case									essio	n in o	case	no ha	inds)	)	

Ver 1.0 Mar. 2025

LΓ

FORM B6

Detaile		FANT-	B (Details as reco	rded in the CRA Sys	tem)															
Details c	of Partial Withdraw	al:																		
S. N.	Date of Partial Withdrawal	Amount Withdrawn	No. of Units Nithdrawn as per Default Pattern	Default Pattern NAV on the Date of Superannuation	Value of Partial With nits withdrawn * NAV) as on date of superannud	1V) as per default pattern, a														
1																				
2																				
3																				
	Total																			
Details of	of Voluntary Contri	bution:																		
S. N.	Date of Voluntary Contribution	Amount of Voluntary Contribution	No. of Units Allotted	NAV on the Date of Superannuation	(no. c	Value of Voluntary Co of units * NAV) as on date														
1																				
2																				
3																				
n																				
	Total																			
Details f	or Calculation of U	IPS benefits payable for	Deceased Subsci	iber:																
II.       Benchmark Corpus (BC): Value of IC as per Default Pattern of Investment + Value of Partial Withdrawals amount at the time of Superannuation as per Default Pattern -																				
value of Voluntary Contribution on Date of Superannuation/Retirement.         III.       Final Withdrawal (FW in %).																				
IV.	Representative Ann	nuity Rate (as on Date of S	Superannuation, as	published by PFRDA).																
V.		nuity Amount = (IC) x (1-					V.       Representative Annuity Amount = (IC) x (1-FW%) *(Representative Annuity Rate) /													
		DADT C	to be filled by th	o DDO in the CBA S	(otom)															
Fmployr	ment Details as per		(to be filled by th	e DDO in the CRA Sy	stem)															
	nent Details as per		to be filled by th	e DDO in the CRA Sy	stem)															
File No: Employe	ee Code / ID	r office record:		e DDO in the CRA Sy	rstem)															
File No: Employe Date of Service a	ee Code / ID Commencement of <i>is defined in Regulatic</i>	coffice record:         Qualifying Service (Qualifying Service (Qualifying n 2(k)) read with Regulation	ying d d m p		stem)															
File No: Employe Date of Service a Date of	ee Code / ID Commencement of <i>us defined in Regulatic</i> Superannuation/ Re	Qualifying Service (Qualifying Service) and 2(k) read with Regulation witirement under FR 56(j)	i         i		stem)															
File No: Employe Date of Service a Date of Length o	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service of Qualifying Service	Qualifying Service (Qualifying Service) and 2(k) read with Regulation witirement under FR 56(j)	iving 13) d d m m d d m m		stem)															
File No: Employe Date of Service a Date of Length o (fraction	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service of Qualifying Service <i>to be ignored</i> )	coffice record:         Qualifying Service (Qualifying Service (Qualifying 2(k) read with Regulation etimement under FR 56(j)         etimement under FR 56(j)         etim Months (Q)         etim Completed Half Years	ving     d     d     m     m       13)     d     d     m     m       (L)		stem)															
File No: Employe Date of Service a Date of Length o (fraction Date of (in case of	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service))         Qualifying Service (Qualifying Service)         etimement under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in	ving     d     d     m     m       13)     d     d     m     m       d     d     m     m		stem)															
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retirement	ee Code / ID Commencement of as defined in Regulation Superannuation/ Re- of Qualifying Service to dualifying Service to be ignored) Start of Payout to D of superannuation, net nt, next day of retirement	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service))         Qualifying Service (Qualifying Service)         etimement under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in	iving 13) d d m n d d m m (L) a case of		stem)															
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of	ee Code / ID Commencement of as defined in Regulation Superannuation/ Re- of Qualifying Service of Qualifying Service to be ignored) Start of Payout to D of superannuation, ne: nt, next day of retirement start of family Payou	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service))         Qualifying Service (Qualifying Service)         Qualifying Service)<	iving 13) d d m m d d m m (L) d d a case of subscriber) d d	m     m     y     y     y     y	stem)															
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of	ee Code / ID Commencement of as defined in Regulation Superannuation/ Re- of Qualifying Service of Qualifying Service to be ignored) Start of Payout to D of superannuation, ne: nt, next day of retirement start of family Payou	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service))         Qualifying Service (Qualifying Service)         etimement under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         et day of superannuation / in         ent)         ut to Spouse (on demise of	iving 13) d d m n d d m m (L) d d a case of subscriber) d d innuation/Retirem	m     m     y     y     y     y	stem)	NPA (non-practicing	Tatal													
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of	ee Code / ID Commencement of as defined in Regulation Superannuation/ Re- of Qualifying Service of Qualifying Service to be ignored) Start of Payout to D of superannuation, ne: nt, next day of retirement start of family Payou	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera	ying 13) d d m m d d m m (L) d d n case of subscriber) d d innuation/ Retirem Total (Basic pay +	m       m       y	ic Pay	NPA (non-practicing allowance granted to medical officer in lieu of private practice)	Total (Basic pay + NPA)													
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of	ee Code / ID Commencement of <i>us defined in Regulation</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D of <i>superannuation, neu</i> <i>nt, next day of retirement</i> start of family Payou <b>ay details for last 1</b> Basic Pay	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	m       m       y		allowance granted to medical officer in lieu of	(Basic pay +													
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of a	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D <i>of superannuation, ne</i> <i>nt, next day of retirement</i> start of family Payou <b>ay details for last 1</b> Basic Pay	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	m       m       y		allowance granted to medical officer in lieu of	(Basic pay +													
File No: Employe Date of Service a Date of Length o (fraction Date of (in case of retiremen Date of Basic pa	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D <i>of superannuation, ne.</i> <i>nt, next day of retirement</i> start of family Payou <b>ay details for last 1</b> Basic Pay	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	m       m       y		allowance granted to medical officer in lieu of	(Basic pay +													
File No: Employe Date of Service a Date of Length o (fraction Date of (in case of retiremen Date of Basic pa	ee Code / ID Commencement of <i>us defined in Regulatio</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D of <i>superannuation, ne</i> <i>nt, next day of retirement</i> start of family Payou <b>ay details for last 1</b> Basic Pay	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	y       y		allowance granted to medical officer in lieu of	(Basic pay +													
File No: Employed Date of Service a Date of Length of (fraction Date of (in case of retiremen Date of Basic pa	ee Code / ID Commencement of <i>as defined in Regulatic</i> Superannuation/ Re of Qualifying Service <i>to be ignored</i> ) Start of Payout to D <i>of superannuation, ne.</i> <i>nt, next day of retirement</i> start of family Payou <b>ay details for last 1</b> Basic Pay 1 2 3 4	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	y       y		allowance granted to medical officer in lieu of	(Basic pay +													
File No: Employed Date of Service a Date of Length of (fraction Date of cin case of retiremen Date of Basic pa	ee Code / ID Commencement of <i>us defined in Regulation</i> Superannuation/ Re- of Qualifying Service to be ignored) Start of Payout to D of superannuation, ne- nt, next day of retirent start of family Payou ay details for last 1 Basic Pay 1 2 3 4 5	coffice record:         Qualifying Service (Qualifying Service (Qualifying Service)         Qualifying Service (Qualifying Service)         etiment under FR 56(j)         e in Months (Q)         e in Completed Half Years         ecceased Subscriber         xt day of superannuation / in         ent)         ut to Spouse (on demise of         2 months before Supera         NPA (non-practicing allowance granted to medical officer in lieu of	$\begin{array}{c c} & & & \\ \hline \\$	y       y		allowance granted to medical officer in lieu of	(Basic pay +													

Ver 1.0 Mar. 2025

FORM B6

3. Salary Details of last month b	efore Su	iperai	nnuatio	on/ Re	etire	ment	und	er F	FR 5	6 (j)	:																		
Month / Year	Basic Pay (includes non-practicing allowance granted to medical officer in lieu of private practice) if any) (BP)													Δ		)ea wa		ess e (D	A)	Total A) E= (BP+ DA)									
Last month emolument <b>(E)</b> for lump-sum payment																													
ertified that the details provided by tirement, date of death of subscrib		has b		rified	by ⊦	100 a	and th	ne e	ntry	has	be	en r	mac	le a	s pe	er s						n th	ne d	late	e of	sup	bera	ann	uati
Signature & Name of DDO :								וח	DO F	2001	etr	atio	n N																
Date:									ace:	-	511	auo	/// I'	10.															
								FI	ace.													_							
			U	PS Pa	ayo	ut Or		rt D	-	sue	d b	y P/	AO												5 cr	pou	se 2.5		
						(Syst	em G	Sene	erate	ed)														р	ass	por	t si	ze	
																							(		not stap				3 /
ro, National Pension System Trust																											-		
Tower B, B-302, Third Floor, Wor	ld Trade	Cente	er Nau	roji N	aga	r, Nev	v De	lhi-1	1100	29																			
File No:																		Da	te o	of Is	ssu	e: [	d	d	m	m	у	у	у
UPS Payout Order (UPO) No:																													
. Details of Deceased Subscrib	er:																												
Name																													
PRAN																													
Date of Death (as per Death Ce	ertificate)	d	d m	m	/ y	/ <u>y</u>	У																						
2. Details of Legally Wedded Sp	ouse on	the D	ate of	Supe	ran	nuati	on :																						
Name																													
DOB	d d m	m y	уу	у	_								PA	N															
Gender	Male		Fema	le	T	ransg	ende	r																					
3. Details of Employment & Sala	-				1	7																							
Length of Qualifying Service in		of mor	nths																										
Average of last 12 Months Basi											_	_			_	_			_	_									
Last Month Salary (Basic Pay +																													
Length of Qualifying Service in	•			s (fra																									
Date of Start of Payout for Dec					C		m m			У	У		_																
Date of Start of family Payout fo			-						m	у у	( <u>)</u>	$\left  \right\rangle$		<b>a</b> )		200				Г									
Admissible Payout: Assured Pay condition that if (P/2) XQ/300 is less th	an 10,000,	it will b	e taken d	s 10,00	10 10, w	here P	is basi	ic pa	r <b>ea r</b> y and	Q is	<b>u –</b> qua	(72 lifyir	ng se	<b>rvice</b>	( <b>Q</b> /3 e in 1	noni	ths)	th th	ie	L									
		Sai	nction	of Ad	mis	sible	UPS	Be	nefi	ts P	ava	ible	o to	Sno	aus	e													
4. UPS Benefits Payable to Spo	use:				-			-	-							-													
Date of start of Top-Up Payout				dc	1 m	m	v v	V	v																				
Lumpsum Payment																													
Interest on Lumpsum Payment																+													<u> </u>
Monthly Family Pay-Out ( 60%)		mount	apyable	e to su	bscr	iber)																							
DR Amount ( on 60% of admissib			17																										
Arrears upto Date of Commence monthly top up payout and DR on	ement of	Fami		out (ind	cludi	ing ar	rears	of																					
Top-Up Amount payable to Sub				demi	se 0	fSub	scribe	er																					<u> </u>
Family Payout payable to Spou									$\square$																				-
Interest on Arrears for Top-Up a						_				-	+	+		+	+	Ť	+	+	Ť			1							
interest on Aneuro for top op t	and applic	cable		ppnot	abic	/																							

Ver	1.0	Mar.	2025

Signature & Name of PAO :										
PAO Name	PAO Registration No.									
Date:	Place:									
Authorising the release of benefits upon rece	pipt of UPS payout Order after due Verification									
Authorised Signatory										
NPS Trust										
Date:	Place:									
Instructions	to fill the form									
1. All fields are mandatory, unless marked with Asterisks.										
2. Please fill the details of the subscriber as per the service records.										
3. Please give details of DDO, PAO, Department/Ministry of the office from	where you retired.									
4. Any one of the 5 KYC documents may be provided. In case of online filling	ng of the form Aadhar Number or CKYC ID may be provided.									
<ol><li>The current address shall be as per the KYC document provided. In case there is change in the current address, the concerned KYC documents is to be updated first.</li></ol>										
5. The mobile number and e-mail id of the claimant shall be verified separately by sending an OTP or a link as may be applicable.										
7. The field of date of joining in Central Govt regular service shall be captured from the CRA system, however, in case of any change, it shall be editable by the subscriber and duly verified by DDO.										
8. In case, Aadhaar number is being given for legally wedded spouse, only	the last four digits of the Aadhaar number may be provided.									
List of Documents to be attached with this form										
By Claimant:										
account details of Account Holder, in which the payout is to be credited.	neque of the Bank Account or any other bank document showing the name and									
ii. Copy of Death certificate of deceased Government Subscriber										
iii. Copy of PAN Card of claimant.										
iv. KYC documents of claimant.										
v. One photograph.										
vi. Specimen signature of claimant.										
By DDO:										
i. Copy of the document containing employment details verified by HOO.										
ii. Copy of the signed Form by claimant.										