

HEAD OFFICE

CHUANPUR, NH-34,

P.O: CHALTIA, BERHAMPOR

DIST:MURSHIDABAD

PIN: 742101

NOTICE: BGVB/HO/HR/ 02/2021-22

Date: 21.09.2021

Re: Payment of arrears on account of wage revision for deceased Officer/Employee

The Salary Revision in RRBs under XI-th Bipartite Settlement has come into effect from 1st November, 2017. Necessary arrangement has been made by the Bank for making the arrear payment to the employees, both serving & retirees accordingly.

We hereby draw attention of the legal heir/s of the deceased employees, who are now entitled to get his/her arrear payment of salary on account of the revision as per recent XI Bipartite Settlement as applicable to the deceased employees (officers/employees) who were in pay-roll of the Bank but expired during the period (01.11.2017 to 31.03.2021).

For all such officers/employees who were in the pay-roll of the Bank but expired during the said period (01.11.2017 to 31.03.2021), his/her legal heir/s are hereby requested to submit their application (as per attached proforma) to the Head Office. The Bank will make payment to his/her legal heir/s for the arrears as applicable in this regard.

A copy of this notice is to be displayed on the notice board of the branch/office and at Bank's website.

N.B. Applications may also be sent by mail at the following mail ld: smpa@bgvb.co.in with a copy endorsed to managerhr@bgvb.co.in

General Manager (HR)

Enclosure: As stated

APPLICATION FOR SALARY ARREARS OF DECEASED EMPLOYEE/ OFFICER

The Branch Manager				
Bangiya Gramin Vikash Bank				
R	egion			
Dear Sir,				
Re - Claim for arrear salary of th	e deceased employee/	officer.		
This is to inform you that Late Bank and he/she unfortunately die on The family pe not applicable) and his/her legal he the revision as per recent XI Biparti	d on ension has already been eir/s are now entitled to go	while continuing commenced/not	g his service or commenced (when the commence of the commence	after retirement here pension is
We now request you to kindly exert for the applicable period during (No documents.	cise the discretion of the ovember 2017 - March 2	Bank for paymen 021) in favour of	t of the arrear saus on the basis	alary to be paid of the following
 Copy of the Death Certificat Disclaimer/Relinquishment I Copy of the Legal Heirship I Copy of Pass Book of Bank 	by Recipient /Co-claiman Certificate			
A) Particulars of the deceased emp	loyee/ officer:			
Name:		Employee ID:		
Branch/Office last attended:	1	Region		
B) Date of Death:	Date of Retirement:		PPO NO:	
C) Particulars of Legal Heirs left be	hind by the deceased:			
SI Name No	Address	Relationship	Occupation	Age
1				
3				
4		7		
5				
I/ We declare that the above informations, legal representatives, executindemnify you and your successors charges and expenses which may be having agreed to pay /or paying meaning.	ators and administrators and assigns against all on the raised against or incur	jointly and several claims, demands pred by you by rea	erally undertake proceedings, los	and agree to ses, damages,
Date:	Name of the App	olicant/s	*******************	
Place:	Signature of the	Applicant/s		***
Mobile No:	Full Address (wit			
Mail ID (If any):				

BGVB SB A/C number of the recipient.

LETTER OF DISCLAIMER / RELINGQUISHMENT

(To be stamped over Rs.50/- Non-Judicial Stamp Paper)

The Branch Manager
Bangiya Gramin Vikash Bank
Branch
Sir,
With reference to payment of arrear salary on account of the revision as per recent XI th Bipartite Settlement, I/We, the following legal heirs of late
We further confirm that, it will be completely binding on me/us and I/We will never raise any questions/objections on the Bank's action on payment of proceeds of the above mentioned arrear salary I/M/e

questions/objections on the Bank's action on payment of proceeds of the above mentioned arrear salary. I/We also undertake to bind ourselves, our legal heirs and legal representatives not to revoke the declaration made therein and indemnify the Bank for any consequences arising out of payment of the said arrear.

SI No Name of the Claimant Age Sex Relation with recipient Signature

SI No	Name of the Claimant	Age	Sex	Relation with recipient	Signature
1					
2					
3					
4			7		
5			•		
6					

Place:

Date:

HEIRSHIP CERTIFICATE

SI. No.	Name of heirs	Relation with	Age	Signature / LTI

Date:....

Signature of the Competent Authority
(with Rubber Stamp)

(The heirship certificate may be issued by a Gazetted Officer, a Judicial Officer, Mayor or Councilor of a Corporation, Chairman or Councilor of a Municipality Chairman or Members of a Town Committee, Panchayat Pradhan/Head of Gram Panchayat, Notary Public under official seal or by any valued constituent of the branch.)