

APPOINTING AUTHORITY CERTIFICATE IN TERMS OF MOD LETTER
NO A/49601/AG/PS-4(E)/3363/D(PENSION/SERVICE) DT 27 AUG 87

Certified that Shri/Smt _____, the handicapped son/daughter
of _____
_____ (Name, Rank & P.No.) who is retiring on _____
is suffering from _____ and he is unfit for earning
independently as evidenced by the Medical Certificate issued by _____
dated _____ which has been countersigned by the Competent Medical Authority
(copy enclosed) .

Integrated Headquarters
Ministry of Defence(Navy)
Dte of Pay & Allowances

File No. _____

Date: _____

CONSENT LETTER

I _____ hereby give my consent to be
nominated as guardian for family pension of my brother/sister _____
son of _____
_____ (Name, Rank & P.No.).

Place _____

Date _____

Signature _____