

Date:

To,

The Director
ICMR-National Institute of Occupational Health
Meghani Nagar
Ahmedabad - 380016

Sub: Issue of Pensioner's Identity Card

Ref: PPO No. _____

Dear Sir,

I, _____ the undersigned, have
superannuated/retired on _____ from ICMR-NIOH.

It is requested to kindly issue me a Pensioner's Identity Card for which, I am submitting
herewith my details in Annexure-I along with my latest passport size photograph.

I have deposited Rs. 41/- (Rupees Forty One Only) by cash/cheque/DD/RTGS/NEFT towards
the cost of Identity Card.

Thanking you,

Yours faithfully,

(_____)

Cost towards Pensioner's Identity Card can be paid in the form of Cash or account payee cheque/ demand draft drawn in favour of the Director, National Institute of Occupational Health. It can also be remitted electronically through RTGS / NEFT to Account No.10106975123, State Bank of India, Civil Hospital Branch, IFSC Code SBIN0003043 (Copy of proof for having transfer amount to be enclosed).

Annexure - I

Name	:	
Residential address	:	
Telephone/Mobile No	:	
Blood Group	:	
Date of Birth	:	
Date of Superannuation/ Retirement	:	
Pay-Scale on Retirement	:	
Post held on Retirement	:	
Last Pay	:	
PPO No. and date	:	
Aadhar No. (If available)	:	
Any other information	:	