



NAVPEN ADVISORY

INDIAN NAVY 7th CPC PENSION REVISION - OFFICERS RETIRED / DISCHARGED / INVALIDED OUT ON OR AFTER 01.01.2016

1. In pursuance of the directives issued vide GOI, MoD letter no. 17(02)/2016-D (Pen/Pol) dated 04.09.2017 (available on www.pcdapension.nic.in), NAVPEN has commenced the process of revision of pension of Naval Officers who have retired/died/invalided out on or after 01.01.2016. The Option Form is to be mandatorily submitted by the pensioner at the earliest on or before 04.01.2018.

2. **Option Form (Appendix-A)** : The Pensioners have been given an option to commute amount of pension which has become additionally commutable post implementation of the revised orders. The pensioners are required to indicate their preference on the Option Form and sign it. **The duly signed Option Form (Appendix-A attached) is to be sent to Naval Pension Office (NAVPEN) in triplicate.** The Option Form is also available for download on <https://indiannavy.nic.in/navpen/downloads/Officer> and pcdapension.nic.in. **The Option Form received over e-mail and xerox/ photocopied documents will not be accepted by NAVPEN / PCDA(N).** The address for dispatch of Option Form is as follows:-

**The Logistics Officer-in-Charge
{SO Pension (Officers)}
Naval Pension Office
C/o INS Tanaji,
Sion Trombay Road
Mankhurd,
Mumbai - 400 088
Tel: 022-25075608**

Appendix 'A'

Form of option for commutation of Additional Pension for those Commissioned officers who retired /discharged / invalided out from Service on or after 01.01.2016 and whose PPOs have been issued at pre-revised pension rates

--XX--

I, Personal No. _____ Rank _____
Name _____
granted pension vide PPO No. -M/ _____
hereby give the following option for commutation of my revised pension becoming due to revision of my pay/pension.

1. I opt to commute the additional commutable amount, which become due on account of revision of my pay/pension.

OR

2.* I do not opt to commute the additional commutable amount which become due on account of revision of my pay/pension

Signature : _____

Name in full : _____

Address : _____

Date :

Place :

(*) to be scored if not applicable.