

PROFORMA

(To be filled in by the individual in Triplicate)

1. Name: _____ Rank: _____ No: _____

2. LRDO No. _____ Part No. _____ dated _____ S.N _____

3. **Present Address**

Permanent Address

(Period of Stay _____)

Mobile No. _____ Contact No (Landline) _____

Email ID: _____

4. Holding / Not holding Govt. Married Accommodation for _____ days /
Months after retirement = Yes / No

5. If holding Govt. Married Accommodation, give following particulars:

Qtr No. _____

Area _____

Period of occupation _____

6. CO / MES No Demand Certificate enclosed?

(a) MES - Yes / No

(b) CO - Yes / No

(Sailor's Signature)

PAN Card No. _____
(Attach Self Attested Xerox Copy)

Distribution:-

Original - Naval Pay Office, Mumbai
Duplicate - NAVPEN (Pension Section)
Triplicate - To be kept in Docket

****Note:** Fields not understood may be left blank