

भारत सरकार
वित्त मंत्रालय
राजस्व विभाग



GOVERNMENT OF INDIA
MINISTRY OF FINANCE
DEPARTMENT OF REVENUE

केन्द्रीय उत्पाद शुल्क, सीमा शुल्क और सेवा कर आयुक्त का कार्यालय
OFFICE OF THE COMMISSIONER OF CENTRAL EXCISE, CUSTOMS & SERVICE TAX
 केन्द्रीय राजस्व भवन / CENTRAL REVENUE BUILDING

आई एस प्रेस रोड : कोच्चि - 682018 / I.S. PRESS ROAD : KOCHI - 682 018

दिनांक/Dated: .05.2015

सी. स./C.No. 11/25/A.40/2015 Accts

CENTRAL EXCISE, CUSTOMS & SERVICE TAX, COCHIN ZONE
 ADVERTISEMENT NOTICE
PENSION ADALAT - 2015

Central Excise, Cochin Zone is conducting a Pension Adalat in C.R Building, I.S Press Road, Cochin on July 29th, 2015 at 11 am to redress the greivances relating to Pension/Settlement dues of Senior Citizens who retired from Central Excise, Customs & Service Tax, Cochin Zone.

Grievances of Pensioners in the prescribed proforma should be sent directly to the Deputy Commissioner, O/o the Chief Commissioner, Central Excise, Customs & Service Tax, C.R Building, I.S Press Road, Cochin - 682018 on or before 15.06.2015 duly superscribing "Pension Adalat 2015".

Grievances not connected with 'settlement dues' such as Compassionate Appointments and cases involving purely legal issues viz., Succession Certificate etc., and policy matters will not be taken up in the Adalat.

The pensioners making representations are required to make their own arrangements for travel and stay, if they choose to personally attend the Adalat.

The prescribed proforma in this regard is uploaded on website at www.cenexcisekochi.gov.in

o/c


 13/05/15
 [RANI CR]

ASSISTANT COMMISSIONER(P&V)

PROFOMA

1. Name of the Pensioners:
2. Designation and Grade of the post last held:
3. Office/Station last worked:
4. Date of Retirement/Demitting the service:
5. P.P.O. No. or other details Viz. Provident Fund :
Account Number, Employee Code (if any) etc.
In case of non-sanction of Pension.
6. Name & address of the pension disbursing bank:
7. Grievances (Full details should be given. Also quote:
If there are any previous references from the Department
in this regard).

Date:

Signature:

Name:

Address for
Correspondence:

Phone No: