

डी.टी.सी. / पेंशन सेल / 2024/1179

04.09.2024

दिल्ली परिवहन निगम
(राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार)
आई.पी. एस्टेट: नई दिल्ली- 110002

सार्वजनिक सूचना

दिल्ली परिवहन निगम के गैर-विकल्पित कर्मचारियों/पूर्व कर्मचारियों के लिए जो 31.12.2003 या उससे पहले निगम के रोल पर (on roll of DTC) थे।

डीटीसी बोर्ड द्वारा अनुमोदित प्रस्ताव संख्या 35/2022 के अनुसार, डीटीसी पेंशन योजना के इच्छुक गैर-विकल्पित कर्मचारियों/सेवानिवृत्त कर्मचारियों/उनके आश्रितों (यदि कर्मचारी का निधन हो चुका है) की वास्तविक संख्या का पता लगाने के लिए, उनकी सहमति निर्धारित प्रारूप में दी गई शर्तों के अनुसार माँगी जा रही है। सहमति पत्र का निर्धारित प्रारूप और शर्तें पेंशन सेल, डीटीसी (मुख्यालय) से या डीटीसी वेबसाइट से प्राप्त की जा सकती हैं। प्रस्तावित पेंशन योजना केवल डीटीसी के उन कर्मचारियों/पूर्व कर्मचारियों के लिए लागू होगी, जो 31.12.2003 को या उससे पहले निगम के रोल पर (on roll of DTC) थे। गैर विकल्पित कर्मचारी/पूर्व कर्मचारी/उनके आश्रित अपना सहमति पत्र भरकर इस सूचना के प्रकाशन की तारीख से 30 दिनों के भीतर प्रबंधक (पेंशन), कमरा नम्बर- 101, पेंशन सेल, डीटीसी (मुख्यालय), आई.पी. एस्टेट, नई दिल्ली- 110002 के समक्ष व्यक्तिगत रूप से या स्पीड पोस्ट /पंजीकृत डाक के माध्यम से जमा कर सकते हैं।

उप मुख्य महाप्रबंधक (पेंशन)

DTC/Pension Cell/2024/1179

04.09.2024

DELHI TRANSPORT CORPORATION
(Govt. of NCT of Delhi)
I.P. Estate: New Delhi-110002

PUBLIC NOTICE

For Non-Opted Employees/Ex. Employees of DTC who were on roll of the Corporation on or before 31.12.2003

As approved in DTC Board Resolution No. 35/2022, in order to ascertain the actual number of Non-Opted Employees/ Retired Employees/Their Dependents (in case of deceased employees) who are willing for DTC Pension Scheme, their consent is being solicited on the prescribed format on the conditions given in the format. The prescribed format along with conditions for consent may be obtained from Pension Cell, DTC (HQ) or DTC Website. The proposed pension scheme will be applicable only for the employees/ex-employees of the DTC, who were on roll of the Corporation on or before 31.12.2003. The Non-Opted Employees/Ex. Employees/Their Dependents may submit their Consent Form to Manager (Pension), Room No. 101, Pension Cell, DTC (HQ), I.P. Estate, New Delhi-110002 by hand or through speed post/registered post within 30 days from the date of publication of this Notice.

Sd/-
Dy. CGM (Pension)

CONSENT FORM

With reference to Advertisement No. _____ dated _____ published in the newspaper by DTC, whereas I _____ retired from the post of _____, Pay Token No. _____

OR

whereas I _____ legal heir of Sh./Smt. _____, _____ (Designation), Pay Token No. _____ hereby give my consent for DTC Pension Scheme on the following terms & conditions: -

1. I am ready to deposit the amount of employer's share of PF, paid to me/my husband/my father/my mother at the time of retirement.
2. I am ready to deposit the difference of gratuity paid to me/my husband/my father/my mother at the time of retirement.

Note: a) Employer's share of PF and difference of Gratuity paid to the ex-employees at the time of their retirement will have to be refunded by ex-employees along with year-wise saving account interest received by them yearly on it from the date of retirement.

b) The proposed pension scheme will be made applicable from the date of deposit of the employer's share taken by ex-employees at the time of retirement.

3. I will withdraw my/our Pension Case in the Court against DTC, if any, pending in any court of India before depositing the Employer's share of PF with the Pension Trust of DTC.
4. I also undertake that I would not claim pension for the period from the date of my/my husband's/my father's/my mother's retirement to the date of depositing the Employer's Share of PF.
5. I understand that this is only in the form of an intimation of intent to DTC and does not involve commitment in any manner, which would be subject to various parameters to be examined by DTC later on.

Details of my consent are given as under: -

S. No.	Particulars	Details
1	Name of the applicant (self/legal heir)	
2	Relation with the ex-employee	
3	Last Unit/Depot of Ex-employee	
4	Date of Retirement	
5	Last Pay Drawn	
6	Residential address	
7	Mobile Number	
8	Email-id	

Signature : _____

Name : _____