LIST OF DOCUMENTS TO BE SUBMIT FOR SANCTION OF WIDOW PENSION.

1. COVERING LETTER ADDRESSED TO THE SECRETARY, A.P.L.A. HYDERABAD.
2. DEATH CERTIFICATE ORIGINAL.
3. LEGAL HEIR CERTIFICATE / FAMILY MEMBERS CERTIFICATE (ORIGINAL OR XEROX COPY DULY ATTESTED).
4. PASSPORT SIZE PHOTO OF THE APPLICANT (4 PHOTOS).
5. ONE JOINT PHOTOGRAPH
6. AFFADAVIT DULY NOTORISED (RS. 10 STAMP PAPER).
7. I.D. PROOF OF THE APPLICANT.
8. RETURN OF I.D. CARD OF THE EX-LEGISLATOR / SPOUSE.
9. SAVINGS BANK ACCOUNT OF STATE BANK OF HYDERABAD, ANY BRANCH, OR ANY OTHER NATIONALISED BANK.
FORM I A
(See rule 4)

PENSION APPLICATION FOR USE OF THE WIFE OF A DECEASED LEGISLATOR

1. Name of the Applicant:
   (in Block Letters)

2. Name of the deceased Legislator:
   (in Block Letters)

3. Permanent residential address
   showing village or town and
district:

   Particulars of the period during which
   the applicant’s husband served as a
   Member in accordance with Section
   11D of the Andhra Pradesh Payment of
   Salaries and Pension and Removal of
   Dis-qualifications Act, 1953:

   (a) Legislative Assembly
       (1) From ....................... to .....................
       (2) ...........................................
       (3) ...........................................

   (b) Legislative Council
       (1) From ....................... to .....................
       (2) ...........................................
       (3) ...........................................

   (c) Legislative Assembly/Legislative Council
       From ....................... to .....................

4. A. Constituency .................................................................

5. Identification marks (1)
   of the applicant: (2)

6. Whether three copies of passport size photographs of the applicant
   are enclosed:

7. Whether four specimen signatures, duly attested are enclosed:

8. Date of death of the deceased Legislator.
9. Whether the applicant's husband was in receipt of Legislator's pension; if so, mention the L.P.P.O. No. and date:

10. Whether the applicant desires the pension to be paid by cheque or to be credited to her account in a Scheduled Bank; and if so, the name of the Bank, place and account number, to be specified:

11. Whether the applicant is in receipt of any salary or pension either from the Central Government or the State Government or any Corporation owned or controlled by the Central Government or the State Government or any local authority; if so give particulars of the same:

I certify that all the particulars furnished above are true and correct to the best of my knowledge.

Place: 

Date: 

Signature of the Applicant.

To
The Secretary,
Legislature Department,
Public Gardens,
Hyderabad.

*This should be attested by a sitting member or former member of the Andhra Pradesh Legislative Assembly / Andhra Pradesh Legislative Council who is drawing pension or by a Gazetted Officer of the State Government.*
FORM-IV
(See rule 10)

CERTIFICATE

Certified that Smt. .................................................. age ...................................
years resident of H.No. ..................................... Ward No. ............................. Locality .........................................
Village ........................................ Mandal .................................. District ........................................
is the wife of late Sri .......................................................... former member of
the Andhra Pradesh Legislative Assembly from ........................................ to ........................................
Andhra Pradesh Legislative Council from ........................................ to ........................................
from .................................................. Constituency of ................................. District ........................................

Certified further that Smt. .................................................. Wife of Late
Sri ............................................... is not re-married after the death of her husband.

Place : ............................................................ Signature

Date : ............................................................

*This should be issued by a sitting member or former member of the Andhra Pradesh Legislative Assembly / Andhra Pradesh Legislative Council who is drawing pension or by a Gazetted Officer of the State Government.
WIDOW PENSIONER’S VERIFICATION CERTIFICATE

1. Name of Pensioner Smt.

2. W/o. Late (Sri)

3. Date of birth

4. P.S.O. No.

5. Term / Tenure

6. Name of bank

7. Bank account No.

8. Present residential address

Phone No.

Certified that I have seen the above pensioner as on .......................................................... and she is alive on this date. The particulars furnished above are true and true to the best of my knowledge.

Left hand thumb
Impression of the pensioner

OR

(Signature of the pensioner)
Signed before me.

Signature of the
(with name, date and seal)

FOR OFFICIAL USE ONLY
SPECIMEN SIGNATURES

1. 
2. 
3. Attested by [with stamp]
   M. R. O

SPECIMEN SIGNATURES

1. 
2. 
3. Attested by [with stamp]
   M. R. O

SPECIMEN SIGNATURES

1. 
2. 
3. Attested by [with stamp]
   M. R. O

SPECIMEN SIGNATURES

1. 
2. 
3. Attested by [with stamp]
   M. R. O
AFFADAVIT

I ____________________, W/O. LATE ____________________
_________________, Ex.MLA/Ex.MLC aged about _____ years R/o.
______________________________ do hereby solemnly
affirm and state on oath as follows:-

1. That I am the deponent herein and as such I am well
   acquainted with the facts of this affidavit.

2. That my husband Late. ____________________________
   Ex.MLA/Ex.MLC Expired on ____________, leaving
   behind the following as legal heir/family member.

3. That the above particulars regarding successors of my
   deceased husband Late ________________ ____________
   Ex.MLA/Ex.MLC who died on ______________ which is true
   and correct to the best of my knowledge and belief. The said
   successors are only the legal and successors.

Contd....2.
If at any points of time, it is detected that I have obtained this certificate by wrongful means. I may be penalized under relevant sections of IPC, and, I forfeit all benefits claimed under this certificate.

Sworn and signed before me
On this the 6th day of July, 2012,
At Hyderabad.

DEponent.