

South Western Railway  
Complementary Pass Form

Annexure-XIV

**APPLICATION FOR POST RETIREMENT PASSES**

I desire to obtain my post-retirement complimentary passes from the office of \_\_\_\_\_

1.	Name (in block letters)	
2.	Father's name	
3.	Designation on retirement (both off & substantive)	
4.	Office/station from where retired	
5.	Scale of pay on retirement	
6.	Rate of pay on retirement (both off & substantive)	
7.	Date of appointment	
8.	Date of Retirement	
9.	Total length of service	
10.	Date of entry in to Gaz Cadre	
11.	Total service in Gaz Cadre	
12.	Class of pass entitled to	
12(a).	Whether opted out of widow Pass scheme or not	
13.	No. of sets of post retirement complementary passes entitled to in a calendar year.	
14.	No of privilege passes availed during the year of retirement	
15.	No. of locality of Rly. Quarter	
16.	Duration of permission granted for retention of quarter	
17.	Date of vacation of quarter	
18.	Address of correspondence	
19.	Specimen signature of the retired employee	01.  02

Place \_\_\_\_\_

Date \_\_\_\_\_

Signature of the employee

# SOUTH WESTERN RAILWAY

Annexure-XIV-A

## PARTICULARS OF FAMILY MEMBERS FOR POST RETIREMENT COMPLEMENTARY PASSES

Sl.No.	Name	Relationship	Date of Birth

Place \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of the employee