

ANNEXURE-I

To, The Regional Provident Fund Commissioner
Employees Provident Fund Organization, Zonal Office,
DK Block, Sector – II, Salt Lake City, Karunamoyee,
Kolkata – 700 091

**Sub: Joint Option Form under Para 11(3) and Para 11(4) of EPS -1995 in
pursuance of the Hon'ble Supreme Courts's Judgement dated 4th November 2022.**

Sir,

As abundant caution for compliance to above and in order to meet deadline stipulated
in aforesaid judgement, the joint option form is hereby submitted for exercising joint
option as under

Member's Particulars

1	Name of current / retired employee	
2	PPO No. (Applicable for employees who have attained 58 years of age but not attained 60 years)	
3	Date of retirement (on attaining 58 years)	
4	UAN No.	
5	EPF A/C No.	
6	Address for correspondence with PIN Code	
7	Mobile No:	
8	Email	
9	Aadhaar No.	

Declaration by the Employee/ Pensioner

I,..... , am/was a member under the Employees' Pension Scheme,1995 contributing towards the Provident Fund on my actual salary and equal amount contributed by the Employer also as provided under Para 26(6) of the Employees' Provident Fund Scheme 1952. It is further certified that an amount at the rate of 8.33% of the statutory ceiling of the Employer contribution is/had been remitted every month to Employees' Pension Scheme,1995.

I hereby opt to contribute on my actual wages to the Pension Fund and exercising option as per the rules of the Employees' Pension Scheme,1995 and EPS 2014.

I further hereby authorize the EPFO to divert the statutory Pension Contribution on my actual salary exceeding the statutory ceiling from Provident Fund Account to the Pension Fund Account along with the up to date interest as declared under the EPF Scheme, 1952 from time to time.

I hereby further undertake to remit the additional amount if any, as per the demand of EPFO on account of any short fall to my Provident Fund account.

I understand that the option exercised is irrecoverable at any later date and no claim for the change of option shall be considered under any circumstances.

I also undertake that if any other legal / administrative formality is required in this regard, I am ready to do accordingly.

I shall also be ready to bear any financial liability arising out of the option availed for higher pension on actual salary / wages.

Place:

Date:

(Name & Signature)

Undertaking by the Employer

I, Suman Banerjee, Deputy General Manager (Human Resources), being the authorized signatory of M/s West Bengal Electronics Industry Development Corporation Ltd., do hereby certify that Mr / Mrs is/was an employee of this establishment with PF A/c No. WB/CAL/ _____ .

During his/her service, we, as the Employer, have contributed the Employer's share of Provident Fund Contribution on his/her actual salary without break as per the terms of Paragraph 26(6) of the Employees' Provident Fund Scheme 1952. This establishment has no objection if he/she deposits due differential amount to the Employees' Pension Scheme, 1995, thus making him/her eligible for drawing Pension on his/her actual salary.

Disclaimer

The Joint option submitted by employees does not confer any right to receive higher pension nor does it create any liability / obligation Financial or legal or any kind for WBEIDC as an Employer

Place:

Date:

(Name and Signature of Employer)

UNDERTAKING

To,

The Deputy General Manager (HR)

West Bengal Electronics Industry Development Corporation Ltd.

Kolkata – 700091

I Badge No..... , having EPF Account No. WB/CAL/ , is aware of the following conditions;

I, the undersigned member/pensioner, understand that my employer, M/s West Bengal Electronics Industry Development Corporation Ltd., signed the Joint Declaration on condition that the wages for pension on the actual salary will be according to the actual salary payments made as per the monthly salary slips only.

I, the undersigned member/pensioner, also understand that the above joint request/option shall not entail any financial and/or Legal Liability on M/s West Bengal Electronics Industry Development Corporation Ltd, who is/was my employer. In case of any financial liability including any damages levied/imposed on M/s West Bengal Electronics Industry Development Corporation Ltd consequent to and/or in connection with the above referred joint request/option for higher EPS pension, the financial liability will be completely borne by the undersigned.

I understand that my employer is signing the higher EPS pension joint option form based on the above conditions and I abide by all terms and conditions, and I assure that I will not make any future claims over and above the actual salary payments as per the monthly salary slips.

Place :

Date:

Signature of the member/ Pensioner with Name and Address