## LIFE CERTIFICATE

[This Life Certificate is Valid Upto December 2020]

Certified that I have seen the pensioner	
Shri / Smt	holder of The WBSCB Fixed
Pension and that He/ She is alive on this Date.	
NAME OF CERTIFYING OFFICER:	
PLACE : Da	te :
Designation& Office ID Number of Certifying Officer:	
(Signature of the Certifying Officer)	(Bank Seal)
TO BE FILLED BY THE PEN	SIONER
PENSIONER INFORMATION: I submit herewith additional details as under: Income Tax PAN No:	F (5)
Mobile Number(s) :	
Permanent Postal Address of the Pensioner:	
NAME OF PENSIONER:	
[Account Detials of the Pensioner where the Pension	Amounts are being credited ]
SAVINGS ACCOUNT NUMBER:	
IFS CODE:	
DATE : / [ FULL SIG	NATURE OF THE PENSIONER ]
Special Request:	-

For The WBSCB Ltd –HO / Regional Office(s) or Branches: Any Officer is Eligible to Certify. For Other Bank Branches: Any Officer of the Bank is Eligible to certify.



