LIFE CERTIFICATE

[This Life Certificate is Valid Upto December 2021]

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 :	Date :
Designation& Office ID Number of Certifying Officer:	
(Signature of the Certifying Officer)	(Bank Seal)
TO BE FILLED BY TH	HE PENSIONER
PENSIONER INFORMATION: I submit herewith additional details as under: Income Tax PAN No: Mobile Number(s):	
Permanent Postal Address of the Pensioner:	
NAME OF PENSIONER: [Account Details of the Pensioner where the SAVINGS ACCOUNT NUMBER:	-
IFS CODE:	
DATE :/	[FULL SIGNATURE OF THE PENSIONER]
Special Requ	uest:

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.



