

**100 % DEARNESS RELIEF (DR) NEUTRALISATION FOR PRE – 01.11.2002**  
**RETIREES/ FAMILY PENSIONERS W.E.F. 01.10.2023**

Bank has issued instructions vide e circular No CDO/P&HRD-PPFG/3/2023-24 dated 13.11.2023 for payment of DR neutralisation to all pre-01.11.2002 pensioners / family pensioners, w.e.f. 01.10.2023.

In this regard, all the pre-01.11.2002 pensioner / family pensioners, eligible for 100 DR neutralisation payment are requested to submit the undertaking as per Annexure 'B' to the pension paying branch/ nearest SBI branch/ Circle PPGs through dak/email/personal visit.

Copy of the Annexure 'B' and email IDs of the circle PPGs is attached below.

Sl. No	CIRCLE	Email id of AGM PPG
1	Ahmedabad	agmppg.lhoahm@sbi.co.in
2	Amaravati	agmppg.lhoand@sbi.co.in
3	Chennai	agmppg.lhoche@sbi.co.in
4	Mumbai Metro	agmppg.lhomum@sbi.co.in
5	Chandigarh	agmppg.lhocha@sbi.co.in
6	New Delhi	agmppg.lhodel@sbi.co.in
7	Kolkata	agmppg.lhokol@sbi.co.in
8	Bengaluru	agmppg.lhoban@sbi.co.in
9	Hyderabad	agmppg.lhohyd@sbi.co.in
10	Bhopal	agmppg.lhobho@sbi.co.in
11	Guwahati	agmppg.lhoguw@sbi.co.in
12	Thiruvananthapuram	ppg@sbi.co.in
13	Bhubaneshwar	agmppg.lhobhu@sbi.co.in
14	Lucknow	agmppg.lholuc@sbi.co.in
15	Jaipur	agmppg.lhojai@sbi.co.in
16	Patna	agmppg.lhopat@sbi.co.in
17	Maharashtra	agmppg.lhomah@sbi.co.in

To  
The Branch Manager,  
State Bank of India

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Madam/ Dear Sir,

**Revision in Pension/ Family Pension in respect of those employees of SBI/ e-ABs who retired Pre- 01.11.2002.**

I am presently drawing Pension/ Family Pension through your \_\_\_\_\_  
Branch/ Office in \_\_\_\_\_ Circle and my pension reference/PF number  
is \_\_\_\_\_.

I am eligible to get increase in monthly pension/ family pension being paid to me on account of the recent 100 % neutralization of Dearness Relief (DR) in respect of employees retired prior to 01st November 2002. I request you to pay me such revised pension at your earliest. I understand that you are agreeable to release such revised pension, pending amendments in Employees' Pension Fund Regulations. In this connection, I hereby irrevocably authorize you to make any recoveries/ adjustments out of my future pension, if it is revealed at any time that I have been paid such increased pension wrongly or inadequately. I undertake to repay the amount immediately on demand, in lumpsum. In the event, I do not repay the said amount when demanded; the Bank will be entitled to recover the said amount by debit to my/ our account/ pension account. This undertaking/ authority is irrevocable and is binding upon me/ my legal heirs/nominees as well.

I am also aware that revised pension being paid to me shall be effective from 01.10.2023  
and that no arrears prior to said date are payable to me.

Date:  
Place:

Yours faithfully

(Name of the pensioner/ family pensioner)