



भा.कृ.अ.प. - केन्द्रिय मात्स्यिकी शिक्षा संस्थान  
ICAR - CENTRAL INSTITUTE OF FISHERIES EDUCATION  
(Deemed University), (A University Established Under Sec. 3 of UGC Act 1956)

Panch Marg, Off Yari Road, Versova, Andheri (West), Mumbai - 400061

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F. No. FIN.(46)/6-1/2018-19

Date: 6<sup>th</sup> March 2025

To,

The Director,

1. ICAR-CIFE, Mumbai
2. ICAR-NIASM, Baramati
3. ICAR-CIRCOT, Mumbai
4. ICAR-CCARI, Goa
5. ICAR-NRC Grapes, Pune
6. ICAR-DOGR, Pune
7. ICAR-NRCP, Solapur
8. ICAR-DFR, Pune
9. ICAR-ATARI, Pune

**Sub: Conduct of Pension Adalat at ICAR-CIFE, Mumbai on 10<sup>th</sup> Mar 2025 - reg.**

- Ref: 1. Council's letter F.No.FIN/10/09/2018-Pension (Vol.II) dt. 03.03.2025  
2. Dept. of Pension & Pensioner's Welfare OM No. 1/2/2022 (JCM)-P&PW (E) dt. 15.01.2024

Sir,

As per the directions of ICAR, it is informed that the Pension Adalat for Pensioners/Family Pensioners under the Pension Authorizing Unit of ICAR-CIFE is scheduled on 10.03.2025 (Monday) at 03.00 pm through video conferencing mode.

Therefore, the Institutes are requested to inform their pensioners about the Pension Adalat and grievances related to the pension if any of the pensioners in the following format may be sent through e-mail to [cifepensionunit@cife.edu.in](mailto:cifepensionunit@cife.edu.in) on or before 10th March 2025 ( up-to 11.00 a.m.).

Name of Pensioner/Family Pensioner	
Post held by the Govt. servant at the time of retirement/death	
Name of the Institute where working at the time of the retirement/death	
PPO No. & date	
Address for communication	
Mobile No.	
Email address	
Details of grievance related to pension	

The link for the virtual meeting will be sent to the concerned pensioners separately on the e-mail ID intimated by them.

This is issued with the approval of the Pension Authorizing Authority.

Yours faithfully,

(S. V. Kasabe)

Senior Finance & Accounts Officer



Copy to:

1. Joint Director Cell, ICAR-CIFE Mumbai
2. Joint Director (Admn), ICAR-CIFE Mumbai
3. Comptroller, ICAR-CIFE Mumbai
4. SAO/SFAO/AO/AAO/AFAO, ICAR-CIFE Mumbai
5. File copy

No.	Name of the Officer	Designation	Remarks

*[Faint signature or stamp]*