



TEA BOARD

14, Biplabi Trailokya Maharaj Sarani
Kolkata – 700001

Dated: 14/07/2017

OFFICE MEMORANDUM NO: 84/2017

The undersigned is directed to request all the officers and employees of the Board to exercise their option **urgently** as per the enclosed pro-forma which is required for fixation of their pay in the revised pay structure with effect from 1st January, 2016 in terms of Central Civil Service (Revised Pay) Rule, 2016. The format for option & undertaking may be downloaded from Board's website at www.teaboard.gov.in.

Encl: As Stated.


(P. K. Dash)
Assistant Secretary

Distribution

1. All officers of the Board in Head Office, Kolkata
| With the request to circulate the enclosed form amongst the employees working under them and advice them to send their option & undertaking duly signed to Estt. Branch at the earliest.
2. Executive Directors, Coonoor & Guwahati
3. F.A. & C.A.O.(I/C)
4. Sr. Accounts Officer
5. All Regional/Sub-Regional Offices of the Board
| With the request to circulate the enclosed form amongst all employees working under them and to forward the option & undertaking of each employees duly signed by them along with the options & undertaking of themselves to this office at the earliest..
6. System Analyst -----
| With the request to upload in the Board's Website.
7. Secretary to Dy. Chairman
8. TBOA/TBEA/TBWA
9. Secretariat Branch
10. T.B.O.A./T.B.E.A./T.B.W.A.
11. Establishment Branch -----
| With spare copies

Ref. File No. 23(31)/Estt/2016
(Hindi version follows)

FORM OF OPTION

{ See Rule: 6(2) of CCS(RP) Rules, 2016 }

*1 I, _____ hereby elect the revised pay structure with effect from 1st January, 2016

*2 I, _____ hereby elect to continue on Pay Band and Grade Pay of my substantive/officiating post mentioned below until :

* the date of my next increment / the date of my subsequent increment raising my pay to Rs. _____ / I vacate or cease to draw pay in the existing pay structure/ the date of my promotion / upgradation to the post of _____.

Existing Pay Band and Grade Pay _____.

Signature: _____

Name _____

Designation _____

Office in which employed _____

*** To be scored out, if not applicable**

UNDERTAKING

I hereby undertake that in the event of my pay having been fixed in a manner contrary to the provisions contained in these Rules, as detected subsequently, any excess payment so made shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise.

Signature: _____

Name _____

Designation _____

Date:

Place: