"हर काम देश के नाम"



कार्यालय रक्षा लेखा महानियंत्रक



OFFICE OF THE CONTROLLER GENERAL OF DEFENCE ACCOUNTS

उलान बटार रोड, पालम, दिल्ली छावनी - 10

ULAN BATAR ROAD, PALAM, DELHI CANTT. 110010

Phone: 011-25665500/56 Fax: 011-25674777 ema

email: admnix.cgda@nic.in

No.: AN/X/10050/AVL-2024

Dated: 13/06/2024

To

All PCsDA/CsDA

(Through Website)

Subject:

Transfer – DAD Establishment

(Station/Organisation senior on proforma strength in respect of AAOs & Staff.)

Keeping in view the receipt of large number of transfer requests of AAOs/SAS App./Staff serving at various stations including Hard/Tenure etc. for posting to their choice stations, the Competent Authority has decided to call for details of Station/Organisation seniors in order to repatriate/accommodate eligible volunteers and to address the resultant crucial vacancies. It is, therefore, requested to forward details on prescribed format of all AAOs/SAS App./Staff serving under your organisation including PIFA/IFA offices under your proforma control as per the details mentioned below:

- i. Station seniors amongst AAOs for Bhubneshwar, Gaya, Panagarh, Patna, Ramgarh, Ranchi, Siliguri, Jaipur, Jodhpur, Kota, Udaipur, Babina, Lucknow, Varanasi, who are completing 02 years at the station up to 31.07.2024 & for all other stations who are completing 03 years at the station up to 31.07.2024.
- ii. Organisation seniors amongst AAOs who are completing 05 years in CDA Patna, PCDA (A) Lucknow & who are completing 03 years in PCDA (A) Jaipur up to 31.07.2024
- iii. Station seniors amongst officials (SA, Adr, Clk, Steno, STO, JTO) for Bengdubi, Bhubneshwar, Darjeeling, Gaya, Kankinara, Patna, Ramgarh, Ranchi, Siliguri, Alwar, Bharatpur, Bikaner, Hisar, Jaipur, Jodhpur, Kota, Suratgarh, Faizabad, Kanpur, Lucknow, Varanasi, who are completing 03 years at the station up to 31.07.2024 & for all other stations who are completing 05 years at the station up to 31.07.2024.
- iv. Organisation seniors amongst officials (SA, Adr, Clk, Steno, STO, JTO) who are completing 05 years in CDA Patna, PCDA (A) Lucknow & who are completing 03 years in PCDA (A) Jaipur up to 31.07.2024
- 2. The information may be furnished in the Annexure circulated vide HQrs circular No. AN/X/10050/10/2014 dated 08/08/2014 keeping in view the instructions relevant to the respective Annexure. In addition to the above, the following additional guidelines may also be kept in view while rendering detail of station/organisation seniors.

- a) It may please be ensured that 'Annexure-A/2' (in ORIGINAL) in respect of each station/organisation senior must be enclosed duly completed in all respects.
- b) Service profile in 'Annexure C' in respect of station/organisation seniors irrespective of Command/Organisation along with 'Annexure-D' indicating the date up to which the transfer is deferred, must be attached.
- c) Details of station/organisation seniors in 'Annexure-E' who were exempted earlier and details of station seniors seeking exemption in current year may be furnished in 'Annexure-F'. It may please be ensured that in case name of any individual is also included in 'Annexure B/2', the Sl. No. of 'Annexure-E & F', as the case may be, must be mentioned in remarks column of 'Annexure-B/2' for proper linking and to avoid any unwarranted transfer.
- 3. While forwarding the above Annexure, it may please be ensured that names of those individuals who have completed/completing 56 years of age as on 31.12.2024 are not to be included in the list of Station/organisation seniors.
- **4.** If name of any of the individual has been sponsored for deputation or other panel like Bhutan/Port Blair/Northern Region etc., as on the date of forwarding list, the same should invariably be mentioned in the remarks column against the name of the individual in Annexure B/2. Besides, any subsequent change in status of individual on any ground affecting decision related to his/her transfer may also be intimated.
- 5. Service rendered by an employee in erstwhile Group 'D' grade, if any, may be excluded while determining his/her station/organisation seniority for the purpose of transfer. The date of promotion to the grade from erstwhile Group 'D' to Group 'C' in case of Clerks/Auditors/Sr. Auditors may invariably be indicated against affected officials in terms of directions as contained in HQrs circular dated 26/02/1983 (copy available on CGDA website) in order to correctly arrive at Station/Organisation seniority of an official.
- 6. Individuals seeking exemption as per guidelines contained in the transfer policy may be advised to submit supporting documents (Specific certificates only) along with 'Annexure-A/2' to enable this office to examine the requests for exemption from transfers.
- 7. Further, it is also requested that old transfer/exemption requests on medical ground should be screened at Controller level before forwarding the same to HQrs office. Only relevant medical certificate should be attached with the application/ request. In this connection, a proforma may also please be forwarded with recommendation of GO (AN) as per this office letter no. AN/X/10050/AVL-10/2023 dated 14.07.2023.
- 8. All the station/Organisation seniors may please be alerted and informed that they are likely to be transferred out as per administrative requirement. It is also clarified that they may also be transferred to other than their choice station, as per administrative requirement. It may also be noted that no internal rotation of staff within the organisation is carried out after furnishing this report to HQrs, save as provisions contained in para 2 (i) of circular dated 08.08.2014.
- 9. This report in MS-Excel may kindly be furnished to this office through email (admnix.cgda@nic.in) and information in hard copy as well, along with other documents by 31.07.2024 positively.

Nil report is also required.

(Satish Kumar Tripathi) Sr. Accounts Officer (AN)



No. AN/X/10050/AVL-10/2023

कार्यालय, रक्षालेखामहानियंत्रक

OFFICE OF THE CONTROLLER GENERAL OF DEFENCE ACCOUNT

उलानबटार रोड,पालम, दिल्ली छावनी - 10

ULAN BATAR ROAD, PALAM DELHI CANTT.110010

www.ubest.lightfill .di.light

Dated: 14/7/2023

To

All PCsDA/PIFAs/CsDA/IFAs and PCA (Fys)

Subject:

Transfer Establishment: DAD - AVL 2023 reg.

It has been decided by the Competent Authority to expedite the processing of AVL 2023. It is therefore, requested to arrange and forward AVL 2023 for all cadres upto SAO by 31st July 2023. Accordingly, transfer requests received in your office, may be forwarded duly recommended in the AVL 2023 as per the transfer policy in prescribed proforma enclosed with HQrs office letter no. AN/X/10050/10/2014 dated 8/8/2014. Nil report is also required.

2. Further, it is also requested that all transfer/exemption requests on medical ground should be screened at your end before forwarding the same to HQrs office. Only relevant medical certificate should be attached with the application/request. In this connection, a proforma is also enclosed which shall be forwarded duly signed by GO (AN) along with the request if the same is on medical ground.

Please accord priority.

Copy to:

1. AN-IV Section (Local).

IT &S Wing (Local).

AN-II/IX Section (Local)

For necessary action.

For uploading on website of HQrs office.

For information.

SUL

Dy. CGDW (AN)

(Sahil Goyal) Dy. CGDA (AN)

PROFORMA FOR APPLICATIONS FORWRDED ON MEDICAL GROUND

SI. No.	Remark	Yes/No
1.	Whether Medical Certificate is from a Govt. Hospital/ Wellness Centre.	
	(Copy of Certificate to be enclosed)	processing and "
2.	Whether the disease/illness is listed by the Govt. of India/DAD in their guidelines related to transfer/posting.	
3.	Whether the request has been screened at your end before forwarding to HQrs office.	isn of the state o
4.	Whether bills have been admitted/ permission taken by individual/ dependent for Special treatment from PCDA/CDA and	Maria Service
	if yes, details of payments may be provided.	
5.	Whether request is recommended.	

Group Officer (Admn)

FORMAT TO BE FILLED BY STATION SENIORS

(Original copy to be forwarded to HQrs.)

1	ACCOUNT NO					
2	GENDER (Male/Female)					
3	NAME					
4	CATEGORY (GENERAL/OBC/SC/ST/PH)					
5	GRADE (AAO/SO(A)/SAS(App)/SUPERVISIOR(A/c)/Sr.AUDITO	OR/AUDITOR/CLERI	()			
6	DATE OF BIRTH (DD/MM/YYYY)	**************************************				
7	DATE OF APPOINTMENT (In DAD) (DD/MM/YY	YY)				
8	DATE OF PROMOTION (As Group 'C' in r/o Staff &	SO(A) in r/o offic	cer)			
9	ROSTER No. & CATEGORY (Mandatory in case of	AAO)		3.		
10	Whether appearing in ensuing SAS Part-II (in case of Sr. Auds/Auditors/Clerks/Stenos/DEOs)					
11	HOME TOWN (Specific District as per Service Record Not Vi	llage or State)				
12	SERVICE PROFILE (In DAD)					
	Name of Office (Mention Sensitive assignment also)	Organisation	Whether on Sensitive Assignment (Yes / No)	Station	From Date (dd/mm/y yyy)	NAC - PARAMETER
5,			1			
	1					The state of
13	CHOICE STATION	First Preferer	ice			- 407
	(Station (NOT Office)where DAD offices are located and BHUTAN/ PORTBLAIR may not be opted as a	Second Prefe	rence			
THE TAX	separate panel exists for these stations)	Third Prefere				

ANNEXURE - 'A-2' (Contd.)

	Whether EDP trained (If yes, specify project)			
.5	APAR GRADING	APARI.	APAR2	20年9年9
.6	BRIEF GROUNDS FOR EXEMPTION			
	(If requesting and as per Transfer Policy)			
	The second secon			
	A STATE OF THE PARTY OF THE PAR			
	Attach Latest Medical Certificate (NOT MEDICAL PRESCRIPTION) /Rele	vant certificate	e in other cas	es.
				,
	DETAIL OF CERTIFICATE			
	ISSUING AUTHORITY			
	ISSUE DATE			
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE			
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE			
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE			
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED			
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any)		ELECTION AL	
17	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING			
17	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any)			
17	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING			
17	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct. Date:		URE OF APPL	ICANT)
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct.		URE OF APPL	ICANT)
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct. Date:		URE OF APPL	ICANT)
	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct. Date: [ALL COLUMN ARE MANDATORY AS PER APPLICATION OF THE PROPERTY		URE OF APPL	ICANT)
18	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME IMENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct. Date: (ALL COLUMN ARE MANDATORY AS PER APPLICATION OF THE PROPERTY OF THE PROPERT		URE OF APPL	ICANT)
18	ISSUE DATE GROUND MENTIONED IN CERTIFICATE NAME MENTIONED IN CERTIFICATE RELATION WITH EMPLOYEE PERIOD OF EXEMPTION REQUESTED PREVIOUS EXEMPTIONS (if any) UNDERTAKING I hereby certify that the information furnished above are correct. Date: (ALL COLUMN ARE MANDATORY AS PER APPLICATION OF THE PROPERTY		URE OF APPL	ICANT)

ANNEXURE - 'B-2'

Name of Station Seniors From the Organisation -

SL NO	ACCOUNT NO	GENDER (M-Male F-Female)	NAME	CATEGORY	GRADE	Date of Birth (dd/mm/yyyy)	Date of Appointment (dd/mm/yyyy)	HOME TOWN (District only)	STATION where Serving
1	2	3	4	5	6	7	8	9	10

ANNEXURE - 'B-2' (Contd.)

SERVING DATE	CHOICE1	CHOICE2	CHOICE3	EDP	Whethe	APAR1	APAR2	APAR3	RECOMMEN	REASON	RECOMMENDED	Remarks (Deta
(dd/mm/yyyy)	CHOICEL	CHOICEZ	CHOICES	('Y'-Yes	I DANGE SCALE	1			DATION	STATE SHOW AND ADDRESS.	FOR EXEMPTION	whether
(00////////////////////////////////////		-		/'N'-	appeari				(Y-Yes,		INCLUDED IN	volunteered fo
				No)	ng in				N-No)		ANNEXURE'D' AT	any other
				"""	ensuing	(Upt	o two de	cimal	1		SL NO	Panel/HYL)
					SAS Part		number					
					11							
									1		1	
_											1	
		_			=							
10.5												
11	12	13	14	15	16	17	18	19	20	21	22	23
							1					
									1	-		

Date:

(SIGNATURE AND SEAL OF G.O.(AN))

SERVICE PROFILE OF THE INDIVIDUALS

ACCOUNT NO	GRADE	OFFICE	ORGANISATION	STATION	(dd/mm/yyyy	TO DATE (dd/mm/yy yy)	DEPUTA TION
						Mr. Tarana	
						141	
	-	 					
	1	-					
	-	1					
		+					
					1 "		
		-					



E - 'D'	Name of Officials From the Organisation - whose Transfer Order have been DEFFERED							
ORDER LETTER NO.	TRANSFER	STATION where Serving	GRADE	NAME	GENDER (M-Male F-Female)	ACCOUNT NO	SL NO	
10	-	9	5	4	3	2	1	
1		9	3		3	2	1	

ANNEXURE - 'D' (Contd.)

TRANSFER ORDER LETTER DATE	Transpendence - present	GROUND FOR DEFFEREMENT	DEFFEREMENT LETTER NO		DEFFERED UP TO
11	12	13	14	15	16

(SIGNATURE AND SEAL OF G.O.(AN))



Name of Station Seniors From the Organisation -

seeking exemption

SL NO	ACCOUNT NO	SEX (M-Male F-Female)	NAME	GRADE	DOB Date of Birth (dd/mm/y yyy)	(dd/mm/y	HOME TOWN (District only)	STATION where Serving	OFFICE	SERVING DATE (dd/mm/s yyy)
						yyy)		38 7		
1	2	3	4	5	6	7	8	9	10	11
> -			page.							

ANNEXURE - 'F' (Contd.)

GROUND FOR EXEMPTION (as per Transfer Policy) ('AGE'-Above 56 Years, 'PC'-Physically Challenged(above 50%), 'MED.SELF', 'MED.DEP.', 'SINGLE PARENT', 'EDUCATION-X/XII')	CERTIFICATE ATTACHED (Yes / No) (Whether Latest Medical / Single Parent / Education Certificate)	EXEMPTIO	100 CONTRACTOR 1	EXEMPTED UPTO (dd/mm/yy yy)	ON	ENDATION	(If No/Condit ional, than reason	EXEMPTIO N (Yes / No)
20	21	22	23	24	25	26	27	28
			- 6					

Date:

	(
	ì
	-
(SIGNATURE AND SEAL OF G.O.(AN))	

Name of Station/Organisation Seniors From the Organisation - already EXEMPTED

SL NO	NO NO	GENDER (M-Male F-Female)	NAME	GRADE	Date of Birth (dd/mm/yyyy)	Date of Appointment (dd/mm/yyyy)	HOME TOWN (District only)	STATION where Serving	GROUND FOR EXEMPTION (as per Transfer Policy)
1	2	3	4	5	6	7	8	9	10

ANNEXURE - 'E' (Contd.)

GROUND MENTIONED IN CERTIFICATE	MENTIONED IN CERTIFICATE	RELATION WITH EMPLOYEE	CERTIFICATE DATE	Control Contro	PERIOD OF EXEMPTION REQUESTED	PREVIOUS GROUND FOR EXEMPTION	EXEMPTED UPTO (dd/mm/yyyy)	RECOMMENDATI ON FOR EXEMPTION (Yes / No)	Remarks (Detail whether volunteered for any other Panel/HYL)
11	12	13	14	15	16	17	18	19	20

Date:	(SIGNATURE AND SEAL OF G.O.(AN)

(14)