

		दूरभाष /Telephone:044-28335040 फेक्स /Fax :044-28331090 e-mail :chennai1.vig@gmail.com
OFFICE OF THE PRINCIPAL COMMISSIONER OF GST AND CENTRAL EXCISE, <b>CHENNAI NORTH COMMISSIONERATE</b> 26/1, महात्मा गांधी मार्ग, नुंगम्बाक्कम, चेन्नै-600 034 26/1, Mahatma Gandhi Road, Nungambakkam, Chennai 600 034		

C.No.II/39/123/2016 VIG Ch.I

Dated: 28.11.2018

To

**URGENT**

All Deputy/Assistant Commissioners,  
 Headquarters/Divisions,  
 Chennai North

Sir/Madam,

Sub: Implementation of e-office Lite (SPARROW) and PIMS for  
 CBIC employees – Regarding.

Directorate General of Human Resource Development (CBIC), New Delhi are in the process of implementing e-office lite (SPARROW) and PIMS for Group B and C employees of CBIC w.e.f **1.4.2019** for the APAR period 2018-19.

2. In this regard, office of the Pr. Chief Commissioner, Chennai Zone have instructed to ensure all Group B and C officers have Aadhar Number and their mobile number should be linked to Aadhar to enable e-Sign in SPARROW. Kindly instruct all Group B and Group C officers working under your charge regarding the above requirements and to fill-up the enclosed proforma Annexure I (**duly certified by the AO/DDO/(in-charge of SB)**) and Annexure II and forward the details to this office **on or before 5.12.18 positively.**

3. Kindly bestow your personal attention and ensure to send your compliance report with details in respect of all Group B and C officers working under your charge for onward submission to Pr.CCO without delay.

Yours faithfully

  
 (MAYA CHANDRAN)  
 ASSISTANT COMMISSIONER(VIG)

Copy submitted to

1. Principal Commissioner, Chennai North
  2. Additional Commissioners, Chennai North
- ...for kind information

Copy to

- 1.All Administrative Officers (DDO/Estt./SB Section),  
 Hqrs/All Divisions,  
 Chennai North..... with a request to certify the duly filled-in proforma  
 Annexure I and II at the earliest

- ✓ 2.Superintendent (Computers), Hqrs, Chennai North.. for uploading in website

**ANNEXURE-I**  
(Data required by DHRD from Zones)

S.NO.	TITLE	FIRST NAME	MIDDLE NAME	LAST NAME	DESIGNATION	ZONE/DIRECTORATE	CURRENT POSTING	WHETHER ON LOAN/DEPUTATION	DATE OF BIRTH (DD-MM-YYYY)	DATE OF RETIREMENT (DD-MM-YYYY)	DATE OF JOINING	JOINING RANK

Certified that the above particulars have been verified

Administrative Officer(DDO/SB)

