SOUTHERN RAILWAY

SR-MAS0PERS(TFCC)/19/2025
COMP NO 539253

Divl.Rly Manager's Office
Personnel Branch
Chennai Division
Chennai - 600003
Dt:"As Signed"

ALL SUPERVISORY OFFICIAL OF OPERATING DEPARTMENT

Sub: The Provisional Seniority list of Chief Controller in Level-8 for the year 2026 as on 01-01-2026 Operating Department of Chennai Division.

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The provisional seniority list of Chief Controller in Level-8 Operating department as on 01-01-2026 is enclosed herewith.

Representations, if any may be advised to this office on or before 17.01.2026. Representation after target date will not be entertained. In case no representation received Nil statement maybe sent to this office in prescribed format given below (Proforma enclosed-Annexure B).

The concerned Supervisors shall ensure that the above list is further circulated for the perusal of all employees under his/her administrative control even if working on deputation outside or within Railways (from where they last worked).

In case no representation is received, the seniority published will be treated as all good and final lists will be published, no further representations will be allowed even in future.

The above seniority list is available for download on the MAS Division Personnel Branch website at: https://pbmas.in/

Encl:As above

Digitally Signed by
Devikumari Ah
Date: 31-12-2025 21:44:15
Reason: Approved
(A H DEVIKUMARI)
APO/T/MAS
/Sr.DPO/O/MAS

Copy to:PCPO/SR – for kind information please.
CVO/MAS–for kind information please.
Sr.DOM/MAS & Sr.DFM/MAS–for kind information please,
Supervisory Officials-for information & display it on the Notice Board,
Ch.OS/Computer Cell- kindly upload in website at: https://pbmas.in/
Ch.OS/OPTG/Cadre . Bills, Seniority File,
Employee Concerned-Through Supervisor Officials.
Divl.Secy/SRMU. Divl.Secy DREU,
Divl.Secy/AISC/STREA,
Divl.Secy/AIOBC REA

File No.SR-MAS0PERS(TFCC)/2/2021-O/o ChOS I/TFC CAD/SrDPO/MAS/SR

S.NO	HRMS ID	NAME OF THE EMPLOYEE S/Shri/Smt/Kum	Category viz.,UR /SC/ST /OBC	PwBD –Disability category under clause (a, b, c, d, e) if applicable. In addition, wherever information is available, the relevant benchmark disability viz., VH, LV, D, HH, OA, OL, BL, OAL,	Date of Birth	Date of appointment to Railway service	Date of entry into the relevant grade reckoned for assigning seniority	Additional column for specified details for specified categories	**Remarks**
Seniority List for the category of CHC in PML-8 of OPERATING Department CHENNAI Division									
1	HOFLXZ	L.BOOPATHY	UR		21-01-1971	03-06-1999	01-12-2022		
2	CMQJXR	V.SUNDAR	SC		06-09-1974	29-07-2002	01-12-2022		
3	SIKIFG	LOGACHANDRAN RANGARAJAN	UR		09-08-1967	09-01-1987	01-12-2022		
4	KJZLRO	D.PARTHSARATHY	UR		02-03-1967	07-09-1987	01-12-2022		
5	XWZPHC	B SRIDHAR	UR		20-05-1966	25-07-1991	01-12-2022		
6	LDTZZW	VAHINI .P	SC		28-01-1977	06-05-2002	01-12-2022		**DEUPUTATION 1**
7	OCZBYQ	R.SAJIVE	UR		03-07-1968	02-08-1993	01-12-2022		
8	EFPRLX	M.SARAVANAN	UR		14-06-1974	28-07-1999	01-12-2022		**DEUPUTATION 2**
9	QSAXJY	K SENTHIL KUMAR	SC		18-06-1966	01-11-1993	01-12-2022		
10	CKHHXN	B SRIHARI BABU	SC		09-12-1972	10-06-1996	01-12-2022		
11	JDYCBL	BIREN PRATAP DUNG DUNG	ST		28-07-1979	16-07-2004	01-12-2022		
12	HWBLZU	J ANANDA SREENIVASA RAGHAVAN	SC		12-01-1975	29-07-2002	01-12-2022		
13	YUEXHH	C.THIYAGARAJAN	SC		16-08-1983	12-07-2014	01-12-2022		
14	SDKQWG	K. HARI BABU	UR		09-01-1974	25-04-1996	10-10-2024		**DEPUTATION 3**
15	XSUAMI	K.THALAVAI RAJ	OBC		13-03-1975	12-07-2014	11-10-2024		
16	WBDIUB	BALWANT KUMAR	UR		15-09-1981	12-07-2014	23-10-2024		
17	PCUDYL	GOKUL KUMAR MIRDHA	ST		05-07-1979	25-03-2006 22-07-2014	10-10-2024		**DEPUTATION 4**
18	ZGPQXR	ANJANI KUMAR	OBC		04-04-1984	12-07-2014	12-09-2025		**DEPUTATION 5**

SOUTHERN RAILWAY/CHENNAI DIVISION (Annexure-B)

To,

Sr.DPO/MAS

(Through Supervisory Officials)

Sub: Request for correction in Seniority published -2026.

Seniority No: ..... Department: .....

Emp No: ..... Emp Name: .....

Designation: ..... Contact No: .....

Sl No.	Description	Whether Correction Required(Put Yes/No)	Correction to be done & Reason
1	Seniority Position as on 01.01.2025		
2	Date of Birth		
3	Date of Appointment		
4	Date of Entry into Grade		
5	Any other like community, working station etc.		

Specify documentary proof in support of the above claim If any attached.

1.

2.

3.

4.

Signature of the Employee

Office Seal

Name of the Supervisory Official:

Signature: