

State / Union Territory *

[Grid for State / Union Territory]

Country *

[Grid for Country]

Pin Code*

[Grid for Pin Code]

8. Phone No.

[Grid for Phone No. STD Code]

[Grid for Phone No. Phone No.]

STD Code

Phone No.

9. Mobile No.

[Grid for Mobile No.]

10. Email ID

[Grid for Email ID]

11. Do you want to subscribe to SMS Alerts

Yes

No

12. Subscriber's Bank Details*: (MANDATORY - please refer to Sr. No. 6 of the instructions)

Savings A/c

Current A/c

Bank A/c Number*

[Grid for Bank A/c Number]

Bank Name*

[Grid for Bank Name]

Bank Branch*

[Grid for Bank Branch]

Bank Address*

[Grid for Bank Address]

Pin Code*

[Grid for Pin Code]

Bank MICR Code *

[Grid for Bank MICR Code]

IFS code (Wherever applicable)

[Grid for IFS code]

Section B - Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory)

1. Date of Joining*

[Grid for Date of Joining]

D D M M Y Y Y Y

2. Employee ID* :

[Grid for Employee ID]

3. Corporate Registration Number (allotted by CRA)*:

[Grid for Corporate Registration Number]

Certified that the above declaration has been signed before me by _____ after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of birth and employment details is as per employee records available with the Corporate.

[Signature box for Authorised Person]

[Rubber Stamp of the Corporate]

Signature of the Authorised Person

Designation of the Authorised Person : _____

Name of the Corporate _____

Date :

[Grid for Date]

D D M M Y Y Y Y

Section C - Subscriber's Nomination Details (OPTIONAL - please refer to Sr. No 7 & 8 of the instructions)

1. Name of the Nominee:

1st Nominee	2nd Nominee	3rd Nominee
First Name*	First Name*	First Name*
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name

2. Date of Birth (In case of a minor):

1st Nominee	2nd Nominee	3rd Nominee
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3. Relationship with the Nominee:

1st Nominee	2nd Nominee	3rd Nominee

4. Percentage Share:

1st Nominee	%	2nd Nominee	%	3rd Nominee	%
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5. Nominee's Guardian Details (in case of a minor Nominee):

1st Nominee's Guardian Details	2nd Nominee's Guardian Details	3rd Nominee's Guardian Details
First Name*	First Name*	First Name*
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name

Section D - Subscriber Scheme Preference (Please refer the instructions of Section D on Page No. 5 for further details):

(Applicable, only if your corporate has given option to the subscriber to select the scheme details. Kindly Contact your Employer for further details)

(i). PFM Selection for Active and Auto Choice*

<u>PFM Name (in alphabetical order)</u>	<u>Please tick only one (Select only one PFM)</u>
ICICI Prudential Pension Funds Management Company Limited	<input type="checkbox"/>
IDFC Pension Fund Management Company Limited	<input type="checkbox"/>
Kotak Mahindra Pension Fund Limited	<input type="checkbox"/>
Reliance Capital Pension Fund Limited	<input type="checkbox"/>
SBI Pension Funds Private Limited	<input type="checkbox"/>
UTI Retirement Solutions Limited	<input type="checkbox"/>

(Selection of PFM is mandatory both in Active and Auto Choice. In case you do not indicate a choice of PFM, your application form shall be summarily rejected).

(ii). Investment Option

Active Choice Auto Choice

(For details on Auto Choice, please refer to the PFRDA website www.pfrda.org.in)

Note:-

1. In case you do not indicate any investment option, your funds will be invested in Auto Choice
2. In case you have opted for Auto Choice, DO NOT fill up section (iii) below relating to Asset Allocation. In case you do, the Asset Allocation instructions will be ignored and investment made as per Auto Choice.

(iii)4. Asset Allocation (to be filled up only in case you have selected the ‘Active Choice’ investment option)

Asset Class	E (Cannot exceed 50%)	C	G	Total
% share				100%

Note:-

1. The allocation across E, C and G asset classes must equal 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

Section E – Declaration & Authorization

I understand that there would be PFRDA approved *Terms and Conditions* for subscribers on the CRA website *governing I-pin (to access CRA and view details) & T-pin*. I agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed.

Declaration under the Prevention of Money Laundering Act, 2002 I hereby declare that:

1. The contribution paid has been derived from legally declared and assessed sources of income.
2. I understand that the PFRDA/NPS Trust has the right to peruse my financial profile and also agree that the PFRDA/NPS Trust has the right to close the NPS account in case I am found guilty of violating the provisions of any Law, directly or indirectly, by any Competent Court of Law, having relation to the laws governing prevention of money laundering in the country.

I _____, the applicant, do hereby declare that the information provided above is true to the best of my knowledge & belief. Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (DD/MM/YYYY)	
	Signature/Thumb Impression* of Subscriber

To be Filled by POP

A. POP Registration No.

B. Submitted Cancelled Cheque: Yes No

POP Seal	<input style="width: 100%; height: 20px;" type="text"/>
	Signature of Authorised Signatory
	Name : _____ Place : _____ Designation : _____ Date : <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small style="margin-left: 150px;">D D M M Y Y</small> Department : _____

9	Property Tax Assessment Order	9	Property Tax Assessment Order
10	Passport	10	Passport
11	Voter's Identity Card	11	Voter's Identity Card
12	Driving License	12	Driving License
13	PAN Card		
14	Certificate of identity signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.	13	Certificate of address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.
Note: 1) Proof of Address mentioned in Sr. No. 1 to 7 (^) should not be more than six months old on the date of application. 2) You are required to bring original documents & two self-attested photocopies (Originals will be returned over-the-counter after verification)			

Subscriber Scheme Preference - Section D

Kindly do not fill this section if your organisation has selected the scheme preference details for its subscribers.

Active choice

1. PFM selection is mandatory. Kindly make a choice from Option A. The form shall be rejected if a PFM is not opted for.
2. Allocation under Equity (E) cannot exceed 50%
3. A subscriber opting for active choice may select the available asset classes ("E", "G", & "C"). However, the sum of percentage allocation across all the selected asset classes must equal 100. If the sum of percentage allocations is not equal to 100%, or the asset allocation table at Sr. No. (iii) is left blank, the application shall be rejected.

Auto choice

4. A subscriber opting for Auto Choice must also select a PFM from "Option A" of PFM Selection. The application shall be rejected if the subscriber does not indicate his/her choice of PFM
5. In case both investment option and the asset allocation at Sr. No. (ii) and Sr. No. (iii) are left blank, the subscriber's funds will be invested as per Auto Choice

For more details on investment options and asset classes, please refer to the PFRDA website www.pfrda.org.in

GENERAL INFORMATION FOR SUBSCRIBERS

- a) The Subscriber can obtain the status of his/her application from the CRA website or through the respective employer.
- b) For more information
Visit us at <http://www.npscra.nsdl.co.in>
Call us at 022-24994200
e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

प्रान कार्ड हिंदी में मुद्रित कराने के लिए विवरण दें। (कृपया विवरण देवनागरी लिपि में ही दें):
कृपया नोट करें कि इस अनुलग्नक में दिए अनुसार ही आपका नाम प्रान कार्ड पर दर्शाया जाएगा ।
तथापि, जन्म तिथि केवल अंग्रेजी में ही मुद्रित होगी ।

अभिदाता का पूरा नाम :

प्रथम नाम* :
मध्य नाम :
अंतिम नाम :

पिता का नाम :

प्रथम नाम* :
मध्य नाम :
अंतिम नाम :

(* अनिवार्य स्थान दर्शाता है)

अभिदाता के हस्ताक्षर/अंगूठे का निशान*

.....
अभिदाता का नाम :