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NATIONAL PENSIO	N SYSTEM (M	NPS) – SUBSCR	IBER REG	ISTRATION FO	
Central Recordkeep Please select your category Please tick(✓)]	ing Agency (CR Central Govt. All Citizen Mode	State Gov	rt.	NPS Lite (GDS)	Affix recent colour
, itional Pension System Trust. ar Sir/Madam, ereby request that an NPS account	be opened in my name a	as per the particulars given b	elow:		photograph of 3.5 cm × 2.5 cm size Passport size
indicates mandatory fields. Please fill					
YC Number, Retirement Adviser C YC Number (if applicable)	ode and Spouse Name	fields are not applicable for		enerated from Central KYC R	egistry
etirement Adviser Code (If applicable)	le)				colory
PERSONAL DETAILS: (Plea	ase refer to Sr. No 1 of th	e instructions)			
Name of Applicant in full First Name*	Shri 🗌	Smt. Kumar	ri 🗌		
Middle Name					
Last Name					
Subscriber's Maiden Name (if a	ny)				
Father's Name*					
(Refer Sr. No. 1 of instructions)					
Mother's Name* (Refer Sr. No. 1 of instructions)					
Father's name will be printed on PF	RAN card. In case, mother	's name to be printed instead o	of father's name [Plea	ase tick (✓)]	
Date of Birth*	d d <i>I</i> m m	l y y y y	(Date of Birth shoul	d be supported by relevant	documentary proof)
City of Birth*					
Country of Birth*					
Gender* [Please tick (✓)] Marital Status*		emale Others nmarried Others		ationality* In-	Indian 🗌
Spouse Name* (Refer Sr. No. 1 of instructions)					
Residential Status*	Indian				
	¥ (A			- P	
PROOF OF IDENTITY (Pol)	Any one of the docum	ients need to be provided alc			
Passport			Passport Ex	piry Date d d	I m m I y y y
Voter ID Card Driving License			PAN Card	nse Expiry Date d d	I m m I y y y
NREGA JOB Card			Driving Lice		
Others	Name of the ID				Please refer Sr. No. 2 of the instructi
UID (Aadhaar)					
and authenticate my identit (Targeted Delivery of Finan Aadhaar details (physical a inactive in NPS or the timel provided, for the purpose o As per the amendments made u	y through the Aadhaar A cial and other Subsidies and / or digital, as the ca frame decided by PFRD, f Aadhaar based authen nder Prevention of Mone	uthentication system (Aadha , Benefits and Services) Act, ise maybe) submitted for ave A, the regulator of NPS, whic tication is ensured by CRA re sy-Laundering (Maintenance	ar based e-KYC serv , 2016 and the allied ailing services unde shever is later. I unde egistered with PFRD of Records) Second	vices of UIDAI) in accordance rules and regulations notifi r NPS will be maintained in arstand that Security and co A till such time it is acting as Amendment Rules, 2017 A	adhaar and PAN are mandatory u
NPS. If you do not have Aadhaar	and / or PAN at present,	please ensure that these det	ails are provided with	hin six months of submission	of this Subscriber Registration Fo
PROOF OF ADDRESS (PO/ [Please tick (✓), as applicable] #Not more than 3 months old. Please refer Sr. No. 2 of the instruction	Pa Ca ns Re	orrespondence Address assport /Driving License/UID (Aadh ard/Ration Card/Others agistered Lease/Sale agreement of atest Gas/Electricity/Telephone[Lai	haar)/Voter ID card/NRE	Card/Ration Card/Othe Registered Lease/Sale	nse/UID (Aadhaar)/Voter ID card/NREG
1 CORRESPONDENCE ADD	RESS DETAILS*				
Address Type*	Residential/Busine	ess Residential	Business	Registered Office	Unspecified
Flat/Room/Door/Block no.				Landmark	
Premises/Building/Village					
Road/Street/Lane					
Area/Locality/Taluk					
City/Town/District				PIN	Code
State/U.T.					o u n t r y
				· · · · · · ·	
2 PERMANENT ADDRESS D	ETAILS*	Tick (\checkmark) in the box in case	the address is same	as above.	
Address Type*	Residential/Busine	ess Residential	Business	Registered Office	Unspecified
Flat/Room/Door/Block no.				Landmark	
Premises/Building/Village					
Road/Street/Lane					
Area/Locality/Taluk					
City/Town/District				DIN	Code
State/U.T.					o u n t r y

5. CONTACT DETAILS Tel. (Off) (with STD code) + Tel. (Res): (with STD code) + Mobile* (Mandatory) + 9 1 (Mobile Number is required for communication and to get SMS alerts) Email ID 6. OTHER DETAILS (Please refer to Sr no. 3 of the instructions) Occupation Details* [please tick(\checkmark)] Private Sector Public Sector Government Sector Professional Self Employed Homemaker Student Others (Please Specify) 10 lac to 25 lac Income Range (per annum) Upto 1 lac 1 lac to 5 lac 5 lac to 10 lac 25 lac and above **Educational Qualifications** Below SSC SSC HSC Graduate Masters Professionals (CA, CS, CMA, etc.) Politically exposed person Related to Politically exposed Person (Please refer instruction no.3) Please Tick If Applicable 7. SUBSCRIBER BANK DETAILS* (Please refer to Sr no. 4 of the instructions) (All the bank details are mandatory except MICR Code.) Account Type [please tick(\checkmark)] Savings A/c Current A/c Bank A/c Number Bank Name Branch Name **Branch Address PIN Code** Bank MICR Code IFS Code SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No . 5 of the instructions) 8. Name of the Nominee (You can nominate up to a maximum of 3 nominees and if you desire so please fill in Annexure III (Additional Nomination Form) provided separately) First Name Middle Name Last Name Relationship with the Nominee Date of Birth (In case of Minor) d d *I* m m *I* Nominee's Guardian Details (in case of a minor) First Name Middle Name Last Name 9. NPS OPTION DETAILS (Please tick (✓) as applicable) I would like to subscribe for Tier II Account also YES NO If Yes, please submit details in Annexure I. (If you wish to activate Tier II account subsequently, you may submit separate application (Annexure S10) to the associated Nodal Office or to POP/POP-SP of your choice. The list of POP/POP-SPs rendering services under NPS and Annexure S10 is available on CRA website) I would like my PRAN to be printed in Hindi YES NO If Yes, please submit details on Annexure II 10. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION* (Please refer to Sr no. 6 of the instructions) (i) PENSION FUND SELECTION (Tier I) : Please read below conditions before opting for the choice of Pension Funds: Government Sector: For Government Subscribers, the following PFs act as default PFs as per the guidelines issued by the Government: 1. (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd. All Citizen Model: Subscribers under All Citizen model have the option to choose the available PFs as per their choice in the table below. Corporate Model: Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer. 3. NPS Lite: NPS Lite is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator. 4. Name of the Pension Fund (Please select only one) Availability of the Pension Funds Please Tick (√) LIC Pension Fund Limited Available to SBI Pension Funds Private Limited Government Sector UTI Retirement Solutions Limited Available to ICICI Prudential Pension Funds Management Company Limited Available to Available to All Corporate NPS Lite Citizen Model³ Kotak Mahindra Pension Fund Limited Model* Reliance Capital Pension Fund Limited HDFC Pension Management Company Limited Birla Sunlife Pension Management Limited Selection of Pension Fund is mandatory both in Active and Auto Choice'. (ii) INVESTMENT OPTION (Please Tick (\checkmark) in the box given below showing your investment option). Active Choice Auto Choice Please note: In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below. In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50) In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will 3. be made as per Auto Choice (LC 50) (iii) ASSET ALLOCATION (to be filled up only in case you have selected the 'Active Choice' investment option) G Е С Note: 1. The total allocation across E, C, G and A asset classes must be equal to 100%. In A Total Asset Class (Cannot (Max up to (Max up to (Cannot case, the allocation is left blank and/or does not equal 100%, the application shall be rejected. exceed 50%) 100%) 100%) exceed 5%) 2. Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Goverment Bonds and related instruments; Asset Class Specify % A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, Invlts etc. (iv) Auto Choice Option (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50. Life Cycle (LC)Funds Please Tick (✓) Only One Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset

Ver 1.2

LC 75

LC 50

IC 25

2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset

3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset

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Address in the jurisdiction for Tax Residence Stat	f the National Pension shed by me are true a rust, of any change ii any false or incorrect furnished by me. I sh ering Act, 2002 my behalf has been d ormation, with other g evention of money lar following countries equivalent is unava	n System and hereby agree and correct, to the best of m n the above information fur t information or documents. rvices by CRA, from time to all be bound by the terms a lerived from legally declared overnment authorities. I furt undering. Si e Act) COMPLIANCE (P	y knowledge and belief. I undertake nished by me. I do not hold any p o time and any amendment thereof nd conditions for the usage of I-PIN I and assessed sources of income. her agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc	to inform immediately the Cent re-existing account under NPS as approved by PFRDA, wheth (to access CRA website and vio I understand that NPS Trust h that to close my PRAN in case I a of Subscriber in black ink (TI in case of females) tions):
I have read and understood the terms and conditions of and declare that the information and documents furnish Record Keeping Agency/National Pension System Tru understand that I shall be fully liable for submission of a I further agree to be bound by the terms and condition complete or partial without any new declaration being f details) & T-PIN. Declaration under the Prevention of Money Laundee I hereby declare that the contribution paid by me/on m the right to peruse my financial profile or share the infor found violating the provisions of any law relating to pre- Date d d / m m / y y y y Place : 2. DECLARATION ON FATCA* (Foreign Account Section I* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the full ut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence X	shed by me are true a rust, of any change ii any false or incorrect ions of provision of ser furnished by me. I sh ering Act, 2002 ny behalf has been d ormation, with other gr evention of money lar not Tax Compliance following countries equivalent is unava	and correct, to the best of m n the above information fun- t information or documents. rvices by CRA, from time to all be bound by the terms a lerived from legally declared overnment authorities. I furt undering. Si e Act) COMPLIANCE (P s and my Tax Identification allable (kindly fill details of	y knowledge and belief. I undertake nished by me. I do not hold any p o time and any amendment thereof nd conditions for the usage of I-PIN I and assessed sources of income. her agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc	to inform immediately the Cent re-existing account under NPS as approved by PFRDA, wheth (to access CRA website and vio I understand that NPS Trust h that to close my PRAN in case I a of Subscriber in black ink (TI in case of females) tions):
and declare that the information and documents furnish Record Keeping Agency/National Pension System Tru understand that I shall be fully liable for submission of a I further agree to be bound by the terms and condition complete or partial without any new declaration being f details) & T-PIN. Declaration under the Prevention of Money Laundee I hereby declare that the contribution paid by me/on m the right to peruse my financial profile or share the infor found violating the provisions of any law relating to pre- Date d d / m m / y y y y Place : 2. DECLARATION ON FATCA* (Foreign Account Section I* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the fut ut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence X	shed by me are true a rust, of any change ii any false or incorrect ions of provision of ser furnished by me. I sh ering Act, 2002 ny behalf has been d ormation, with other gr evention of money lar not Tax Compliance following countries equivalent is unava	and correct, to the best of m n the above information fun- t information or documents. rvices by CRA, from time to all be bound by the terms a lerived from legally declared overnment authorities. I furt undering. Si e Act) COMPLIANCE (P s and my Tax Identification allable (kindly fill details of	y knowledge and belief. I undertake nished by me. I do not hold any p o time and any amendment thereof nd conditions for the usage of I-PIN I and assessed sources of income. her agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc	to inform immediately the Cent re-existing account under NPS as approved by PFRDA, wheth (to access CRA website and vio I understand that NPS Trust h that to close my PRAN in case I a of Subscriber in black ink (TI in case of females) tions):
complete or partial without any new declaration being f details) & T-PIN. Declaration under the Prevention of Money Launder I hereby declare that the contribution paid by me/on m the right to peruse my financial profile or share the information of any law relating to prevent the provisions of any law relating to prevent of a d d / m m / y y y y Date d d / m m / y y y y Place :	furnished by me. I sh ering Act, 2002 my behalf has been d ormation, with other gr evention of money lar ht Tax Compliance following countries equivalent is unava	e Act) COMPLIANCE (P s and my Tax Identificatio ailable (kindly fill details of	I and assessed sources of income. I and assessed sources of income. her agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc on Number (TIN)/functional equ of all countries of tax residence	(to access CRA website and vie I understand that NPS Trust h pht to close my PRAN in case I a of Subscriber in black ink (TI in case of females) tions): ivalent in each country is se if more than one):
I hereby declare that the contribution paid by me/on m the right to peruse my financial profile or share the infor found violating the provisions of any law relating to pre Date d d / m m / y y y y Place : 2. DECLARATION ON FATCA* (Foreign Account Section I* US Person* Yes No Section II* or the purposes of taxation, I am a resident in the fut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence Address in the jurisdiction for Tax Residence Address in the jurisdiction for Tax Country Countries of tax residency	ny behalf has been d ormation, with other grevention of money lar evention of money lar nt Tax Compliance following countries equivalent is unava	overnment authorities. I furt undering. Si e Act) COMPLIANCE (P s and my Tax Identificatio ailable (kindly fill details o	er agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc bon Number (TIN)/functional equ of all countries of tax residence	of Subscriber in black ink TI in case of females) tions): ivalent in each country is se if more than one):
the right to peruse my financial profile or share the infor found violating the provisions of any law relating to pre- Date d d / m m / y y y y Place : 2. DECLARATION ON FATCA* (Foreign Account Section I* JS Person* Yes No Section II* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the fut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence Address in the jurisdiction for Tax Residence No Section II*	ormation, with other gevention of money lar	overnment authorities. I furt undering. Si e Act) COMPLIANCE (P s and my Tax Identificatio ailable (kindly fill details o	er agree that NPS Trust has the rig gnature/Thumb Impression* (* LTI in case of male and R lease refer to Sr no. 8 of the instruc bon Number (TIN)/functional equ of all countries of tax residence	of Subscriber in black ink TI in case of females) tions): ivalent in each country is se if more than one):
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2. DECLARATION ON FATCA* (Foreign Account Section I* JS Person* Yes No Section II* Or the purposes of taxation, I am a resident in the fut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence Address I and City	following countries equivalent is unava	e Act) COMPLIANCE (P s and my Tax Identificatio ailable (kindly fill details o	(* LTI in case of male and R lease refer to Sr no. 8 of the instruc on Number (TIN)/functional equ of all countries of tax residence	TTI in case of females) tions): ivalent in each country is se if more than one):
Section I* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the fultibelow or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Address in the jurisdiction for Tax	following countries equivalent is unava	e Act) COMPLIANCE (P s and my Tax Identificatio ailable (kindly fill details o	(* LTI in case of male and R lease refer to Sr no. 8 of the instruc on Number (TIN)/functional equ of all countries of tax residence	TTI in case of females) tions): ivalent in each country is se if more than one):
Section I* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the fultibelow or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Address in the jurisdiction for Tax	following countries equivalent is unava	s and my Tax Identificatio ailable (kindly fill details o	on Number (TIN)/functional equ of all countries of tax residence	ivalent in each country is se if more than one):
Section I* JS Person* Yes No Section II* or the purposes of taxation, I am a resident in the fultibelow or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Address in the jurisdiction for Tax	following countries equivalent is unava	s and my Tax Identificatio ailable (kindly fill details o	on Number (TIN)/functional equ of all countries of tax residence	ivalent in each country is se if more than one):
Gection II* or the purposes of taxation, I am a resident in the fut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence	equivalent is unava	ailable (kindly fill details o	of all countries of tax residence	if more than one):
or the purposes of taxation, I am a resident in the full below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence Address in the jurisdiction for Tax Residence	equivalent is unava	ailable (kindly fill details o	of all countries of tax residence	if more than one):
ut below or I have indicated that a TIN/functional e Particulars Country/countries of tax residency Address in the jurisdiction for Tax Residence Stat	equivalent is unava	ailable (kindly fill details o	of all countries of tax residence	if more than one):
Country/countries of tax residency Address in the jurisdiction for Tax Residence Stat		Country (1)	Country (2)	Country (3)
Address in the jurisdiction for Tax Residence Stat				
Address in the jurisdiction for Tax Residence Stat				
Residence Stat				
Residence Stat	y/Town/Village			
ZIP	ate			
	P/Post Code			
Tax Identification Number (TIN)/Functional equival	alent Number			
TIN/ Functional equivalent Number Issuing Countr				
	-			
Validity of documentary evidence provided (Whereve	er applicable)	dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy
 I certify that: It shall be my responsibility to educate myself an with the Rules 114F to 114H of the Income tax I rules, the information provided by mo in the Form its 	Rules, 1962 there	under and the information	on provided in the Form is in ac	cordance with the aforesaid
 b) the information provided by me in the Form, its belief, true, correct and complete and that I have a Reportable account or otherwise. 				, ,
 I permit/authorise the NPS Trust to collect, store, Trust and any of NPS intermediaries wherever si India of any confidential information for compliar 	ituated including sl	haring, transfer and disc	osure between them and to the	
 I undertake the responsibility to declare and dis provided in the Form, its supporting Annexures a provide fresh self-certification along with document 	as well as in the do			-
 I also agree that in case of my failure to disclose authority designated by the Government of India the NPS Trust if the deficiency is not remedied b 	e any material fact a (GOI) /RBI/IRDA	/PFRDA for the purpose		
 I hereby accept and acknowledge that the NPS T domain for confirming the information provided b 	Trust shall have the	e right and authority to ca	rry out investigations from the ir	nformation available in publi
 I also agree to furnish such information and/or of India or abroad in the subject matter herein. I shall indemnify NPS Trust for any loss that may 				
				iomaton.
Date d d <i>I</i> m m <i>I</i> y y y y				
Place :		S	gnature/Thumb Impression*	of Subscriber in black ink RTI in case of females)

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13. DECLARATION BY EMPLOYER																				
Applicable to Government Subscribers only																				
(Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory)																				
Date of Joining d I m m I y y y y Date of Retirement d d I m m I y y y y]											
Employee Code/ID (If applicable) PPAN (If applicable)	plicable) Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.							d												
	roup of Employee (Tick as applicable) Group A Group B Group C Group D Group D																			
Office																				
Department																				
Ministry																				
DDO Registration Number																				
DTO/PAO/CDDO/DTA/PrAO Registration Number																				
Basic Pay																				
Pay Scale																				
the address and employment do he/she has read entries/entries												taine	d by u	s. Als	so, it i	is fui	rther (certifi	ed tha	.t
Signature of the Authorised pers (In the box above)	son	Ru		amp of box a	f the DD bove)	0	Signature of the Authorised person F (In the box above)					Ru				ne DTO the bo			J/	
Designation of the Authorised Pers	son		,		- /		Desic	nation			,	d Pei	son			(<i>i</i>			,	٦
Name of the DDO								of DTO												
Deptt/Ministry							Date													
Corporate Regd. Number (CHO No.) CBO No. allotted by CRA Certified that the details provided in	this sub	scribe	r regis					ntaina	d by u			furt					us, i			
employment details provided above a entries / entries have been read over									d by u	s. Also	o, it is	s furt	her ce	rtified	l that	t he /	she	has re	ead th	e
Date d d / m m / y y	уу							Place												
Signature of the Authoris	ed person	(In the	box ab	ove)																
Designation of the Authorised Person Rubber Stam						mp o	f the	Corpo	orate	(In th	ne bo	ox abo	ove)							
15. DECLARATION BY THE AGGR Authorisation by Aggregator's of Certified that the subscriber is reg and the above declaration has be been read over to her/him by me.	office (NI istered w	 AO	aggre	gator a	and he/	she has	•	o join I	NPS. I		•						-			
Signature of the Autho Name of the Aggregator NPS Lite Account Office (NL-AO) Regi Membership No. allotted by Aggregate	stration Nu			above))	NPS	S Lite - Co				·		gregato		ne box	x abo	ove)			
Place		Date	d d	1	m m	I y	у у	у												

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16. TO BE FILLED BY POP-SP			
Receipt No. (17 digits)		POP-SP Registration Number	
Document accepted for date of I	Birth Proof:		
Copy of PAN card submitted	YES NO KYC Comp	liance YES NO	
Documents Received:	(Originals Verified) Self Certified (Attes	ted) True Copies	
Identity Verification :	Done		
Existing Bank Customer:			
	Shri/Smt/Kum		
	for opening NPS account have been fully comp		
	a 'Basic Savings Bank Deposit Account'		
Adhaar Based KYC Certificate	:		
	r Numberof Sh/Smt/Kum original Aadhaar card are matching with that mentior		been checked and the name
To be filled by POP-SP		Name:	
		Designation:	Place:
POP-SP Seal	Signature of Authorized Signatory	Date d d / m m /	у у у у
	1		
	[To be filled by CRA - Facilitation C	entre (CRA-FC)]	
Received by	CRA-FC Registra	tion Number	
Received at		Date d d	I m m I y y y y
Acknowledgement Number (by CRA-	FC)		
PRAN Alloted			
	ACKNOWLEDGEMEI	NT	
Name of the Subscriber:			
Contribution Amount Remitted:	₹		
Date of Receipt of Application ar	ad Contribution Amount: d d / m m /		
		Stamp and Signature	e of the Employer/PoP:

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM General Guidelines (a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word. In case, you mention the KYC number submission of proof for the same is necessary. Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are (b)(c) The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted. (d) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office. Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted. The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office. (g) S. Item Item Details Instructions No No. This Form is applicable to Resident Indians and there is a separate Form for Non Resident Indians. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. Personal Details The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card If married, spouse name is mandatory. Spouse Name Father's name is mandatory. If father's name has more than 30 digits, you may fill Annexure II for the same. 1 1 Father's Name ii. Mother's name is mandatory If Mother's name has more than 30 digits, you may fill Annexure II for the same Mother's Name ii. Please ensure that the date of birth matches as indicated in the document provided in the support. Date of Birth Proof of Address (Copy of any one) S.No Proof of Identity (Copy of any one) S.No 1 Passport issued by Government of India. 1 Passport issued by Government of India 2 Ration card with photograph. 2 Ration card with photograph and residential address Bank Pass book or certificate with Photograph. Bank Pass book or certificate with photograph and residential 3 3 address 4 Certificate of the POP bank for an existing Bank customer. 4 Certificate of the POP bank for an existing Bank customer. 5 5 Voters Identity card with photograph and residential address Voters Identity card with photograph and residential address. 6 Valid Driving license with photograph 6 Valid Driving license with photograph and residential address Certificate of identity with photograph signed by a Member of 7 Letter from any recognized public authority at the level of 7 Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc. Parliament or Member of Legislative Assembly Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly 8 PAN Card issued by Income tax department 8 Identity, Correspondence & Permanent address Aadhar Card / letter issued by Unique Identification Authority Aadhar Card / letter issued by Unique Identification Authority of 9 9 of India India clearly showing the address details Job cards issued by NREGA duly signed by an officer of the Job cards issued by NREGA duly signed by an officer of the 10 10 State Government State Government 2 2,3&4 Identity card issued by Central/State government and its Departments, statuary/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial The identity card/document with address, issued by any of 11 the following: Central/State Government and its Departments, Statuary/Regulatory Authorities, Public Sector Undertakings, Institutions, Colleges affiliated to universities and Professional Scheduled Commercial Banks, Public Financial Institutions for Bodies such as ICAI, ICWAI, ICSI, Bar Council etc. their employees. 12 Photo. Identity Card issued by Defence, Paramilitary and 12 Latest Electricity/water bill in the name of the Subscriber / Police department's Claimant and showing the address (less than 3 months old) Latest Telephone bill in the name of the Subscriber / Claimant 13 Ex-Service Man Card issued by Ministry of Defence to their 13 employees. and showing the address (less than 3 months old) Photo Credit card. Latest Property/house Tax receipt (not more than one year old) 14 14 15 Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation) Note (i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/her in the account (ii) If the address indicated on the document submitted for identity proof of both identity and address.
 (iii) If the address indicated on the document submitted for identity proof differs from the current address mentioned in the account opening form, a separate proof of address should be obtained. All future communications will be sent to correspondence address. If correspondence & Permanent address are different, then proof for both have to be submitted. (iii) The KYC documents may be submitted within a period of 30 days after generation of PRAN. (Only for Government Subscribers) Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-Politically Exposed 3 6 Person owned corporations, important political party officials. For Tier I & Tier II, bank details are mandatory and it should be supported by cancelled cheque. Please attach a Cancelled cheque (containing Subscriber's Bank Subscriber Name, Bank Account Number and IFS Code) or Bank Certificate containing Name, Bank Account Number and IFS code, for direct 4 7 Details credit or electronic transfer. In case if the cheque is not preprinted with name, additionally, a copy of the bank passbook or bank certificate containing Name, Bank Account Number and IFS code should be submitted. In case of more than one nominee, percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to Subscriber's 5 8 Nomination Details 100, entire nomination will be rejected. Pension Fund (PF) For more details on 'Investment Option', you may visit CRA website. Subscribers from Government sector are currently not allowed to exercise the investment option. As mentioned, your contribution will be invested by default PFs as per the guidelines issued by the Government. 6 10 Selection and Investment Option Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the designated officer of POP/POP-SP/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Declaration by 7 11 Subscriber Impression in case of females. Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India
 Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and Declaration by subscriber on FATCA 8 12 Compliance resident registration number) If applicant residence for tax purpose in jurisdiction(s) within India, Permanent Account Number (PAN) to be provided as Tax Identification Number (TIN) In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided **General Information for Subscribers** The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer. Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application. For more information / clarifications, contact CRA: b) C) Website: <u>https://www.npscra.nsdl.co.in</u> Call: 022-4090 4242 <u>Address</u>: Central Recordkeeping Agency (CRA) NSDL e-Governance Infrastructure Limited 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400013

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