

मुंबई विद्यापीठ



एएकयुए/आयसीडी/२०२१-२२/५

परिपत्रक:

विषय:- राष्ट्रीय निवृत्तीवेतन योजना (NPS) अंतर्गत ऑनलाईन PRAN क्र. नोंदणी करण्याबाबत.

संदर्भ:- मा. सहसंचालक, उच्च शिक्षण, मुंबई विभाग यांचे क्र. सहसं/ उशि/ डीसीपीएस/२०२२/३७५ दिनांक २० जानेवारी, २०२२ रोजीचे पत्र.

उपरोक्त विषयाबाबतचे संदर्भीय पत्रानुसार मुंबई विद्यापीठातील विविध विभाग/संस्थांचे विभागप्रमुख/संचालक, प्राचार्य, सर ज. जि. वास्तूशास्त्र महाविद्यालय, संचालक, ज्ञान श्रोत केंद्र, प्रभारी संचालक/समन्वयक, विद्यापीठ ठाणे व रत्नागिरी उपपरिसर तसेच आदर्श महाविद्यालये, आंबडवे/तळेरे यांना सदर परिपत्रकाद्वारे कळविण्यात येते की, विद्यापीठातील नवीन परिभाषित अंशदान निवृत्ती वेतन योजना (DCPS)/राष्ट्रीय निवृत्ती वेतन योजना (NPS) मध्ये समाविष्ट करण्यासाठी विद्यापीठातील नवीन परिभाषित अंशदान निवृत्ती वेतन योजना (DCPS) मध्ये समाविष्ट असलेल्या शिक्षक कर्मचाऱ्यांचे ऑनलाईन PRAN क्र. नोंदणी करण्याची कार्यवाही सहसंचालक कार्यालयामार्फत सुरू करण्यात आलेली आहे. त्यासाठी PFRDA यांच्या निर्देशाप्रमाणे CSRF Form ची Hard copy, NSDL(CRA) यांजकडे जमा करणे आवश्यक आहे त्यासाठी CSRF Form पाच प्रती मध्ये या कार्यालयाकडे दिनांक २८ जानेवारी, २०२२ रोजी दुपारी १२.०० पर्यंत रूम नं. ११३, शैक्षणिक नियुक्त्या व गुणवत्ता हमी विभागामध्ये जमा करण्यात यावेत सदरचे फॉर्म भरण्यापूर्वी सोबत जोडलेल्या सूचनेसाठी विद्यापीठाच्या संकेतस्थळावरून शैक्षणिक नियुक्त्या व गुणवत्ता हमी विभागातील Circular for University Staff येथे उपलब्ध असलेल्या (Instruction for filling the SRF) वाचन करून त्यानुसारच फॉर्म भरावा. फॉर्म सोबत संबंधित कागदपत्रे जसे PAN, Aadhar Card, जन्मदिनांक प्रमाणपत्र इ. यांच्या सत्यप्रती (Attested Copy) संलग्न कराव्यात.

सदर बाबत सर्व संबंधित विभागप्रमुख/संचालक, प्राचार्य/समन्वयक यांनी आपल्या अधिनस्त शिक्षक कर्मचाऱ्यांच्या तातडीने निर्देशनास आणून द्यावी.

मुंबई-४०० ०३२
२७ जानेवारी, २०२२


(सुधीर पुराणिक)
कुलसचिव

प्रति,

मुंबई विद्यापीठातील विविध विभाग/संस्थांचे विभागप्रमुख/संचालक, प्राचार्य, सर ज. जि. वास्तूशास्त्र महाविद्यालय, संचालक, ज्ञान श्रोत केंद्र, प्रभारी संचालक/समन्वयक, विद्यापीठ ठाणे व रत्नागिरी उपपरिसर तसेच आदर्श महाविद्यालये, आंबडवे/तळेरे

महाराष्ट्र शासन
सहसंचालक
उच्च शिक्षण, मुंबई विभाग, मुंबई.
एलफिन्स्टन तंत्र विद्यालय आवार, ३ महापालीका मार्ग, मुंबई-४००००१.

ई.मेल :- jdhemumbai@gmail.com

फोन नं. २२६५६६०० फॅक्स नं. २२६५६६००

क्र.सहसं/उशि/डीसीपीएस./२०२२/३७५

दिनांक :- १९.०१.२०२२

20 JAN 2022

प्रति,

✓ कुलसचिव / प्राचार्य,
विद्यापीठ/सर्व अशासकिय अनुदानित महाविद्यालय,
मुंबई शहर व उपनगर,
मुंबई.

विषय :- राष्ट्रीय निवृत्ती वेतन योजना (NPS) अंतर्गत ऑनलाईन PRAN क्र. नोंदणी करणेबाबत..

संदर्भ :- शिक्षण संचालनालयाचे पत्र क्र./उशिसं/२०२१/एनपीएस/Online PRAN/लेखा-२/३६७

दिनांक: १९.०१.२०२२.

उपरोक्त संदर्भाधीन विषयाबाबत सूचित करण्यात येते की, या विभागाच्या अधिनस्त असलेल्या अकृषि विद्यापीठे व अशासकीय अनुदानित महाविद्यालयातील नवीन परिभाषित अंशदान निवृत्ती वेतन योजना (DCPS) / राष्ट्रीय निवृत्ती वेतन योजना (NPS) मध्ये समाविष्ट करण्यासाठी कार्यरत असलेल्या सर्व शिक्षक / शिक्षकेतर कर्मचा-यांचे ऑनलाईन PRAN नोंदणी करण्याचे कार्यवाही सुरु आहे. त्यासाठी PFRDA यांचे निर्देशाप्रमाणे CSRF Form ची Hard Copy, NSDL (CRA) यांचेकडे जमा करणे आवश्यक आहे. त्यासाठी कुलसचिव व प्राचार्यांनी / आहरण व संवितरण अधिकारी (DDO) यांचेकडून सर्व संबंधित कर्मचाऱ्यांचे CSRF फॉर्म पाच (५) प्रतिमध्ये DDO च्या सही व शिक्कासह या कार्यालयाकडे दि.२८/०१/२०२२ पर्यंत जमा करण्यात यावेत. सदरचे फॉर्म भरण्यापुर्वी नमुना फॉर्म सोबत जोडलेल्या सूचना (Instruction for filling the SRF) वाचण्यात यावा व त्यानुसारच फॉर्म भरावा. फॉर्म सोबत संबंधीत कागदपत्रे जसे PAN, Aadhar Card, जन्मदिनांक प्रमाणपत्र इ. यांच्या सत्यप्रती (Attested copy) संलग्न कराव्यात.

टिप :- CSRF Form पृष्ठ क्र.६ वरील Instruction.

१. CSRF फॉर्म मधील अ.क्र.१ ते ८ भरून घेणे आवश्यक आहे.
२. CSRF फॉर्म मधील अ.क्र.९ ते १० भरून घेणे आवश्यक नाही / संबंधीत नाही.
३. CSRF फॉर्म मधील अ.क्र. ११,१२,१३ भरून घेणे आवश्यक आहे.
४. CSRF फॉर्म मधील अ.क्र.१४,१५,१६ भरून घेणे आवश्यक नाही / संबंधीत नाही.
५. फॉर्म मध्ये विहित जागेत, विहित साईजचाच फोटो (३.५*२.५ cm) चिकटवा. (स्टॅपल करू नये)
 - Recent passport size colour picture
 - Photograph of size (३.५ cm* २.५ cm)
 - Photograph should be in formals with Solid color (preferably white) background.
 - Photograph must be a taken in full face view directly facing the camera.
 - Photograph should have no shadows and red eyes.
 - Scanned Photograph should not have any other content, such as watermark, Stamp, name of mobile app used for scanning etc.

कृ.मा.प

६. फॉर्ममधील विहित जागेत काळया शाईच्या पेननेच (Signature with Black Ink) स्वाक्षरी कराव्यात.
७. फॉर्ममधील माहिती टंकलेखित, संगणक मुद्रीत अथवा काळया शाईच्या पेननेच (Fill with black ink pen) भरावा.

सोबत :-

- (१) CSRF फॉर्मची नमुना कोरी प्रत
- (२) CSRF नामांकन फॉर्मची नमुना कोरी प्रत
- (३) CSRF फॉर्मची नमुना भरलेली प्रत माहितीस्तव
- (४) DDO Registration Number ची महाविद्यालय निहाय यादी.



डॉ. सोनाली रोडे,

सहासंचालक
Joint Director
उच्च शिक्षण, मुंबई विभाग, मुंबई
Higher Education
Mumbai Region, Mumbai

प्रत:- माहितीस्तव सविनय सादर

- १) मा.संचालक, उच्च शिक्षण, संचालनालय, महाराष्ट्र राज्य, पुणे - ४११ ००१.
- २) सहाय्यक संचालक लेखा, उच्च शिक्षण, संचालनालय महाराष्ट्र राज्य, पुणे-४११००१

List of DDO Reg.No

Sr. No.	DDO Reg. No.	DDO Code	DDO Office
1	SGV251951E	06710100109	Principal H.R.College Of Commerce And Economics
2	SGV251952F	06710100149	Principal Kishinchand Chellaram College
3	SGV251953G	06710100058	Principal Siddharth College Of Commerce And Economics
4	SGV251954A	06710100106	Principal, Siddharth College Of Arts Science And Commerce
5	SGV251955B	06710100139	Principal Jai Hind College
6	SGV251956C	06710100102	Principal College Of Home Science Nirmala Niketan
7	SGV251957D	06710100107	Principal, St Xavier'S College
8	SGV251958E	06710100025	Principal K.P.B.Hinduja College Of Commerce
9	SGV251959F	06710100142	Principal Sant Gadge Maharaj College Of Commerce And Economics
10	SGV251960G	06710100087	Principal Bhavana H Somani College
11	SGV251961A	06710100068	Principal Wilson College
12	SGV251962B	06710100093	Principal B. M. Ruia Girls' College
13	SGV251963C	06710100055	Principal Akbar Peerbhoy College Of Com And Eco
14	SGV251964D	06710100085	Principal N.S.S. College Of Commerce And Economics
15	SGV251965E	06710100057	Principal Maharashtra College Of Art, Sci And Com
16	SGV251966F	06710100119	Principal Burhani College
17	SGV251967G	06710100111	Principal, Sophia College For Women
18	SGV251968A	06710100096	Principal, Lala Lajpatrai College Of Com & Eco
19	SGV251969B	06710100035	Principal M. D. College
20	SGV251970C	06710100075	Principal, Dr T.K Tope Arts And Commerce Night Senior College
21	SGV251971D	06710100131	Principal,Siws N.R.Swamy College
22	SGV251972E	06710100040	Principal Dr.Ambedkar College Of Commerce And Economic
23	SGV251973F	06710100129	Principal, D.E.S. Kirti M. Doongursee College
24	SGV251974G	06710100083	Principal, Dr.B.M.N.College Of Home Science
25	SGV251975A	06710100065	Principal,Smt. Maniben M.P. Shah College
26	SGV251976B	06710100062	Principal Guru Nanak Khalsa College
27	SGV251977C	06710100043	Principal, D.G. Ruparel College Of Arts, Science And Commerce
28	SGV251978D	06710100052	Principal,R. A. Podar College Of Com & Eco(Autonomous)
29	SGV251979E	06710100039	Principal, Guru Nanak College Of Arts, Sci And Com
30	SGV251980F	06710100144	Principal Sies College Of Arts Sci. & Comm.
31	SGV251981G	06710100104	Principal Sies College Of Commerce And Economics
32	SGV251982A	06710100112	Principal,Bombay Teachers' Training College
33	SGV251983B	06710100116	Principal,St. Xavier'S Institute Of Education
34	SGV251984C	06710100121	Principal PvdT College Of Education For Women
35	SGV251985D	06710100034	Principal,G.E.Societys College Of Education & Research
36	SGV251986E	06710100092	Principal, Kishinchand Chellaram Law College
37	SGV251987F	06710100024	Principal, Siddharth Law College
38	SGV251988G	06710100088	Principal New Law College
39	SGV251989A	06710100022	Principal Dr. Ambedkar College Of Law
40	SGV251990B	06710100156	Principal, B. P. C. A.'S College Of Physical Education.
41	SGV251991C	06710100032	Principal V.E.S College Of Arts, Sci. & Commerce
42	SGV251992D	06710100130	Principal Sree Narayana Guru College Of Commerce
43	SGV251993E	06710100143	Principal Mahatma Night Degree College Of Arts And Commerce
44	SGV251994F	06710100053	Principal, N. G. Acharya & D. K. Marathe College
45	SGV251995G	06710100036	Principal K J Somaiya College Of Science And Commerce
46	SGV251996A	06710100091	Principal K J Somaiya College Of Arts And Commerce
47	SGV251997B	06710100090	Principal Ramniranjan Jhunjhunwala College
48	SGV251998C	06710100120	S P N Doshi Women'S College
49	SGV251999D	06710100150	Principal, Vikas College Of Commerce (Night)
50	SGV252000E	06710100133	Principal Asmita College Of Arts And Commerce For Women
51	SGV252001F	06710100030	Principal Nes Ratnam College Of Arts Science & Com
52	SGV252002G	06710100153	Principal, V.K.Krishna Menon & S.S.Dighe College
53	SGV252003A	06710100076	Principal Ramanand Arya D.A.V College
54	SGV252004B	06710100042	Principal Mulund College Of Commerce
55	SGV252005C	06710100145	Principal,Chetana'S H. S. College Of Com And Eco.
56	SGV252006D	06710100048	Principal St. Andrew'S College Of Arts Science And Commerce.
57	SGV252007E	06710100125	Principal Rizvi College Of Arts Sci And Com
58	SGV252008F	06710100061	Principal R D National College
59	SGV252009G	06710100127	Principal Smt.M.M.K. College Of Commerce And Economics
60	SGV252010A	06710100138	Principal L S Raheja College Of Arts And Commerce

List of DDO Reg.No

Sr. No.	DDO Reg. No.	DDO Code	DDO Office
61	SGV252011B	06710100029	Sir Vithaldas Thakersey College Of Home Science (Autonomous)
62	SGV252012C	06710100080	Principal Nalanda Nritya Kala Mahavidyalaya
63	SGV252013D	06710100105	Principal Sathaye College
64	SGV252014E	06710100027	Principal M L Dahanukar College Of Commerce
65	SGV252015F	06710100148	Principal, Mithibai College
66	SGV252016G	06710100147	Principal,Narsee Monjee College
67	SGV252017A	06710100141	Principal Maniben Nanavati Women'S College
68	SGV252018B	06710100066	Principal Srss'S Spdt Lj College Of Arts,Com. &Sci.
69	SGV252019C	06710100019	Principal ,Shri Chinai College Of Com Eco
70	SGV252020D	06710100054	Principal Tolani College Of Commerce
71	SGV252021E	06710100079	Principal, Valia C.L.College Of Com & Valia L.C. College Of Arts
72	SGV252022F	06710100074	Principal, Bhavans College
73	SGV252023G	06710100146	Principal Jashbhai Maganbhai Patel College Of Commerce
74	SGV252024A	06710100122	Principal Vivek College Of Commerce
75	SGV252025B	06710100155	Principal S.S. &L.S. Patkar College
76	SGV252026C	06710100049	Principal Dtss College Of Commerce
77	SGV252027D	06710100128	Principal Ghanshyamdass Saraf College
78	SGV252028E	06710100069	Principal Prahladrail Dalmia Lions College Of Comm & Economics
79	SGV252029F	06710100089	Principalshri Md Shah Mahila College Of Arts & Com
80	SGV252030G	06710100136	Principal Smt K G Mittal College Of Arts & Commerce
81	SGV252031A	06710100140	Principal Nagindass Khandwala College
82	SGV252032B	06710100137	Balbharati'S M J Pancholia College Of Commerce
83	SGV252033C	06710100047	Principal, B K Shroff College Of Arts & M H Shroff College Of Commerce
84	SGV252034D	06710100135	Principal G.E.S'S Shri B. Vartak Arts, Com. & Sci. College
85	SGV252035E	06710100059	Principal, Shailendra Edu. Soc. Arts, Comm. & Sci. College
86	SGV252036F	06710100044	Principal S.K.Somaiya College Of Arts, Science And Commerce
87	SGV252037G	06710100154	Principal Matushri Pushpaben Vinubhai Valia College Of Commerce
88	SGV252038A	06710100126	Principal Public Night Degree College
89	SGV252039B	06710100157	Principal S.S.S' Adv. V. B. Deshpande College Of Comm (Night)
90	SGV252040C	06710100060	Principal, St. Teresa'S Institute Of Education
91	SGV252041D	06710100114	Principal Smt Kapila Khandvala College Of Education
92	SGV252042E	06710100064	Principal, Smt.Surajba College Of Education
93	SGV252043F	06710100028	Principal Chembur Sarvankash Shikshanshastra Mahavidyalaya
94	SGV252044G	06710100115	Principal Hashu Advani College Of Special Education
95	SGV252045A	06710100033	Principal G.J.Advani Law College
96	SGV252046B	06710100021	Principal, Jitendra Chauhan College Of Law
97	SGV252047C	031710100001	The Registrar Sndt Women'S University
98	SGV252048D	031710100002	The Registrar ,University Of Mumbai
99	SGV252049E	06710100132	Principal, Ramnarain Ruia Autonomous College
100	SGV252050F	06710100123	Principal, Ket'S V.G.Vaze College. (Autonomous)
101	SGV252051G	06710100041	Principal,L.J.N.J.Mahila Mahaviidyalaya
102	SGV252744G	06710100067	Principal, Hansraj Jivandas College Of Education.

5. CONTACT DETAILS

Tel. (Off) (with STD code) + Tel. (Res): (with STD code) +

Mobile* (Mandatory) + 9 1 1 2 3 4 5 6 7 8 9 (Mobile Number is required for communication and to get SMS alerts)

Email ID deepak12345@mail.com

6. OTHER DETAILS (Please refer to Sr no. 3 of the instructions)

- Occupation Details* [please tick(✓)]
- Private Sector ☐ Public Sector ☐ Government Sector ☒ Professional ☐
- Self Employed ☐ Homemaker ☐ Student ☐ Others (Please Specify)
- Income Range (per annum) Upto 1 lac ☐ 1 lac to 5 lac ☒ 5 lac to 10 lac ☐ 10 lac to 25 lac ☐ 25 lac and above ☐
- Educational Qualifications Below SSC ☐ SSC ☐ HSC ☐ Graduate ☒ Masters ☐ Professionals (CA, CS, CMA, etc.) ☐
- Please Tick If Applicable Politically exposed person ☐ Related to Politically exposed Person ☐ (Please refer instruction no.3)

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(✓)] Savings A/c ☒ Current A/c ☐

Bank A/c Number 1 2 3 4 5 6

Bank Name S T A T E B A N K O F I N D I A

Branch Name K A M L A M I L L S

Branch Address K A M L A M I L L S PIN Code 1 2 3 4 5 6

State/U.T. C o u n t r y

Bank MICR Code 1 2 3 4 5 6 IFS Code S B I N 0 0 0 0 1 2 3

8. SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No . 5 of the instructions)

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
<u>A B C</u>	<u>C D E</u>	<u>E F G</u>

Relationship with the Nominee WIFE Date of Birth (In case of Minor) d d / m m / y y y y

Nominee's Guardian Details (in case of a minor)

IN CASE OF MINOR, KINDLY PROVIDE REQUISTE DETAILS

First Name	Middle Name	Last Name
<u></u>	<u></u>	<u></u>

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)

IF PRAN CARD TO BE PRINTED IN HINDII 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:** The following Pension Funds (PFs) will act jointly as default PFs , if choice is not exercised by the government employee/subscriber (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd.In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous Bodies (SAB) employees, selection made under this section will be ignored, if choice to employees is not notified by the respective State Govt/Ministry.
- 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.
- NPS Lite:** NPS Lite is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator.

Name of the Pension Fund (Please select only one)	Please Tick (✓)	Default Choice of Pension Funds
LIC Pension Fund Limited	☐	Available in Government sector, if employee/subscriber does not exercise choice of PF
SBI Pension Funds Private Limited	☐	
UTI Retirement Solutions Limited	☐	
ICICI Prudential Pension Funds Management Company Limited	☐	
Kotak Mahindra Pension Fund Limited	☐	
HDFC Pension Management Company Limited	☐	
Birla Sunlife Pension Management Limited	☐	

* Selection of 01 Pension Fund is mandatory for All Citizen subscriber

(ii) INVESTMENT OPTION

(Please Tick (✓) 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 be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE – ASSET ALLOCATION (to be filled up only in case you have selected 'Active Choice' the investment option)

✗	Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Government Bonds and related instruments; Asset Class A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, Invits etc.
	Specify %					100%	
	Choices in Govt sector	Not available		Available	Not available		In case of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only

Please note:

- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(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	Choices in Govt sector	Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 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 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC 75		Not available	
LC 50		Available	
LC 25			

11. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 7 of the instructions):**Section I***

US Person*

Yes

☐

No

☒**Section II***

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

Particulars	Country (1)	Country (2)	Country (3)
Country/countries of tax residency	INDIA		
Address in the jurisdiction for Tax Residence	Address Line 1		
	City/Town/Village		
	State		
	ZIP/Post Code		
Tax Identification Number (TIN)/Functional equivalent Number			
TIN/ Functional equivalent Number Issuing Country			
Validity of documentary evidence provided (Wherever applicable)	dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy

"I certify that:

- It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid rules,
- the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence,
- I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI) /RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date 13-02-2020 / /

Place :

MUMBAI

Name of subscriber

DEEPAK BHARAT MARTHAN

SIGNATURE

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)

12. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 8 of the instructions)**Declaration & Authorization by all subscribers**

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same along with the PFRDA Act, regulations framed thereunder and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the Central Record Keeping Agency/National Pension System Trust, of any change in the above information furnished by me. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-PIN (to access CRA website and view details) & T-PIN.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Date **13-02-2020** m / y y y yPlace : **MUMBAI****SIGNATURE**
Signature/Thumb Impression* of Subscriber in black ink
 (* LTI in case of male and RTI in case of females)
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 **15-10-2010** m / y y y y

Date of Retirement d d / m m / y y y y

Employee Code/ID (If applicable) **E M P L O Y E E C O D E**

Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.

PPAN (If applicable) **D - 1 2 3 4 5 6**Group of Employee (Tick as applicable) Group A ☒ Group B ☐ Group C ☐ Group D ☐Office **C E N T R A L R E C O R D K E E P I N G A G E N C Y**Department **F I N A N C E**Ministry **F I N A N C E**DDO Registration Number **S G V 1 2 3 4 5 6 E**DTO/PAO/CDDO/DTA/PrAO Registration Number **3 1 0 2 3 4 5**Basic Pay **5 6 0 0 0**Pay Scale **5 6 0 0 0 - 2 0 2 0 0 - 5 8 0 0**

It is certified that the details provided in this subscriber registration form by _____ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

SIGNATURE BY DDO	STAMP OF DDO	SINGATURE BY DTO/DTA	STAMP OF DTO/DTA
Signature of the Authorised person (In the box above)	Rubber Stamp of the DDO (In the box above)	Signature of the Authorised person (In the box above)	Rubber Stamp of the DTO/PAO/CDDO/ DTA/PrAO (In the box above)
Designation of the Authorised Person		Designation of the Authorised Person	
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date	d d / m m / y y y y

14. DECLARATION BY EMPLOYER/ CORPORATE**Applicable to Corporate Subscribers only****(Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory))**

Date of Joining d d / m m / y y y y

Date of Retirement d d / m m / y y y y

Employee Code/ID

Corporate Regd. Number (CHO No.) Allotted by CRA

CBO No. allotted by CRA

Certified that the details provided in this subscriber registration form by _____ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Date d d / m m / y y y y

Place

Signature of the Authorised person (In the box above)	
Designation of the Authorised Person	Rubber Stamp of the Corporate (In the box above)

15. DECLARATION BY THE AGGREGATOR**Applicable to NPS Lite Subscribers****Authorisation by Aggregator's office (NL - AO)**

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me byafter (s)he has read the entries/ entries have been read over to her/him by me.

Signature of the Authorised person (In the box above)	Rubber Stamp of the Aggregator (In the box above)

Name of the Aggregator NPS Lite Account Office (NL-AO) Registration Number NPS Lite - Collection Centre (NL - CC) Registration Number Membership No. allotted by Aggregator (if any) Place Date **16. TO BE FILLED BY POP-SP**Receipt No. (17 digits) POP-SP Registration Number Document accepted for date of Birth Proof: Copy of PAN card submitted YES ☐ NO ☐ KYC Compliance YES ☐ NO ☐Documents Received: (Originals Verified) Self Certified (Attested) True Copies Identity Verification : Done **Existing Customer:**

I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer The above applicant is having an operative Bank/ Demat/Folio/.....account (specify nature of the account) having account number/client ID.....maintained at.....branch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA Rules/We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP)

To be filled by POP-SP		Name:
		Designation: Place:
POP-SP Seal	Signature of Authorized Signatory	Date

[To be filled by CRA - Facilitation Centre (CRA-FC)]Received by CRA-FC Registration Number Received at Date Acknowledgement Number (by CRA-FC) PRAN Alloted **ACKNOWLEDGEMENT**Name of the Subscriber: Contribution Amount Remitted: ₹ Date of Receipt of Application and Contribution Amount:

Stamp and Signature of the Employer/PoP:

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

IMPORTANT INSTRUCTIONS

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.
- (b) In case, you mention the KYC number submission of proof for the same is necessary.
- (c) 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 left blank or the application form is printed back to back.
- (d) 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.
- (e) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (f) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (g) The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office.

S. No	Item No.	Item Details	Instructions																																																																
1	1	Personal Details	i. This Form is applicable only for Resident Indians. There is a separate Form for Non Resident Indians & Overseas Citizen of India. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card.																																																																
		Spouse Name	If married, spouse name is mandatory.																																																																
		Father's Name	i. Father's name is mandatory. ii. If father's name has more than 30 digits, you may fill Annexure II for the same.																																																																
		Mother's Name	i. Mother's name is mandatory ii. If Mother's name has more than 30 digits, you may fill Annexure II for the same.																																																																
		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.																																																																
2	2, 3 & 4	Identity, Correspondence & Permanent address details	<table border="1"> <thead> <tr> <th>S.No</th> <th>Proof of Identity (Copy of any one)</th> <th>S.No</th> <th>Proof of Address (Copy of any one)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Passport issued by Government of India.</td> <td>1</td> <td>Passport issued by Government of India</td> </tr> <tr> <td>2</td> <td>Ration card with photograph.</td> <td>2</td> <td>Ration card with photograph and residential address</td> </tr> <tr> <td>3</td> <td>Bank Pass book or certificate with Photograph.</td> <td>3</td> <td>Bank Pass book or certificate with photograph and residential address</td> </tr> <tr> <td>4</td> <td>Certificate of the POP for an existing customer.</td> <td>4</td> <td>Certificate of the POP for an existing customer.</td> </tr> <tr> <td>5</td> <td>Voters Identity card with photograph and residential address.</td> <td>5</td> <td>Voters Identity card with photograph and residential address</td> </tr> <tr> <td>6</td> <td>Valid Driving license with photograph</td> <td>6</td> <td>Valid Driving license with photograph and residential address</td> </tr> <tr> <td>7</td> <td>Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> <td>7</td> <td>Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.</td> </tr> <tr> <td>8</td> <td>PAN Card issued by Income tax department</td> <td>8</td> <td>Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> </tr> <tr> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India</td> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address</td> </tr> <tr> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> </tr> <tr> <td>11</td> <td>Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.</td> <td>11</td> <td>The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/ State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. 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(ii) 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)	S.No	Proof of Identity (Copy of any one)	S.No	Proof of Address (Copy of any one)	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	3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residential address	4	Certificate of the POP for an existing customer.	4	Certificate of the POP for an existing customer.	5	Voters Identity card with photograph and residential address.	5	Voters Identity card with photograph and residential address	6	Valid Driving license with photograph	6	Valid Driving license with photograph and residential address	7	Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly	7	Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.	8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly	9	Aadhar Card / letter issued by Unique Identification Authority of India	9	Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address	10	Job cards issued by NREGA duly signed by an officer of the State Government	10	Job cards issued by NREGA duly signed by an officer of the State Government	11	Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.	11	The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/ State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address.	12	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old)	13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than 2 months old)	14	Photo Credit card.	14	Latest Property/house Tax receipt (not more than one year old)			15	Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation)
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3	6	Politically Exposed Person	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-owned corporations, important political party officials.																																																																
4	7	Subscriber's Bank Details	For Tier I & Tier II account, bank details are mandatory and it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account No. and IFS Code should be submitted.																																																																
5	8	Subscriber's Nomination Details	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 100, entire nomination will be rejected.																																																																
6	10	Pension Fund (PF) Selection and Investment Option	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. In case a Government employee/subscribers does not exercise the choices of Pension Fund, their contributions will be allocated among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pension Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd.																																																																
7	11	Declaration by subscriber on FATCA Compliance	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 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																																																																
8	12	Declaration by Subscriber	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 Impression in case of females.																																																																

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: <https://www.npscra.nsdl.co.in>
 Call: 022-4090 4242
 Address: Central Recordkeeping Agency (CRA)
 NSDL e-Governance Infrastructure Limited
 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
 Lower Parel (W), Mumbai - 400013

Equity Allocation Matrix for Active Choice

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

- Please note:
- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
 - From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM

Central Recordkeeping Agency (CRA) - NSDL e-Governance Infrastructure Limited

Please select your category [Please tick(✓)]	Central Govt.	☐	State Govt.	☐
	Central Autonomous Body	☐	State Autonomous Body	☐
	All Citizen Model	☐	Corporate Sector	☐
	NPS Lite (GDS)	☐		

Affix
recent photograph of
3.5 cm × 2.5 cm size /
Passport size

To,
National Pension System Trust.
Dear Sir/Madam,
I hereby request that an NPS account be opened in my name as per the particulars given below:

* indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page)
KYC Number, Retirement Adviser Code and Spouse Name fields are not applicable for Government & NPS Lite Subscribers

KYC Number (if applicable)																		Generated from Central KYC Registry
Retirement Adviser Code (If applicable)																		

1. PERSONAL DETAILS: (Please refer to Sr. No.1 of the instructions)

Name of Applicant in full	Shri ☐	Smt. ☐	Kumari ☐
First Name*			
Middle Name			
Last Name			
Subscriber's Maiden Name (if any)			
Father's Name*	F i r s t M i d d l e L a s t		
(Refer Sr. No. 1 of instructions)			
Mother's Name*	F i r s t M i d d l e L a s t		
(Refer Sr. No. 1 of instructions)			
Father's name will be printed on PRAN card. In case, mother's name to be printed instead of father's name [Please tick (✓)] ☐			
Date of Birth*	d d / m m / y y y y (Date of Birth should be supported by relevant documentary proof)		
City of Birth*			
Country of Birth*			
Gender* [Please tick (✓)]	Male ☐	Female ☐	Others ☐
Marital Status*	Married ☐	Unmarried ☐	Others ☐
Spouse Name*	F i r s t M i d d l e L a s t		
(Refer Sr. No. 1 of instructions)			
Residential Status*	Indian		

2. PROOF OF IDENTITY (PoI)* (Any one of the documents need to be provided along with the identification number)

Passport		Passport Expiry Date	d d / m m / y y y y
Voter ID Card		PAN Card	
Driving License		Driving License Expiry Date	d d / m m / y y y y
NREGA JOB Card			
Others	Name of the ID I D N u m b e r Please refer Sr. No. 2 of the instructions.		
UID (Aadhaar)	☐	(UIDI [Aadhaar] number not required.)	

As per the amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2019, PAN or Form 60 is mandatory under NPS.If you do not have PAN at present, please ensure that these details are provided within six months of submission of this Subscriber Registration Form.

3. PROOF OF ADDRESS (PoA)*

[Please tick (✓), as applicable]
#Not more than 2 months old.
Please refer Sr. No. 2 of the instructions

Correspondence Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
Registered Lease/Sale agreement of residence/Municipal Tax Receipt
#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill

Permanent Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
Registered Lease/Sale agreement of residence/Municipal Tax Receipt
#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill

4.1 CORRESPONDENCE ADDRESS DETAILS*

Address Type*	Residential/Business ☐	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.	C o u n t r y				

4.2 PERMANENT ADDRESS DETAILS*

☐ Tick (✓) in the box in case the address is same as above.

Address Type*	Residential/Business ☐	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.	C o u n t r y				

(iii) ACTIVE CHOICE – ASSET ALLOCATION (to be filled up only in case you have selected ‘Active Choice’ the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G - Government Bonds and related instruments; Asset Class A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, Invlts etc.
Specify %					100%	
Choices in Govt sector	Not available		Available	Not available	In case of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only	

Please note:

1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
3. The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(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	Choices in Govt sector	Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 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 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC 75		Not available	
LC 50		Available	
LC 25			

11. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 7 of the instructions):

Section I*

US Person* Yes ☐ No ☐

Section II*

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

Particulars		Country (1)	Country (2)	Country (3)
Country/countries of tax residency				
Address in the jurisdiction for Tax Residence	Address Line 1			
	City/Town/Village			
	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional equivalent Number				
TIN/ Functional equivalent Number Issuing Country				
Validity of documentary evidence provided (Wherever applicable)		dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy

“I certify that:

- a) It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid rules,
- b) the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- c) I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- d) I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence,
- e) I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI) /RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- f) I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- g) I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- h) I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date / /

Place :

Name of subscriber

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)

12. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 8 of the instructions)**Declaration & Authorization by all subscribers**

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same along with the PFRDA Act, regulations framed thereunder and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the Central Record Keeping Agency/National Pension System Trust, of any change in the above information furnished by me. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-PIN (to access CRA website and view details) & T-PIN.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Date

Place :

Signature/Thumb Impression* of Subscriber in black ink
 (* LTI in case of male and RTI in case of females)
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 Date of Retirement Employee Code/ID (If applicable) PPAN (If applicable)

Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.

Group of Employee (Tick as applicable) Group A ☐ Group B ☐ Group C ☐ Group D ☐Office Department Ministry DDO Registration Number DTO/PAO/CDDO/DTA/PrAO Registration Number Basic Pay Pay Scale

It is certified that the details provided in this subscriber registration form by _____ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person (In the box above)		Rubber Stamp of the DDO (In the box above)	
Designation of the Authorised Person		Designation of the Authorised Person	
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date d d / m m / y y y y	

14. DECLARATION BY EMPLOYER/ CORPORATE**Applicable to Corporate Subscribers only****(Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory))**Date of Joining Date of Retirement Employee Code/ID Corporate Regd. Number (CHO No.) Allotted by CRA CBO No. allotted by CRA

Certified that the details provided in this subscriber registration form by _____ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Date Place

Signature of the Authorised person (In the box above)

Designation of the Authorised Person

Rubber Stamp of the Corporate (In the box above)

Applicable to NPS Lite Subscribers

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me byafter (s)he has read the entries/ entries have been read over to her/him by me.

Signature of the Authorised person (In the box above)	Rubber Stamp of the Aggregator (In the box above)

Name of the Aggregator

NPS Lite Account Office (NL-AO) Registration Number

NPS Lite - Collection Centre (NL - CC) Registration Number

Membership No. allotted by Aggregator (if any)

Place

Date / /

Receipt No. (17 digits)	POP-SP Registration Number

Document accepted for date of Birth Proof:

Copy of PAN card submitted YES ☐ NO ☐ KYC Compliance YES ☐ NO ☐

Documents Received:	(Originals Verified) Self Certified	(Attested) True Copies
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Identity Verification :	Done	
-------------------------	------	--

I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer The above applicant is having an operative Bank/ Demat/Folio/.....account (specify nature of the account) having account number/client ID.....maintained at.....branch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA Rules. I / We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP)

To be filled by POP-SP		Name:										
		Designation:					Place:					
POP-SP Seal	Signature of Authorized Signatory	Date	d	d	/	m	m	/	y	y	y	y

[illegible]

Received at		Date	d	d	/	m	m	/	y	y	y	y
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[illegible][illegible][illegible]

Contribution Amount Remitted:	₹	
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Date of Receipt of Application and Contribution Amount:

d	d	/	m	m	/	y	y	y	y
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5 of 5

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.
- (b) In case, you mention the KYC number submission of proof for the same is necessary.
- (c) 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 left blank or the application form is printed back to back
- (d) 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.
- (e) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (f) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (g) The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office.

S. No	Item No.	Item Details	Instructions																																																																
1	1	Personal Details	i. This Form is applicable only for Resident Indians. There is a separate Form for Non Resident Indians & Overseas Citizen of India. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card.																																																																
		Spouse Name	If married, spouse name is mandatory.																																																																
		Father's Name	i. Father's name is mandatory. ii. If Father's name has more than 30 digits, you may fill Annexure II for the same.																																																																
		Mother's Name	i. Mother's name is mandatory ii. If Mother's name has more than 30 digits, you may fill Annexure II for the same.																																																																
		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.																																																																
2	2, 3 & 4	Identity, Correspondence & Permanent address details	<table border="1"> <thead> <tr> <th>S.No</th> <th>Proof of Identity (Copy of any one)</th> <th>S.No</th> <th>Proof of Address (Copy of any one)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Passport issued by Government of India.</td> <td>1</td> <td>Passport issued by Government of India</td> </tr> <tr> <td>2</td> <td>Ration card with photograph.</td> <td>2</td> <td>Ration card with photograph and residential address</td> </tr> <tr> <td>3</td> <td>Bank Pass book or certificate with Photograph.</td> <td>3</td> <td>Bank Pass book or certificate with photograph and residential address</td> </tr> <tr> <td>4</td> <td>Certificate of the POP for an existing customer.</td> <td>4</td> <td>Certificate of the POP for an existing customer.</td> </tr> <tr> <td>5</td> <td>Voters Identity card with photograph and residential address.</td> <td>5</td> <td>Voters Identity card with photograph and residential address</td> </tr> <tr> <td>6</td> <td>Valid Driving license with photograph</td> <td>6</td> <td>Valid Driving license with photograph and residential address</td> </tr> <tr> <td>7</td> <td>Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> <td>7</td> <td>Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.</td> </tr> <tr> <td>8</td> <td>PAN Card issued by Income tax department</td> <td>8</td> <td>Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> </tr> <tr> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India</td> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address</td> </tr> <tr> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> </tr> <tr> <td>11</td> <td>Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.</td> <td>11</td> <td>The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/ State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. 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	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 opening form, the document may be accepted as a valid proof of both identity and address. (ii) 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)																																																																		
3	6	Politically Exposed Person	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-owned corporations, important political party officials.																																																																
4	7	Subscriber's Bank Details	For Tier I & Tier II account, bank details are mandatory and it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account No. and IFS Code should be submitted.																																																																
5	8	Subscriber's Nomination Details	Nomination details are mandatory. 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 100, entire nomination will be rejected.																																																																
6	10	Pension Fund (PF) Selection and Investment Option	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. In case a Government employee/subscribers does not exercises the choices of Pension Fund, their contributions will be allocated among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pension Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd.																																																																
7	11	Declaration by subscriber on FATCA Compliance	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 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																																																																
8	12	Declaration by Subscriber	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 Impression in case of females.																																																																

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: <https://www.npscra.nsdl.co.in>
 Call: 022-4090 4242
 Address: Central Recordkeeping Agency (CRA)
 NSDL e-Governance Infrastructure Limited
 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
 Lower Parel (W), Mumbai - 400013

Equity Allocation Matrix for Active Choice

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

- Please note:
- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
 - From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

INSTRUCTIONS FOR FILLING IN THE FORM

I, _____ hereby nominate the person(s) mentioned below who is/are member(s)/
of my family to receive the amount in my PRAN account under National Pension System in the event of my death.

1 of 2

TO BE FILLED/ATTESTED BY POP-SP/DDO/NL-CC

Certified that the above declaration and nomination details has been signed / thumb impressed before me by Sh/Smt/Ms. _____
_____ after he / she have read the entries / entries have been read over to him / her by me and got confirmed by him / her.

Rubber Stamp of the POP-SP/DDO/NL-CC

Signature of the Authorised Person

POP-SP/DDO/NL-CC Registration Number _____
(Allotted by CRA)

Designation of the Authorised Person : _____

POP-SP/DDO/NL-CC Office Name : _____

Date

d	d	/	m	m	/	y	y	y	y
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TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO

POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number
(Allotted by CRA): _____

Rubber Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO

Signature of the Authorised Person