Flat/Room/Door/Block no.

Premises/Building/Village Road/Street/Lane Area/Locality/Taluk City/Town/District

State/U.T.

PIN Code

Landmark

CONTACT DETA	ILS									
Tel _e (Off) (with STD	code) +						with STD code)			
Mobile* (Mandato	ory) + 9	1				(Mobile Nu	umber is require	ed for communica	tion and to get SMS	alerts)
Email ID										
OTHER DETAIL	S (Please refer	to Sr no. 3	of the instruc	ctions)	h.g.e.Willi					
Occupation	Details* [plea	se tick(✓)	J			_	·			
	Sector _	Public Se			ent Sector [Professi				
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SUBSCRIBER E	ANK DETAIL	S* (Please	refer to Sr n	no. 4 of the	instructions)				
(All the bank det	ails are manda	itory excep	ot MICR Co	ode.)						
Account Type [p	lease tick(✓)]	Sa	vings A/c		Current	A/c				
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							please fill in Anr	exure III (Additiona	l Nomination Form) o	rovided separati
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11. DECLARATION BY SUBSCRIBER* (Ple	ase refer to Sr no, 7 of the	e instructions)		
Declaration & Authorization by all subscribe	rs			
I have read and understood the terms and cond and declare that the information and document Record Keeping Agency/National Pension Sys understand that I shall be fully liable for submis I further agree to be bound by the terms and o	s fumished by me are true stem Trust, of any change sion of any false or incorre	e and correct, to the best e in the above informatio ect information or docume	of my knowledge and belief, I undertake n furnished by me. I do not hold any pr ints,	to inform immediately the Centra re-existing account under NPS
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Declaration under the Prevention of Money				
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Date / /		÷		
Dlago			*	
Place :			Signature/Thumb Impression* ((* LTI in case of male and R	
12. DECLARATION ON FATCA* (Foreign A	account Tay Complian	nco Act) COMPLIANO	E (Diogeo refer to Sr. po. 8 of the instruc	tions\'
Section I*	ccount tax compilar	ille Act) COMPLIANO	L (Flease felel to 31 ho, 0 of the histrac	1101137.
Section (*				
US Person* Yes No				
Section II*				
For the purposes of taxation, I am a resident out below or I have indicated that a TIN/func	in the following countritional equivalent is una	ries and my Tax Identif available (kindly fill det	ication Number (TIN)/functional equals of all countries of tax residence	ivalent in each country is set if more than one):
Particulars		Country (1)	Country (2)	Country (3)
Country/countries of tax residency				
	Address Line 1			
	City/Town/Village			
Address in the jurisdiction for Tax Residence	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional	equivalent Number			
TIN/ Functional equivalent Number Issuing	Country			
Validity of documentary evidence provided (\	Wherever applicable)	\$-I no I -	I_{\uparrow} $I = I_{\uparrow}$	I = I
"I certify that:		مريمامه المطفين ممسندال	ant lower relation to reporting under s	eaction 285BA of the Act read
 a) It shall be my responsibility to educate m with the Rules 114F to 114H of the Inco rules, 				
b) the information provided by me in the Foundation belief, true, correct and complete and the a Reportable account or otherwise,	orm, its supporting Anr at I have not withheld a	nexures as well as in t iny material information	he documentary evidence are, to the n that may affect the assessment/cat	ne best of my knowledge and tegorization of the account as
c) I permit/authorise the NPS Trust to collect Trust and any of NPS intermediaries who	erever situated includin	ng sharing, transfer and	I disclosure between them and to the	nsactions therein, by the NPS e authorities in and/or outside
India of any confidential information for d d) I undertake the responsibility to declare provided in the Form, its supporting Ann provide fresh self-certification along with	e and disclose within 3 exures as well as in the	30 days from the date e documentary evidence	of change, any changes that may	take place in the information ion becomes incorrect and to
e) I also agree that in case of my failure to authority designated by the Governmen	disclose any material fa t of India (GOI) /RBI/IR	act known to me, now RDA/PFRDA for the pur	or in future, the NPS Trust may reporpose or take any other action as ma	ort to any regulator and/or any ay be deemed appropriate by
the NPS Trust if the deficiency is not rer f) I hereby accept and acknowledge that the domain for confirming the information pr	e NPS Trust shall have	the right and authority	to carry out investigations from the	information available in public
g) I also agree to furnish such information India or abroad in the subject matter hel	and/or documents as fein.	the NPS Trust may red		
h) I shall indemnify NPS Trust for any loss	that may arise to the N	NPS Trust on account of	of providing incorrect or incomplete i	information
Date / /				
Place :		=E	Signature/Thumb Impression? (* LTI in case of male and	* of Subscriber in black ink RTI in case of femal(s)
Name of subscriber				

(Cuba sib see E)	700.00	iment Subscribers only d attested by the Deptt. (All Details :	are Mandaton/\
			are Mandatory)
Date of Joining		Date of Retirement	/
Employee Code/ID (If applicable) PPAN (If applicable)			de/ID and PPAN are optional, If you intendention any one.
Group of Employee (Tick as applicable)	Group A G	roup 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 the address and employment details prohe/she has read entries/entries have be	ovided above are as per the ser	vice record of the employee maintaine	employed with us, including d by us. Also, it is further certified that
	Table 201-14 DDO	Circulus of the Authorized passes	Rubber Stemp of the DTO/DAC/CDD
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 Per	rson
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date / /	
of Joining	ployment Details to be filled an	orate Subscribers only d attested by Corporate (All Details an Date of Retirement	e Mandalory)) / /
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Copy of PAN card submitted YES NO KYC Compliance YES NO Compliance YES NO Compliance YES NO Compliance Neceived: Identity Verification: Done	Receipt No. (17 digits)		POP	SP Registration Nur	mber
Documents Received: (Originals Verified) Self Certified (Attested) True Copies Identity Verification: Done Existing Bank Customer: Uwe hereby certify/confirm that Stri/Smi/Kum is an existing customer of the Bank having Aultriance Saving Bank account too. branch and KYC norms required for opening NPS account have been fully compiled with. We further confirm that the S-B als of Shift Marker Based KYC Certificate: If you hereby certify that Addhaar Number of Shift Marker Based KYC Certificate: If you hereby certify that Addhaar Number of Shift Marker Based KYC Certificate: If you hereby certify that Addhaar Number of Shift Marker Based KYC Certificate: If you hereby certify that Addhaar Card are matching with that mentioned on NPS application form. Name:	Document accepted for date of Bir	rth Proof:			
Identity Verification: Done Existing Bank Customer: I/we hereby certify/confirm that Shri/Smt/Kum	Copy of PAN card submitted	YES NO NO	KYC Compliance	YES NO	
Existing Bank Customer: We hereby certify/confirm that Shri/Smt/Kum	Documents Received	(Originals Verified) Self Certified	(Attested) True (Copies	
I/We hereby certify/confirm that Shri/Smt/Kum size an existing customer of the Bank having fully Saving Bank account no	Identity Verification:	Done			
Saving Bank account no	Existing Bank Customer:				
Name: Designation: Place	Saving Bank account no	atatat	bn fully complied with. t'	ch and KYC norms i We further confirm	required for opening Bank Accounthat the S. B. a/c of Sh/Smt/Kum
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: / / / /	ī ····				
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Stamp and Signature of the Employer/Po				Stamp and Sig	nature of the Employer/Po⊡

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) heaving a blank box after each word.

Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected it mandatory fields are

Applications incomplete in any respect and/or not accompanied by required documents are name to be rejected, the application form is printed back to back.

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 binds is the clear visibility of the face of the subscriber, the application shall not be accepted.

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 thinking impression should be useful and the proof of the proo

S. No	llem No.	Item Details	Instructions							
NU	NO.	Personal Details	i. This Form is applicable to Resident Indians and there is a separate Form for Non Resident Indians. 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.							
1	1	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.							
		Date of Diffi	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 addres							
			3 Bank Pass book or certificate with Photograph. 3 Bank Pass book or certificate with Photograph and residential address							
			4 Certificate of the POP bank for an existing Bank customer. 4 Certificate of the POP bank for an existing Bank customer							
			5 Voters Identify card with photograph and residential address 5 Voters Identify 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 pholograph signed by a Member of Parliament or Member of Legislative Assembly 8 Each of Certificate of identity with pholograph signed by a Member of Parliament or Member of Legislative Assembly 9 Cazetted officer like District Magistrate, Divisional commissione BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.							
		Idenlity,	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							
		Correspondence & Permanent address	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							
0	2 2 2 4	details	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							
2	2, 3 & 4		11 Identity card issued by Central/State government and its Departments, statuary/ 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, issued by any of the following: Central/State Government and its hepathroom, Statuary/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions for their employees.							
			12 Photo, Identity Card issued by Defence, Paramilitary and 12 Latest Electricity/water bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old).							
			13 Ex-Service Man Card issued by Ministry of Defence to their 13 Latest Telephone bill in the name of the Subscriber / Clarmar L and showing the address (less than 3 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)							
3	G	Politically Exposed Person	Note: (i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by bim/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). 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.							
		1 (13011	owned corporations, important political party officials.							
4	7	Subscriber's Bank Details	For Tier L& Tier II, bank details are mandatory and it should be supported by cancelled cheque. Please attach a Cancelled cheque (concavour) Subscriber Name, Bank Account Number and IFS code) or Bank Certificate containing Name, Bank Account Number and IFS or do, for direct 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.							
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	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.							
7	11	Declaration by	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attasted by the designated officer of POP/POP-SP/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and stamp.							
8	12	Subscriber Declaration by subscriber on FATCA Compliance	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 as a 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 Relighborated Citizenship should be provided or reasons for not having relinquishment certificate is to be provided							
			Congress line services or reasons for Subacidians							

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