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To, National Pension System Trust																													(□	0(ass not stap	si	gn	ac	OSS	s/	
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I hereby request that an NPS account indicates mandatory fields. Please fill																		ctior	ıs pa	age	:.)																
1. PERSONAL DETAILS: (Refer S														<u> </u>								cure	e ii	na	me	—L exc	ee	ds	th	e s	ра	се	pr	ovi	dec	l be	low
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Applicant Name*	F	<u>i</u>	r	S	t					_		M	i	d	d	l e	9	L		Ļ		1		_	L	а	S	<u></u>	t	_	Ţ			Ļ	1	_	_
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Mother's Name	F	i	r	S	t							M	i	d	d	l e	9								L	а	S		t	Ш	\perp						
Either Father's or Mother's nan	ne is	s m	and	ato	ry*				Sel	lect	the	nam	e to	арр	oear o	on P	PRAI	N C	ard				Fat	her	's n	am	ie				M	lot	he	r's	Na	me	
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Spouse Name* (if married)	F	i	r	S	t							M	i	d	d	l e	9	Τ	Т	Ť	Т	Т	Т	Т	L	а	S	T	t	_	Т			Τ	Τ	Т	7
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Annual Income Range (per annum)*		B	elow	, 1	lac	Ť		1 la	ıc to	5 la	ac.	_			10 la			10	lac	_ to					_			to				_	_			1 (.
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2. PROOF OF IDENTITY (Pol)* (f PAI	N is	s not	pro	vide	d, a	ny c	ne (of the	e foll	owin	ng dod	cum	ents	to be	sub	mitte	d)																			
Passport														Pas	sspor	rt E>	cpiry	Da	te				d	d	n	1	m)	y	У		У		У			
Driving License														Dri	ving l	Lice	nse	Ex	oiry	Da	ate		d	d	n	1	m)	y	У		У		У			
Government ID Card		L												Vot	er ID	Ca	rd											L									
National Population Register																																					
Proof of possession of Aadhaar						Pro	vide	e las	t Fou	ır Di	gits.	Reda	ct o	r bla	ck-ou	t firs	t 8 d	igits	of t	he .	Aad	lha	ar ni	umb	er c	n s	sub	mi	tte	d c	op	y					
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4. CONTACT DETAILS*		_									1										_							_			_		_			_	
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Email ID*		\perp	\bot																									L			\perp						
5. BANK DETAILS* (Proof to be sub	omitte	ed ·	- Ref	fer (Sr. N	o. 4	of t	he ii	nstru	ction	ns)																										
Account Type		Sa	avin	g A	/c			Cui	rren	t A/c	;																										
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6. NOMINATION DETAILS* (Refe	r Sr	No	5.0	f th	a inc	truct	tion	2)																													
A. The nomination shall be in favour	of o	ne	or n	nor	е ре	rsor	ns b	elor	nging	g to	his/h	ner fa	mily	/. Fo	r non	nina	ting	mor	e th	an	one	e p	erso	n, s	sub	mit	Ar	nne	ex	ure)	I					
B. A fresh nomination shall be made C. Before filling-up the details, pleas	by t	the	sub	scri	ber	on h	nis/h	ner i	marr	iage	÷.						-					•															
Nominee Name	e rei	lei	NOII	IIII		reia	alioi	nsni	рт	aurix	pro	viaea	M	insu			age				_				_	_	1	Т	_		$\overline{}$	4	Т			_	\neg
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Relationship	_	_	_			, T	T				_ <i>F</i>	Age [1.0		Date		irth (_	ase	OT I	viin	or)	d	d	1 /	+	m	÷	m	<u> </u>	ᅷ	У	+	У	У	1	41
Name of Guardian (if nominee is a minor)	LF.		r		S	Ţ							M		d	d	1	е									L	8	а	S		Î					_
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7 SELECTION OF PENGLON FILE	UND	(11	-) A	NL								•						C(IO	IS)																		
7. SELECTION OF PENSION FU		ont	ion ('3 n			uniu	10 (الال	J 1 1/ L							•																				
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8. Tier-II Choice (Please tick (√) to activ	rate)															Providi	ing PAI	V is man	datory	
	Tie	r-II								Tier-II - Tax Saver (only for Central Government employees)									i)		
As per the details given in Annexure IV										With same bank, nominee details											
								With different bank/nominee/investment details as per Annexure IV													
9. FATCA* (Foreign Accoun		-		•						•											
I am a tax resident of India US Person Yes	and not re No.	sident o	of any	other o	coul	ntry		l am a ta	ax re	esident	of th	he coui	ntry/ies me	entioned	below						
	rticulars						Τ		Cou	ıntry (1	١		1	Count	Country (2) Country (3)						
Country/countri		esidency	,							iiidy (1	,			Couri	u y (<i>z</i>)	Country (3)					
		Addr	ess Lin	e 1																	
Address in the jurisdiction for Tax		<u> </u>	Town/V	illage																	
Residence		State	ost Co	nda																	
Tax Identification Number (TIN)/Functio	nal equivale			, dC																	
TIN/ Functional equivalent Number Issu	ing Country	/																			
Validity of documentary evidence provide	led (Where	ver applic	cable)						ddn	nmyyyy	/			ddmn	пуууу			ddm	myyyy		
	I have understood the information requirement of the Form (read along with the FATCA / CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete and hereby accept the same. Signature / Thumb Impression* of Applications.										pplicant										
10. DECLARATION BY APP	LICANT'	' (Refer	Sr no	. 8 of t	he i	nstru	ction	ıs)									(reter	instruct	ions)		
I have read and understood the terms and condition sof the National Pension System. The information and documents furnished by me are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to CRA / NPS Trust. 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. Declaration under the Prevention of Money Laundering Act, 2002 I here by 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: d d m m y y y y y Place: Signature / Thumb Impression* of Applicant (*LTI in case of males and RTI in case of females to provided. Toe impression in case no hands) 11. DECLARATION BY NODAL OFFICE* (All Details are Mandatory)																					
Date of Joining	d d	m m	У	У	У	У	Da	te of Re	etire	ment	d	d d	m m	уу	у у						
Employee Code/ID if applicable)					4											ID and P on any or		optional	. If you int	tend	
PPAN (If applicable)			<u> </u>		_											,					
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Ministry																					
DDO Registration Number										DT	O/PA	AO/CD	DO/DTA/F	PrAO Reg	gistratio	n Numbe	r				
It is certified that provided above are as per the servi she has read entries/entries have b		of the e	mploy	ee ma	inta	ined	with	us. The	give	en addr	ress	and the							employme her certifie		
Signature of the Authorised pe	erson		Rub	ber sta	mp	of the	e DD	00		Sig	gnati	ure of t	the Author	ised pers	son	Rubb	er stamp	of the [OTO/PAO/	CDDO	
Name of the Authorised Person													he Authori								
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Name of the Subscriber						T	AC	CKNOV	VVLE	DGE	ıvı⊏ſ	14.1									
Date of Receipt of Application :	d	d	m		,	17		\/	\/	W	7										
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Instructions for filling the subscriber registration form

General guidelines

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by the Nodal Office are liable to be rejected.
- (b) Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed / stamped by the designated nodal officer where they submit the application.

SI	Item No	Item Details	Instructions
1	1	Fathers Name, Mother's Name	(a) If the name has more than 30 digits, fill Annexure II for the same. (b) If the applicant is an Orphan, he/she may leave the fields blank. However, an official document to support the status to be submitted.
		Politically Exposed Person	Politically Exposed Person's (PEPs) are individuals who are or have been entrusted with prominent public functions such as 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.
2	2	Proof of Identity and Address	If the applicant is submitting Aadhaar as proof of Identity and Address, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
3	3	Current Address Details	Providing current address details is mandatory.
4	5	Bank Details	For Tier I & Tier II account, bank details and documentary proof are mandatory. Please submit a cancelled cheque / copy of bank passbook / bank statement / bank certificate / letter from Bank containing applicant's Name, Bank Name, Bank Account Number and IFS Code.
5	6	Nomination Details	 (a) If a subscriber has family at the time of making a nomination, the nomination shall be in favor of one or more persons belonging to his/her family. Any nomination made in favour of a person not belonging to family shall be invalid; A fresh nomination shall be made by the subscriber upon marriage and any nomination made before such marriage shall deemed to be invalid; If at the time of making a nomination the subscriber has no family, the nomination may be in favour of any person or persons but if the subscriber subsequently acquires a family, such nomination shall forthwith be deemed to be invalid and the subscriber shall make a fresh nomination in favour on one or more persons belonging to his family. (b) In case of more than one nominee, the percentage share for each nominee should be in whole numbers and must be equal to 100. (c) Please refer Nomination relationship matrix provided below.
6	7	Selection of Pension Fund (PF) & Investment Choice	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class'G' under' Actice Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. The choices exercised by applicants from State Government/Autonomous body shall be ignored if the choice is not extended by the respective employer and the contributions shall be invested as per the default choice. If no choice is provided, the contributions will be distributed among the three default Pension Funds (SBI/UTI/LIC) selected by the Government.
7	9	FATCA & CRS Declaration	 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). 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. In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form.
8	9 & 10	Declaration / Signature by Applicant	In case the applicant is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the authorised official of PoP attesting the same under his/her official seal and stamp.

	Nomination Relationship Matri	x (Please mention relationship as per det	ails given below)
Marital Status	Male	Female	Transgender
Unmarried	Mother And ther Please specify the relationship if any other person	Mother Father Please specify the relationship if any other person	Mother Hather Please specify the relationship if any other person
Married	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Daughter in Law 7. Grandson 8. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter
Widow/ Widower	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter
Divorcee	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and respective Point of Presence (PoP).
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated respective nodal office 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)
Protean eGov Technologies Limited

(formerly NSDL e-Governance Infrastructure Limited)

1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,

Lower Parel (W), Mumbai - 400013

	Annexu	res - Subscriber Registration Form for Private Sector applicants (Tick and fill applicable annexures below)											
	Annexure I - Print PRAN Card in Hindi (Fill the details in Devnagri script)												
Ар	plicant's First Name												
Mic	ldle Name												
Las	t Name												
Fat	her / Mother's First Na	ame											
Mic	ldle Name												
Las	t Name												
	Annexure II - If char	racters of name exceeded the space provided on page 1 of the application form											
Ар	plicant's First Name												
	ldle Name												
Las	t Name												
Fat	her's First Name												
Mic	Idle Name												
Las	t Name												
Мо	ther's First Name												
	ldle Name												
Las	t Name												
	Annexure III - Addition	onal Nomination For Tier - I For Tier - II For Tier - II Tax Saver											
Per	centage Share	Nominee II Nominee III Total should be equal to 100%											
	-												
Nominee	Nominee I - Name	First Last Last											
l ji	Relationship Name of Guardian	Age Date of Birth (in case of Minor) DD / MM / YYYY	=										
Įž	(if nominee is a minor)	F i r s t M i d d l e L a s t											
	Name of the Name		司										
ee	Nominee II - Name	First Last											
Nominee II	Relationship	Age Date of Birth (in case of Minor) DD / MM / YYYY	Y										
l	Name of Guardian (if nominee is a minor)	F i r s t											
			二										
96	Nominee III - Name	First Last Last											
Nominee III	Relationship		Υ										
2	Name of Guardian (if nominee is a minor)	F i r s t											
	Annexure IV - tick a	nd fill as applicable Activate Tier-II Activate Tier-II Tax Saver# (available to Central Govt employees only)											
PAI													
PAI		Death defette for The Horse or widow											
	No change in Bank d												
	count Type	Saving A/c Current A/c											
-	nk A/c Number												
Баі	nk Name	IFC Code											
	No change in Bank d	letails Nominee details for Tier-II are as under:											
N.	ominoo Nomo E i		$\neg \neg$										
	ominee - Name		<u> </u>										
Ш	elationship	Age Date of Birth (in case of Minor)											
	ame of Guardian F	r s t	_										
	,	e more than one person, fill Annexure III above											
	_	for Tier-II are as under: #only selection of PF is requ	ired										
	mvootmonto dotano	The first in the de different											
		Pension Fund* (Please Tick (√) one) Investment Choice (Please Tick (√) one)											
	Aditya Birla Sunlife Pen		w										
	DSP Pension Fund Mar	Cope total											
	ICICI Prudential Pension F LIC Pension Fund Limit												
	SBI Pension Funds Priv	That are the training in a second sec											
	UTI Retirement Solution	The child management made 2 miles											
늗			귀										
	ame of the Applicant												
Ш	ace	Signature / Thumb Impression* of Applicant											
[]	ate	D / D/ M/ M/ Y/ Y/ Y/ Y (refer instructions)											