APPLICATION FORM FOR SUBSCRIBER REGISTRATION

(To avoid mistake(s), please follow the accompanying instructions before filling up the form)	
Acknowledgement Number (by CRA-FC)	To affix recent Coloured photograph (3.5 cm × 2.5 cm)
Permanent Retirement Account Number: (To be filled by CRA-FC after PRAN generation)	
Note: This form is to be used by a subscriber working for a Organization registered under Corporate model of NPS for the opening up of a Tier I & Tier II account.	
	Signature/Thumb Impression* of Subscriber in black ink
Sir/Madam, I hereby request that a NPS account to be opened in my name and Permanent Retirement Account number (PRAN) be allotte Section A—Subscriber's Personal Details I. Full Name (Full expanded name: Initials are not permitted) Please Tick as applicable Shri Smt. Kumari	d as per particulars given below:
First Name * Transport First Name * Transpor	
Middle Name	
Last Name	
I would like my PRAN card to be printed in HINDI: Yes No (If Yes, please provide the details in the annex	cura CS Sion Paga No()
2. Gender * Male Female	are e.s-510ii i age 1407)
3. Date of Birth *	
D D M M Y Y Y Y (for PAN, please refer to Sr. No. 3	3 of the instructions)
5. Father's Full Name: First Name *	
Middle Name	
Middle Name	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.*	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City*	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City* State / Union Territory*	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City*	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City* State / Union Territory*	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City* State / Union Territory* Country* Pin Code* 7. Permanent Address*:If same as above, Please Tick else,{Fields marked with* are mandatory}:	
Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City* State / Union Territory* Country* 7. Permanent Address*:If same as above, Please Tick else,{Fields marked with* are mandatory}: Flat/Unit No, Block no.*	
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Middle Name Last Name 6. Present Address* (Fields marked with* are mandatory): Flat/Unit No, Block no.* Name of Premise/Building/Village District/Town/City* State / Union Territory* Country* Pin Code* 7. Permanent Address*:If same as above, Please Tick Flat/Unit No, Block no.* State / Glese, (Fields marked with* are mandatory): Flat/Unit No, Block no.*	

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2. Subscr	iber	's Ba	ınk	Det	ails	: (ple	ase :	refe	r to	Sr. N	No. 6	of t	he in	stru	ction	ns)													
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Section C - Subscriber's Nomination D Name of the Nominee: 1st Nominee	•										
rst Name*	2nd Nominee First Name*	3rd Nominee First Name*									
iddle Name	Middle Name	Middle Name									
iddie Name	Widdle Name	Middle Name									
ist Name	Last Name	Last Name									
Date of Birth (In case of a minor):											
t Nominee	2nd Nominee	3rd Nominee									
District and Mark											
Relationship with the Nominee: t Nominee	2nd Nominee	3rd Nominee									
ercentage Share:											
t Nominee %	2nd Nominee	% 3rd Nominee									
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Nominee's Guardian Details (in case of a minor Nomi 1st Nominee's Guardian Details	nee): 2nd Nominee's Guardian Details	3rd Nominee's Guardian Details									
rst Name*	First Name*	First Name*									
iddle Name	Middle Name	Middle Name									
ast Name	Last Name	Last Name									
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	ion to the subscriber to select the schem	s of Section D Page No. 8 for further details): e details. Kindly Contact your Employer for further details)									
PFM Name (in alphabetical order)		Please tick only one (Select only one PFM)									
ICICI Prudential Pension Funds Man	nagement Company Limited										
IDFC Pension Fund Management Co	ompany Limited										
Kotak Mahindra Pension Fund Limi	ted										
Reliance Capital Pension Fund Limi	ted										
SBI Pension Funds Private Limited											
UTI Retirement Solutions Limited											
(Selection of PFM is mandatory both in application form shall be summarily re		e you do not indicate a choice of PFM, your									

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(ii). Investment C	Option_					
Active Choice	Auto Choice					
(For details on A	uto Choice, please refer to	the PFRDA	website ww	w.pfrda.org.in)		
2. In case you do, the A	ou do not indicate any invest ou have opted for Auto Choi sset Allocation instructions tion (to be filled up only in	ice, DO NOT will be ignore	fill up section and invest	on (iii) below relating ment made as per Au	to Asset Allocation. In case to Choice.	you
Asset Class	E	C	G	Total		
% share	(Cannot exceed 50%)			100%		

Annexure CS-S1 Page 5

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						Page 6					
). PFM Selection	n for Active and Auto Cho	ice (Select o	only one PFM)							
	PFM Name (in alphabetic	cal order)		Please tick	only one						
ICICI Prudenti	ial Pension Funds Manage	ement Comp	pany Limited								
IDFC Pension	Fund Management Comp	oany Limited	d								
Kotak Mahind	ra Pension Fund Limited										
Reliance Capit	tal Pension Fund Limited										
SBI Pension F	unds Private Limited			Γ							
UTI Retirement Solutions Limited											
In case you Allocatio	ou do not indicate any investme ou have opted for Auto Choice, on instructions will be ignored a ation (to be filled up only in	ent option, you DO NOT fill nd investment	or funds will be i up section (iii) b made as per Au	nvested in Auto below relating to to Choice.	Choice Asset Allocation	•					
Asset Class	E	С				<u>-</u>					
		C	G	Total							
	on across E, C and G asset class rejected by the POP.			100%	left blank and/o	or does not equal 100%, the					
Note:- The allocation pplication shall be section D – Dec hereby declare interpreted to me declared to be of not hold any prequenterstand that to access CRA/NCRA may, as	on across E, C and G asset class	ses must equal (Tier I & II read and unc the applicati y law for the roved <i>Terms</i> & <i>T-pin</i> . I ag	derstood the Coion are mine. (time being in and Condition gree to be bour	100% the allocation is offer Document b) I am a Citiz force. (d) I ar as for subscribat d by the said	nt, terms & co ten of India. (co n not an undis ters on the CR terms and cond	onditions or the same w c) I have not been found scharged insolvent. (e) I o RA website <i>governing I-p</i> ditions and understand th					

(DD/MM/YYYY)

Date:

Signature/Thumb

Impression* of Subscriber

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Filled by POP			
A. POP Registration No.			
B. KYC Compliance:	Yes	No	
C. KYC document accepted for identity proof:			
D. KYC document accepted for address proof:			
E. Document accepted for date of birth proof:			
F. PAN Compliance:	Yes	No No	
G. Copy of PAN Card Submitted:	Yes	No No	
H. Submitted Cancelled Cheque:	Yes	No	
		Signature of Authorized	1 Signatory
	Name :		Place :
	Designation :		Date: D D M M Y Y
POP Seal	Department :		D D M M I
[To be filled by CRA /CRA-FC)]	1		
Received by:		CRA-FC Registration Number: _	
Received at:		Date:	
Acknowledgement Number (by CRA-FC)			

INSTRUCTIONS FOR FILLING THE FORM

- a) Form to be filled legibly in **BLOCK LETTERS** and in **BLACK INK** only. 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 counter-signed by the applicant.
- b) Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- c) The subscriber should affix a recent color photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)
- d) Signature /Thumb impression (LTI in case of males and RTI in case of females) should only be within the box provided in the form. The subscriber should not sign across the photograph. 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) 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.
- f) The subscriber's thumb impression should be verified by the designated officer of the employer accepting the form.
- g) Subscribers are advised to retain the acknowledgement slip signed / stamped by the employer where they submit the application.

Sr. No.	Item No.	Item Details	Guidelines for Filling the Form
			Subscriber's Personal Details
1.	1	Full Name	Please state your name as mentioned in the Proof of Identity failing which the application is liable to be rejected. If the Proof of identity has a name by which the applicant has been known differently in the past, than the one provided in this application form, then requisite proof should be provided e.g. marriage certificate, or gazetted copy of name change.
2.	3	Date of Birth	Please ensure that this matches with the Date of Birth as indicated in the document provided in support.
3.	4	PAN	Please provide copy of the your PAN card.
4.	6, 7	Present Address	All future communications will be sent to present address.

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5.	9, 10, 11	Contact No. & Email ID	It is advisable to mention either 'be contacted in future.	It is advisable to mention either "Telephone number" or "Mobile number" or "Email ID" so that Subscriber can be contacted in future.										
			For Tier I, bank details are opt Code), all the bank details shall r		nowever, if a subscriber mentions any of the bank details(except MICR bry.									
6.	12	For activation of Tier II, bank details are mandatory. The subscribers shall provide a cancelled cheque, the details of which should match the bank details provided for Tier II												
	Subscriber's Nomination Details - Section C													
	1) Subscriber can nominate a maximum of three nominees.													
7.	1) Subscriber can nominate a maximum of three nominees. 2) Subscriber cannot fill the same nominee details more than once. 3) Percentag e Share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). 4) 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 b		nust be	equal to 100. If sum of percentage is not equal to 100, entire									
8.	Nominee's s Guardian Details		ninor, then nominee's guardian det		ill be mandatory.									
			ble as proof of identity and addr											
No.		entity (Copy of any	one)	No.	Proof of Address (Copy of any one)									
1		ring Certificate		1	Electricity bill^									
2		n Certificate		2	Telephone bill^									
3		ecognized Educatio	nal Institution	3	Depository Account Statement^									
5		Account Statement Int Statement / Passl	1-	5	Credit Card Statement^ Bank Account Statement / Passbook^									
6	Credit Card	in Statement / Passi	JOUK	6	Employer Certificate^									
7	Water Bill			7	Rent Receipt^									
8	Ration Card			8	Ration Card									
9		x Assessment Order		9	Property Tax Assessment Order									
10	Passport			10	Passport Passing State Passing									
11	Voter's Ider	tity Card		11	Voter's Identity Card									
12	Driving Lice			12	Driving License									
13	PAN Card				Cartificate of address signed by a Mambar of Darliament of Mambar									
14	Member of	Legislative Assemb	by a Member of Parliament or oly or Municipal Councillor or a	13	Certificate of address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.									
-	Gazetted Officer. Note: 1) Proof of Address mentioned in Sr. No. 1 to 7 (^) should not be more than six months old on the date of application.													
		You are required	l to bring original documents & t		oot be more than six months old on the date of applicationattested photocopies (Originals will be returned over-the-									
	1	counter after ver	nncauon)											

Subscriber Scheme Preference - Section D

<u>Kindly do not fill this section if your organisation has selected the scheme perference details for its subscribers.</u> Active choice

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

Auto choice

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

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

GENERAL INFORMATION FOR SUBSCRIBERS

- a) For any further clarification please refer to the PFRDA website www.pfrda.org.in or call on our toll free no. 1800110708
- b) The Subscriber can obtain the status of his/her application from the CRA website or through the respective employer.
- c) For more information

Visit us at http://www.npscra.nsdl.co.in

Call us at 022-24994200

e-mail us at info.cra@nsdl.co.in

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

अभिदाताकानाम :