

8. Alternate Nodal Officer's Details *:

Name * :

First Name *:

[Grid for First Name]

Middle Name :

[Grid for Middle Name]

Last Name:

[Grid for Last Name]

Designation *:

[Grid for Designation]

Phone No. *:

[Grid for Phone No.]

Mobile No.:

[Grid for Mobile No.]

STD Code

Phone Number

Email ID *:

[Grid for Email ID]

(Note : Email ID & Phone Number should be of the alternate Nodal Officer's and not the HO's Email ID and any Board Number.)

9.a Corporate PAN Details:

[Grid for Corporate PAN]

9.b Corporate TAN Details:

[Grid for Corporate TAN]

10. Corporate Office is Co-Contributor (Please tick only one): Yes [] No []

11. Details of Scheme Preference*: Selection of Scheme preference by: Subscriber [] Corporate []

12. If choice of investment is to be made by the Corporate on behalf of the employees (selected as Corporate in clause no. 11) then the following fields are mandatory:

(A) PFM Selection*:

PFM Name (in alphabetical order)	Please tick only one (Select only one PFM)
Birla Sunlife Pension Management Limited	[]
HDFC Pension Management Company Limited	[]
ICICI Prudential Pension Funds Management Company Limited	[]
Kotak Mahindra Pension Fund Limited	[]
LIC Pension Fund Limited	[]
Reliance Capital Pension Fund Limited	[]
SBI Pension Funds Private Limited	[]
UTI Retirement Solutions Limited	[]

(B) Investment option* : (In case you do not indicate any investment option, your funds will be invested in Auto Choice.)

Active Choice [] Auto Choice []

Asset Allocation (Please, indicate asset allocation pattern if Active Choice is selected.)

Asset Class	E (Cannot exceed 50%)	C	G	Total
% share				100%

13. CRA Charges to be borne by* - Employer Employee

We hereby declare and agree that we have read and understood the Offer Document, terms and condition. We further declare that the information supplied in the application, is complete and true. And we will notify Central Recordkeeping Agency (CRA) immediately about any change in the information provided in the application.

Corporate Head Office Seal	<div style="border: 1px solid black; width: 80%; margin: 0 auto; height: 30px;"></div>
	Signature of Authorized Signatory
	Name : _____ Place : _____ Designation : _____ Date : <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> D D M M Y Y
	Department : _____

To be Filled by POP

A. POP Registration No.

B. Submitted KYC documents : Yes No

POP Seal	<div style="border: 1px solid black; width: 80%; margin: 0 auto; height: 30px;"></div>
	Signature of Authorized Signatory
	Name : _____ Place : _____ Designation : _____ Date : <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> D D M M Y Y
	Department : _____

[To be filled by CRA]

Received by: _____

Received at: _____ Date: _____

Acknowledgement Number (by CRA)

Note:

1. Corporate has to select one PFM out of the latest list of PFMs who would invest the fund as per selected investment choice.
2. Examples of E, C and G mix are as follows:-

E (Equity)	C (Fixed Income)	G (Government Securities)
50% (max)	25%	25%
50% (max)	30%	20%
0%	50%	50%
0%	100%	0%
0%	0%	100%
30%	30%	40%
20%	50%	30%

3. In case the asset allocation amongst "E", "C" & "G" is left blank after choosing a PFM and the "Active Choice" option by the Corporate, it will be deemed that the Corporate intends to provide the option of asset allocation to its Subscribers. The Corporate should accordingly advise its Subscribers to provide the necessary information while filling up the Subscriber Registration Form.

Document to be Submitted to POP :

Documents as a proof for KYC on the status of corporate/entity.