

(To avoid mistake(s), please follow the accompanying instructions before filling up the form)

[illegible][illegible]

To affix recent
Coloured photograph
(3.5 cm × 2.5 cm)

1. This form is to be used by a subscriber opening a fresh Tier I and Tier II account
2. Pre-existing NPS account holders with a valid PRAN card need to fill up only the NPS Tier II form (Annexure UOS-S10)

Signature/Thumb Impression* of
Subscriber in black ink

I hereby request that a NPS account be opened in my name and a Permanent Retirement Account number (PRAN) be allotted as per particulars given below:

1. Full Name (Full expanded name: Initials are not permitted)

[illegible][illegible][illegible]

10

10

1

[illegible]

D D M M Y Y Y Y

(for PAN, please refer to Sr. No. 3 of the instructions)

(Date of birth should be supported by relevant documentary proof).

5. Category: Government ☐ Private Sector ☐ Self Employed ☐ NRI ☐ Others ☐ (Please tick (✓) any one)

7

7

7

1

3

6. Father's Full Name:

[illegible][illegible]

Last Name

7. Present Address* (NRIs may please refer to Sr. No. 4 of the instructions):

[illegible][illegible][illegible]

District/Town/City

State / Union Territory																			
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[illegible]

Pin Code						
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8. Permanent Address*: If same as above, Please Tick ☐ else, ☐

[illegible][illegible][illegible]

District/Town/City



[illegible]

Pin Code						
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9. Phone No.

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STD Code	Phone No.
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10. Mobile No.

[illegible]

12. Do you want to subscribe to SMS Alerts (To be made available later, on a chargeable basis): Yes ☐ No ☐

13. Subscriber's Bank Details: (OPTIONAL - please refer to Sr. No. 7 of the instructions) Savings A/c Current A/c

[illegible][illegible][illegible][illegible]

Pin Code					
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Bank MICR Code								
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[illegible]

1. Name of the Nominee:

3rd Nominee

1st Nominee										2nd Nominee										3rd Nominee									
First Name*										First Name*										First Name*									
Middle Name										Middle Name										Middle Name									
Last Name										Last Name										Last Name									

2. Date of Birth (In case of a minor)*:

1st Nominee							2nd Nominee							3rd Nominee							
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3. Relationship with the Nominee:

[illegible]

4. Percentage Share:

1st Nominee				%	2nd Nominee				%	3rd Nominee				%
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5. Nominee's Guardian Details (in case of a minor):

3rd Nominee's Guardian Details

[illegible]

Section C - Subscriber Scheme Preference (Please refer to the instructions on Page No. 8 for further details):**(i). PFM Selection for Active and Auto Choice (Select only one PFM)**

<u>PFM Name (in alphabetical order)</u>	<u>Please tick only one</u>
ICICI Prudential Pension Funds Management Company Limited	☐
IDFC Pension Fund Management Company Limited	☐
Kotak Mahindra Pension Fund Limited	☐
Reliance Capital Pension Fund Limited	☐
SBI Pension Funds Private Limited	☐
UTI Retirement Solutions Limited	☐

(Selection of PFM is mandatory both in Active and Auto Choice. In case you do not indicate a choice of PFM, your application form shall be summarily rejected).

(ii). Investment Option

Active Choice ☐ Auto Choice ☐ (For details on Auto Choice, please refer to the Offer Document)

Note:-

1. In case you do not indicate any investment option, your funds will be invested in Auto Choice
2. In case you have opted for Auto Choice, DO NOT fill up section (iii) below relating to Asset Allocation. In case you do, the Asset Allocation instructions will be ignored and investment made as per Auto Choice.

(iii). Asset Allocation (to be filled up only in case you have selected the 'Active Choice' investment option)

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

Note:-

The allocation across E, C and G asset classes must equal 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected by the POP.

I hereby submit the following details for activation of Tier – II account under NPS.

If same as Tier I, Please Tick	else, fill in the details below:
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Savings A/c	Current A/c
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Bank A/c Number*

[illegible]

Bank Name*		
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[illegible]

Bank Branch*

[illegible]

Bank Address*

[illegible]

Pin Code*

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Bank MICR Code *

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IFS code (Wherever applicable)

[illegible]

If same as Tier I, Please Tick ☐ else,

Name of the Nominee:

1st Nominee

2nd Nominee

3rd Nominee

1st Nominee													2nd Nominee													3rd Nominee												
First Name*													First Name *													First Name*												
Middle Name													Middle Name													Middle Name												
Last Name													Last Name													Last Name												

Date of Birth (In case of a minor)*:

[illegible]

Relationship with the Nominee:

[illegible]

Percentage Share:

1st Nominee				%	2nd Nominee				%	3rd Nominee				%
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Nominee's Guardian Details (in case of a minor):

1st Nominee's Guardian Details

2nd Nominee's Guardian Details

3rd Nominee's Guardian Details

First Name*	First Name *	First Name*
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name

If same as Tier I, Please Tick ☐ else,

PFM Name (in alphabetical order)	Please tick only one
ICICI Prudential Pension Funds Management Company Limited	☐
IDFC Pension Fund Management Company Limited	☐

PFM Name (in alphabetical order)	Please tick only one
Kotak Mahindra Pension Fund Limited	☐
Reliance Capital Pension Fund Limited	☐
SBI Pension Funds Private Limited	☐
UTI Retirement Solutions Limited	☐

(Selection of PFM is mandatory both in Active and Auto Choice. In case you do not indicate a choice of PFM, your application form shall be summarily rejected).

(ii). Investment Option

Active Choice ☐ **Auto Choice** ☐ (For details on Auto Choice, please refer to the Offer Document)

Note:-

- In case you do not indicate any investment option, your funds will be invested in Auto Choice
- In case you have opted for Auto Choice, DO NOT fill up section (iii) below relating to Asset Allocation. In case you do, the Asset Allocation instructions will be ignored and investment made as per Auto Choice.

(iii). Asset Allocation (to be filled up only in case you have selected the 'Active Choice' investment option)

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

Note:-

- The allocation across E, C and G asset classes must equal 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected by the POP.

Section D – Declaration & Authorization

I hereby declare and agree that (a) I have read and understood the Offer Document, terms & conditions or the same was interpreted to me, and the answers entered in the application are mine. (b) I am a Citizen of India. (c) I have not been found or declared to be of an unsound mind under any law for the time being in force. (d) I am not an undischarged insolvent. (e) I do not hold any pre-existing account under NPS.

I understand that there would be PFRDA approved **Terms and Conditions** for subscribers on the CRA website **governing I-pin (to access CRA/NPSCAN and view details) & T-pin**. I agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed.

Declaration for availing of Swavalamban benefit (Please strike off if not applicable)

☐ I have read the Swavalamban guidelines and I meet the prescribed eligibility criteria for assistance under the scheme. I also undertake to adhere to the prescribed contribution limit of minimum Rs. 1000/- and maximum of Rs. 12000/-, failing which the Central Government contribution credited to my account may be forfeited along with such interest rates as may be prescribed.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that:

1. The contribution paid has been derived from legally declared and assessed sources of income.
2. I understand that the PFRDA/NPS Trust has the right to peruse my financial profile and also agree that the PFRDA/NPS Trust has the right to close the NPS account in case I am found guilty of violating the provisions of any Law, directly or indirectly, by any Competent Court of Law, having relation to the laws governing prevention of money laundering in the country.

I _____, the applicant, do hereby declare that the information provided above is true to the best of my knowledge & belief.

Date : (DD/MM/YYYY)

Signature/Thumb
Impression* of Subscriber



POP-SP Registration Number	:							
KYC Compliance	:	Yes	☐					
KYC document accepted for identify proof	:							
KYC document accepted for address proof	:							
Document accepted for date of birth proof	:							
Copy of PAN card submitted	:	Yes	☐	No	☐			
PAN Compliance	:	Yes	☐					

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

Received by: _____ CRA-FC Registration Number: _____

Received at: _____ Date: _____

[illegible]

INSTRUCTIONS FOR FILLING THE FORM

- 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.
- Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- The subscriber should affix a recent colour 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.)
- 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.
- 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.
- The subscriber's thumb impression should be verified by the designated officer of the POP- SP accepting the form.**
- Subscribers are advised to retain the acknowledgement slip signed/ stamped by the POP-SP where they submit the application.**

Sr. No.	Item No.	Item Details	Guidelines for Filling the Form			
Subscriber's Personal Details - Section A of Tier I and Point No.1 of Tier II						
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	If you are having PAN, please provide copy of the same. Copy of PAN card is mandatory in case of cash contribution of Rs. 50,000 and above.			
4.	5	Category	An NRI subscriber would need to furnish an Indian address for communication and bank details within India. Fund transfers by NRIs would be subject to regulatory requirements as prescribed by RBI from time to time and FEMA requirements.			
5.	7	Present Address	All future communications will be sent to present address.			
6.	9, 10, 11	Phone No., Mobile No, & Email ID	It is advisable to mention either "Telephone number" or "Mobile number" or "Email ID" so that Subscriber can be contacted in future for any discrepancy.			
7.	13 of Tier I Point No.1 of Tier II	Bank Details Tier I	For Tier I, bank details are optional, however, if a subscriber mentions any of the bank details (except MICR code), all the bank details shall become mandatory.			
		Bank Details Tier II	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 B of Tier I and Point No.2 of Tier II						
8.	Percentage Share		1) Subscriber can nominate a maximum of three nominees. 2) Subscriber cannot fill the same nominee details more than once. 3) Percentage 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 be rejected.			
9.	Nominee's Guardian Details		If a nominee is a minor, then nominee's guardian details shall be mandatory.			
Illustrative list of documents acceptable as proof of identity and address						
No.	Proof of Identity (Copy of any one)		No.	Proof of Address (Copy of any one)		
1	School Leaving Certificate		1	Electricity bill^		
2	Matriculation Certificate		2	Telephone bill^		
3	Degree of Recognized Educational Institution		3	Depository Account Statement^		
4	Depository Account Statement		4	Credit Card Statement^		
5	Bank Account Statement / Passbook		5	Bank Account Statement / Passbook^		
6	Credit Card		6	Employer Certificate^		
7	Water Bill		7	Rent Receipt^		
8	Ration Card		8	Ration Card		
9	Property Tax Assessment Order		9	Property Tax Assessment Order		
10	Passport		10	Passport		
11	Voter's Identity Card		11	Voter's Identity Card		
12	Driving License		12	Driving License		
13	PAN Card		13	Certificate of address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.		
14	Certificate of identity signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a 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. 2) You are required to bring original documents & two self-attested photocopies (Originals will be returned over-the-counter after verification)						

Subscriber Scheme Preference - Section C of Tier I and Point No.3 of Tier II**Active choice**

1. **PFM selection is mandatory. 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. C (iii) and 3 (iii) respectively is left blank, the application shall be rejected.**

Auto choice

4. **A subscriber opting for Auto Choice must also select a PFM. The application shall be rejected if the subscriber does not indicate his/her choice of PFM**

In case both investment option and the asset allocation at Sr. No. (ii) and Sr. No. (iii) of Section C and point number 3 (ii) and (iii) respectively 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 Offer Document.

GENERAL INFORMATION FOR SUBSCRIBERS

- a) The Subscriber can obtain the status of his/her application from the CRA website or through the respective POP-SP.
- b) 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, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

Details for printing PRAN card in Hindi (please provide the details in Devnagri script):

Please note that the manner in which the names are provided in this annexure will be displayed on the PRAN card. However, date of birth will be printed in English only.

Subscriber's Full Name:

First Name * : _____

Middle Name : _____

Last Name : _____

Father's Full Name:

First Name * : _____

Middle Name : _____

Last Name : _____

(* indicates Mandatory Field)

Signature/Thumb Impression* of Subscriber

Name of the Subscriber: _____