ADDITIONAL NOMINATION FORM

INSTRUCTIONS FOR FILLING IN THE FORM

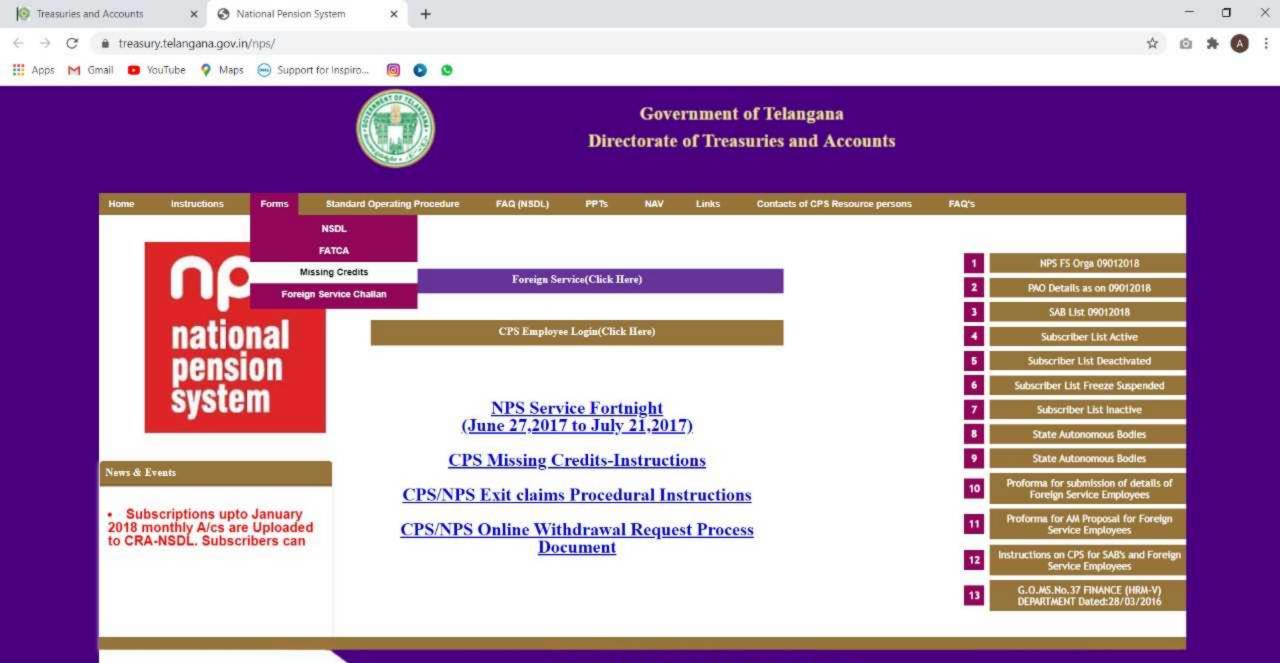
The details of nominees to whom the outstanding pension wealth of the subscriber is payable in case of the demise of the subscriber before entire proceeds are withdrawn is to be provided hereunder (Please refer instruction no: 5). Also, please note that in case of demise of the subscriber after opting for deferred withdrawal, all the outstanding pension wealth present in the NPS account of the subscriber shall be withdrawn upon receiving the request and paid to the nominees as mentioned in this form and the same would be treated as full and final discharge of the obligation.

,	hereby nominate the person(s) mentioned below who is/are member(s)
of my	family to receive the amount in my PRAN account under National Pension System in the event of my death.

1. Name of the Nominee:		
1st Nominee	2nd Nominee	3rd Nominee
First Name Middle Name Last Name	First Name Middle Name Last Name	First Name Middle Name Last Name
2. Present Communication address of the nom	inees:	
Address of 1st Nominee	Address of 2nd Nominee	Address of 3rd Nominee
3. Date of Birth* (Only in case of a minor):		
1st Nominee d d I m I y <th< th=""><td>2nd Nominee d d / m m / y y y y</td><td>3rd Nominee d I m m I y y y y</td></th<>	2nd Nominee d d / m m / y y y y	3rd Nominee d I m m I y y y y
4. Relationship with the Nominee:		
1st Nominee	2nd Nominee	3rd Nominee
5. Percentage Share:		
5. Percentage Share: 1st Nominee	2nd Nominee %	3rd Nominee %
1st Nominee // %		3rd Nominee
	a minor):	3rd Nominee's Guardian Details
1st Nominee % 6. Nominee's Guardian Details (Only in case of a	a minor): 2nd Nominee's Guardian Details First Name Middle Name Last Name 20 at	

*Note: Left thumb impression in case of illiterate male Subscriber and Right thumb impression in case of illiterate female subscriber must be obtained.

TO BE	FILLED/ATTESTED BY POP-SP/DDO/NL-CC	
Certifie	d that the above declaration and nomination details has been signed /	thumb impressed before me by Sh/Smt/Ms
	after he / she have read the entries / entri	ies have been read over to him / her by me and got confirmed by him / her.
	Rubber Stamp of the POP-SP/DDO/NL-CC	Signature of the Authorised Person
	P/DDO/NL-CC Registration Number	Designation of the Authorised Person :
(Allo	led by CRA)	POP-SP/DDO/NL-CC Office Name :
Date	d d / m m / y y y y	
TO BE F	FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO	
		POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number
		(Allotted by CRA):
Rubber	Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO	Signature of the Authorised Person
		0.9.14410 0. 210 / 42101004 / 0.001



https://treasury.telangana.gov.in/docs/nps/Missing_Credis_Proforma.xlsx

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Last Name		<u> </u>		<u> </u>	<u> </u>					<u> </u>														1			
Subscriber's Maiden Name (if any)																								\perp			
Father's Name* (Refer Sr. No. 1 of instructions)	F	i	ľ	S	t							М	i d	d		е						- 6	1 S		t		
Mother's Name*	F	i	r	S	t							M	i d	d		е						- 8	a s		t		Τ
(Refer Sr. No. 1 of instructions)																											
Father's name will be printed on PRA Date of Birth*	N care	d. In	case	, mot	1	s nam	ie to b	e printe	ed ins	tead o			iame [Birth sł					rolo	ant	door	mo	nton		۰f)			
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(Refer Sr. No. 1 of instructions)			<u> </u>	<u> </u>										G		Ŭ											
Residential Status*	Indi	an																									
2. PROOF OF IDENTITY (Pol)* (Any a	one (of the	e doc	ume	ents r	need to	o be pi	rovide	ed alo	ong w	ith th	e iden	tificat	ion ni	umbe	r)										
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Voter ID Card												PA	N Car	d													
Driving License												Driv	ving L	icens	se Ex	xpiry	Date	d	d	/	n	n n	1 <i>I</i>	у	y	У)
NREGA JOB Card																											
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[Please tick (✓), as applicable]					Pas	ssport	: /Drivir		se/UII			Voter	ID card	/NREG	GA Job			/Drivin on Car			UID	(Aadh	iaar)/V	oter	ID ca	rd/NR	EGA
#Not more than 2 months old. Please refer Sr. No. 2 of the instructions					Re	gister				ment c	of resid	ence/l	Municipa	al Tax		Re	gistere	d Leas			eeme	ent of	reside	nce/	Munici	pal Ta	ax
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5. CONTACT DETAILS Tel. (Off) (with STD code) + Tel. (Res): (with STD code) + Mobile* (Mandatory) 9 1 (Mobile Number is required for communication and to get SMS alerts) + Email ID 6. OTHER DETAILS (Please refer to Sr no. 3 of the instructions) Occupation Details* [please tick(\checkmark)] Private Sector Public Sector Government Sector Professional Self Employed Homemaker Student Others (Please Specify) ▶ Income Range (per annum) Upto 1 lac 1 lac to 5 lac 5 lac to 10 lac 10 lac to 25 lac 25 lac and above Below SSC SSC HSC Graduate Masters Professionals (CA, CS, CMA, etc.) Educational Qualifications Þ Please Tick If Applicable Politically exposed person Related to Politically exposed Person (Please refer instruction no.3) Þ 7. SUBSCRIBER BANK DETAILS* (Please refer to Sr no. 4 of the instructions) (All the bank details are mandatory except MICR Code.) Account Type [please tick(\checkmark)] Current A/c Savings A/c Bank A/c Number Bank Name Branch Name **PIN Code** Branch Address Bank MICR Code IFS Code 8. SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No . 5 of the instructions) Name of the Nominee (You can nominate up to a maximum of 3 nominees and if you desire so please fill in Annexure III (Additional Nomination Form) provided separately) Middle Name First Name Last Name Relationship with the Nominee Date of Birth (In case of Minor) 1 Nominee's Guardian Details (in case of a minor) First Name Middle Name Last Name 9. NPS OPTION DETAILS (Please tick (✓) as applicable) I would like to subscribe for Tier II Account also YES 🗌 NO 🔄 If Yes, please submit details in Annexure I. (If you wish to activate Tier II account subsequently, you may submit separate application (Annexure S10) to the associated Nodal Office or to POP/POP-SP of your choice. The list of POP/ POP-SPs rendering services under NPS and Annexure S10 is available on CRA website) YES NO If Yes, please submit details on Annexure II I would like my PRAN to be printed in Hindi 10. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION* (Please refer to Sr no. 6 of the instructions) (i) PENSION FUND SELECTION (Tier I) : Please read below conditions before opting for the choice of Pension Funds: Government Sector: The following Pension Funds (PFs) will act jointly as default PFs, if choice is not exercised by the government employee/subscriber (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd. In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous Bodies (SAB) employees, selection made under this section will be ignored, if choice to employees is not notified by the respective State Govt/Ministry. 2. All Citizen Model: Subscribers under All Citizen model have the option to choose the available PFs as per their choice in the table below. 3. Corporate Model: Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer. NPS Lite: NPS Lite is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator. 4. Name of the Pension Fund (Please select only one) Please Tick (✓) **Default Choice of Pension Funds** LIC Pension Fund Limited Available in Government sector, if employee/subscriber does not exercise SBI Pension Funds Private Limited choice of PF UTI Retirement Solutions Limited ICICI Prudential Pension Funds Management Company Limited Kotak Mahindra Pension Fund Limited HDFC Pension Management Company Limited Birla Sunlife Pension Management Limited * Selection of 01 Pension Fund is mandatory for All Citizen subscriber (ii) INVESTMENT OPTION (Please Tick (✓) in the box given below showing your investment option). Active Choice Auto Choice Please note: 1. In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below. In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50) 3. In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

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(iii)	ACTIVE CH	OICE – ASS	ET ALLOC	ATION (to	be fille	ed up	o only i	in c	ase	you	hav	e s	elect	ed '	Acti	ve C	hoio	ce' th	ıe ir	ve	stme	nt o	ptio	n)		
		E	С	G	A																					
	Asset Class	(Cannot exceed 75%)	(Max up to 100%)	(Max up to 100%)	(Cann exceed		Total	in	strum	nents;	As	set	class	G-G	over	ment	Bon	ds a	nd r	relat	ed in	strum	nents	Asse	l relate	s
	Specify %						100%	A	-Alteri	native	Inve	estm	ent Fu	inds i	ncluc	ling ins	strum	ients		SWB	S, MB	S, RE	115,	AI⊦s, li	nvlts et	2.
	Choices in Govt sector	Not ava	ailable	Available	Not availal		In cas	se of	Gove	ernme	nt en	nploy	/ee/su	bscri		ne Acti ass 'G			of As	set A	Allocat	ion is	restr	icted to	o Asset	
(iv)	Please note: 1. Upto 50 y 2. From 51 allocation 3. The total be rejecte AUTO CHO	LC, your fur	ove, maximun d out as per th oss E, C, G an I (to be fille nds will be	n permitted e matrix or d A asset c d up only invested Choices in sector Not availa	quity Invo I Equity I date of I dasses m / in cas as per Govt dable	estme Invest birth. nust b e yo LC 5	tment wi e equal t u have	to 10 se 75- 50- 25-	e as p 00%. Iecte It is th It is th It is th	per th In ca ed th he Lif he Lif he Lif	e e se, t e 'A e cy e cy e cy	quity he a uto cle f cle f	und w	atior ion is bice' /here /here	the the the	trix pr blank estm Cap to Cap to Cap to	ovid and/ ent o Eq o Eq o Eq	ed in 'or do opti uity in uity in uity in	oes no on). nvest nvest	ot eo In tmer tmer	qual 1 case	00%, , you 75% 50% 25%	, the u dc of th of th of th	applica not i e total e total e total	ation s ndica asset asset	hall
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Rule b) the i corre or of c) I per and conf d) I und the I certi e) I also	all be my res is 114F to 114 nformation pr ect and comp herwise. mit/authorise any of NPS i idential inform dertake the re Form, its sup fication along o agree that i	ponsibility to e the of the Inco ovided by me lete and that I the NPS Tru ntermediaries nation for com esponsibility to porting Annex with docume n case of my Government	ome tax Rules in the Form have not wit st to collect, wherever si npliance with o declare an cures as well entary eviden failure to disc	s, 1962 the , its suppo hheld any store, con tuated inc any law o d disclose as in the ce, close any r	ereunder rting Ani material nmunica luding sh r regulat within 3 document material	r and nexur infor te an haring tion w 80 da ntary fact k	the info res as w mation f nd proce g, transf vhether ys from evident known to	orma vell that ess fer a don the ice p o m	ation as in t may inforr and d nestic e date provic e, no	provi the c affect matio disclo c or fe e of c ded b w or	ded locu t the sure preig han y m	in t imer e as latir e be gn. ge, ie or	he Fo ntary sessr ig to tweer any c if an	the An the change of the second secon	s in a ence /cate Acco m a ges rtific	accord are, egoriz unt a nd to that n ation st ma	dand to th atio nd a the nay beco	ce wi ne be n of t II tra autho take omes port f	th the st of he a nsac oritie plac s inco	e af f my cco ction es in es in orre	oresa knov unt as s the and/ the i ct and	aid ru vledg s a R rein, or ou nforr d to p or ar	iles, ge ar epoi by t utsid matic prov	nd beli table he NF e India on pro ide fre	ef, tru accou PS Tru a of ar vided esh se authori	e, nt st ny in If-
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12. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 8 of the instruction	
Declaration & Authorization by all subscribers	
I have read and understood the terms and conditions of the National Pension System and declare that the information and documents furnished by me are true and correc Record Keeping Agency/National Pension System Trust, of any change in the abo understand that I shall be fully liable for submission of any false or incorrect informat	
	CRA, from time to time and any amendment thereof as approved by PFRDA, whether ind by the terms and conditions for the usage of I-PIN (to access CRA website and view
Declaration under the Prevention of Money Laundering Act, 2002	
	m legally declared and assessed sources of income. I understand that NPS Trust has t authorities. I further agree that NPS Trust has the right to close my PRAN in case I am
Date d I m m I y y y y	
Place :	
	Signature/Thumb Impression* of Subscriber in black ink (* LTI in case of male and RTI in case of females)
13. DECLARATION BY EMPLOYER	
Applicable to Governm	ent Subscribers only
(Subscribers Employment Details to be filled and	
Date of Joining d I m m I y y y	Date of Retirement d d / m m / y y y
Employee Code/ID (If applicable)	Employee Code/ID and DDAN are entioned. If you intend
PPAN (If applicable)	Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.
Group of Employee (Tick as applicable) Group A Grou	D 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 this subscriber registration form b the address and employment details provided above are as per the servic he/she has read entries/entries have been read over to him/her by us and	e record of the employee maintained by us. Also, it is further certified that
Signature of the Authorised person (In the box above) Rubber Stamp of the DDO (In the box above) (In the box above)	Signature of the Authorised person (In the box above) DTA/PrAO (In the box above)
Designation of the Authorised Person	Designation of the Authorised Person
Name of the DDO	Name of DTO/PAO/CDDO/DTA/PrAO
Deptt/Ministry	
14. DECLARATION BY EMPLOYER/ CORPORATE	
Applicable to Corpora	ite Subscribers only
(Subscribers Employment Details to be filled and a	ttested by Corporate (All Details are Mandatory))
Date of Joining d d / m // y y y Employee Code/ID Image: Code/ID	Date of Retirement d d I m m I y y y
Corporate Regd. Number (CHO No.) Allotted by CRA	
Certified that the details provided in this subscriber registration form by employment details provided above are as per the service record of the employment entries / entries have been read over to him / her by us and got confirmed by	
Date d d / m m / y y y y	Place
Signature of the Authorised person (In the box above)	
Designation of the Authorised Person	Rubber Stamp of the Corporate (In the box above)

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15. DECLARATION BY THE AGGREGATOR										
Applicable to NPS Lite Subscribers										
Authorisation by Aggregator's office (NL - AO) Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NF and the above declaration has been signed /thumb impressed before me byafter (s)he has read the entries/ entries ha	I									
been read over to her/him by me.										
Signature of the Authorised person (In the box above)Rubber Stamp of the Aggregator (In the box above)										
Name of the Aggregator										
NPS Lite Account Office (NL-AO) Registration Number NPS Lite - Collection Centre (NL - CC) Registration Number										
Membership No. allotted by Aggregator (if any)										
Place Date d d / m m / y y y y										
16. TO BE FILLED BY POP-SP										
Receipt No. (17 digits) POP-SP Registration Number Document accepted for date of Birth Proof:]									
Copy of PAN card submitted YES NO KYC Compliance YES NO										
Documents Received: (Originals Verified) Self Certified (Attested) True Copies										
Identity Verification : Done										
Existing Customer:										
I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer The above applicant is having an operative Bank/ Demat/Folio/maintained atbranch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA RulesI/We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP)										
To be filled by POP-SP Name:										
Designation: Place:										
POP-SP Seal Signature of Authorized Signatory Date d d / y y y										
[To be filled by CRA - Facilitation Centre (CRA-FC)]										
Received by CRA-FC Registration Number										
Received at Date d d / m m / y y y	у									
Acknowledgement Number (by CRA-FC)										
PRAN Alloted										
ACKNOWLEDGEMENT										
Name of the Subscriber:										
Contribution Amount Remitted: ₹ I <thi< th=""> I</thi<>										
Date of Receipt of Application and Contribution Amount:										
Stamp and Signature of the Employer/PoP:										

General Guidelines 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) leaving (a) a blank box after each word In case, you mention the KYC number submission of proof for the same is necessary. 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 (h)(c) 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 hinders the clear visibility of the face of the subscriber, the application shall not be accepted. (d) 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 thumb's impression should be verified by the designated officer of POP-SP / Nodal Office. (g) S. No Item Item Details Instructions No. This Form is applicable only for Resident Indians. There is a separate Form for Non Resident Indians & Overseas Citizen of India. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card. Personal Details If married, spouse name is mandatory Spouse Name Father's name is mandatory 1 1 Father's Name If father's name has more than 30 digits, you may fill Annexure II for the same Mother's name is mandatory If Mother's name has more than 30 digits, you may fill Annexure II for the same. Mother's Name Please ensure that the date of birth matches as indicated in the document provided in the support. Date of Birth Proof of Identity (Copy of any one) Proof of Address (Copy of any one) S.No S.No Passport issued by Government of India. 1 1 Passport issued by Government of India Ration card with photograph. 2 2 Ration card with photograph and residential address Bank Pass book or certificate with photograph and residential 3 Bank Pass book or certificate with Photograph. 3 address 4 Certificate of the POP for an existing customer. 4 Certificate of the POP for an existing customer. 5 Voters Identity card with photograph and residential address. 5 Voters Identity card with photograph and residential address 6 Valid Driving license with photograph 6 Valid Driving license with photograph and residential address Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc. 7 7 Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly PAN Card issued by Income tax department 8 8 Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address 9 Aadhar Card / letter issued by Unique Identification Authority 9 Identity, Correspondence & of India Job cards issued by NREGA duly signed by an officer of the Permanent address Job cards issued by NREGA duly signed by an officer of the 10 10 details State Government State Government Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial 11 The identity card/document with address or letter of allotment 2,3&4 2 of accompation issued by any of the following: Central/ State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companises for their employees.Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address. Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc. Photo. Identity Card issued by Defence, Paramilitary and Police department's / Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old) 12 12 Ex-Service Man Card issued by Ministry of Defence to their Latest Telephone bill (landline & postpaid mobile) in the name of 13 13 the Subscriber / Claimant and showing the address (less than 2 months old) employees. 14 Photo Credit card. Latest Property/house Tax receipt (not more than one year old) 14 Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation) 15 Note (i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/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 Politically Exposed Person example 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. 3 6 For Tier I & Tier II account, bank details are mandatory and it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account No. and IFS Code should be submitted. Subscriber's Bank 7 4 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. Subscriber's Nomination Details 5 8 Government employee/subscribers can exercice 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'. In case a Government employee/subscribers does not exercises the choices of Pension Fund, their contributions will be allocated among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pension Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd. Pension Fund (PF) 6 10 Selection and Investment Option 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 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)
 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 Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided
 Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the designated officer of POP/POP-SP/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Impression in case of females. Declaration by subscriber on FATCA 7 11 Compliance Declaration by Subscriber 8 12 Impression in case of females **General Information for Subscribers** The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application. b) 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

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

Ver 1.5

CSRF

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

Equity Allocation Matrix for Active Choice

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

Annexure GoS-S3 (Ver 1.4)	Page 1
Request for Scheme Preference Change under	
NSDL e-Governance Infrastrue (Please fill all the details in CAPITAL LETTERS	
For Nodal Office[#] use: Nodal Office Registration No. :	
Receipt No.: (Mandatory for POP/POP-SP)	Receipt Date://
PRAN *: Name of t	he Subscriber *:
Scheme Preference Change: Tier I	
I. Default Pension Funds (PFs):	
The following Pension Funds (PFs) will act jointly as default PFs: (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Ret	irement Solutions Ltd.
II. Subscriber Scheme Choice	
In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous allowed only if choice to employees is notified by the respective State Govt/Ministry.	bus Bodies (SAB) employees, selection made under this section
(i). PENSION FUND SELECTION:	
PFM Name (Please select only one)	Please Tick ($$) only one
Birla Sunlife Pension Management Limited	
HDFC Pension Management Company Limited	
ICICI Prudential Pension Funds Management Company Limited	
Kotak Mahindra Pension Fund Limited	
LIC Pension Fund Limited	
SBI Pension Funds Private Limited	
UTI Retirement Solutions Limited	
* Selection of 01 Pension Fund is mandatory	
(ii). INVESTMENT OPTION [Please Tick ($$) in the box given below showing your inves Choice].	tment option. Please tick only one, either Active Choice or Auto
1. ACTIVE CHOICE	
	invested in Government Bonds and related instruments er the Active choice of Asset Allocation is restricted to Asset
2. AUTO CHOICE	
Life Cycle (LC) FundsPlease Tick $()$ Only OneNote:LC501. Govt. employee can exercise Auto Choice of A 2. LC 50- It is the Life cycle fund where the Cap 3. LC 25- It is the Life cycle fund where the Cap	to Equity investments is 50% of the total asset
CRA generated Acknowledgement Number (to be filled by Nodal Office):	
I, the applicant, do hereby	declare that
Information stated above is true to the best of my information & belief.	
Date :	Signature/ Thumb Impression of the Subscriber

D	Μ	М	Y	Y	Y	Y	

Signature/ Thumb Impression of the Subscriber

Annexure GoS-S3 (Ver 1.4)				Page 2
Scheme Preference Change:	Tier II			
(i). PENSION FUND SELECTION:				
PFM Name (Please select only one)			Please Tick ($$) only one	
Birla Sunlife Pension Management Lim	ited			
HDFC Pension Management Company	Limited			
ICICI Prudential Pension Funds Manage	ement Company			
Kotak Mahindra Pension Fund Limited				
LIC Pension Fund Limited				
SBI Pension Funds Private Limited				
UTI Retirement Solutions Limited				
Please note: 1. In case you select Active Choice fill up sec. 2. In case you do not indicate any investment 3. In case you have opted for Auto Choice and investment will be made as per Auto Choice (iii). Active Choice Asset Allocation (to (Class E (Cannot Class Constrained (Class Constrained (Class)))	option, your funds w d fill up section (iii) b e (LC 50).	vill be invested in A below relating to A y in case you l Total As ar	auto Choice (LC 50) sset Allocation, the Asset Allocation in	ce' investment option)
 Please note: Upto 50 years of age, the maximum perm From 51 years and above, maximum perm of equity allocation will be carried out as The total allocation across E, C, G and application shall be rejected. iv) <u>Auto Choice Option (To be filled up do not indicate a choice of LC, your function</u>) 	nitted Equity Investm per the matrix on dat A asset classes must only in case yo	nent will be as per te of birth. t be equal to 100% u have selecte	the equity allocation matrix provided i . In case, the allocation is left blank a d the 'Auto Choice' investmen	and/or does not equal 100%, the
Life Cycle (LC)FundsPlease Tick (√) Only OneLC75LC50LC25LC25	2. LC 50- It i	is the Life cycle fu	nd where the Cap to Equity investment nd where the Cap to Equity investment nd where the Cap to Equity investment	s is 50% of the total asset
CRA generated Acknowledgement Number (t	o be filled by Nod	al Office):		
I		. the appl	cant, do hereby declare that	

Information stated above is true to the best of my information & belief.

Date :

Signature/ Thumb Impression of the Subscriber

Annexure GoS-S3 (Ver 1.4)		Page 3
TO BE FILLED/ATTESTED BY DDO (Mandatory if the request is processed by the associated Nodal Office)		
Rubber Stamp of the DDO	Signature of the DDO Name : Designation:	
TO BE FILLED/ATTESTED BY NODAL OFFICE		
Rubber Stamp of the Nodal Office	Signature of the Nodal Office (PAO/DTO/DTA/POP/POP-SP) Name : Designation:	
Acl	(To be filled by Nodal Office)	
Scheme Preference Change: Tier I Tier Nodal Office Registration Number:		
Receipt Number (Mandatory for POP/POP-SP)		
1. POP Transaction Charges: Rs.	2. Tax as applicable: Rs.	
3. Total Charges: Rs.	Signature/Stamp of Nodal Off	ice/Place

Instructions for filling the Form

- The Government Subscribers shall use this form for Scheme Preference Change for Tier I and Tier II account.
- Nodal Office[#] refers to PAO/DTO/DTA or a POP/POP-SP.
- All fields mark with (*) are mandatory. All Dates should be in DDMMYYYY Format.
- For Tier I, the Subscribers shall submit the application to associated Nodal Office only.
- For Tier II, the Subscribers shall submit the application to associated Nodal Office or POP.
- For more details on scheme preference change, you may visit CRA website (www.npscra.nsdl.co.in).

Equity Allocation Matrix for Active Choice

Age (years)	Max. Equity Allocation			
Upto 50	75%			
51	72.50%			
52	70%			
53	67.50%			
54	65%			
55	62.50%			
56	60%			
57	57.50%			
58	55%			
59	52.50%			
60 & above	50%			

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

Form-ISS (Ver 1.4) Page 1				
National Pension System (NPS) - Request for Subscriber Shifting				
NSDL e-Governance Infrastructure Limited (Please fill all the details in CAPITAL LETTERS & in BLACK INK only. All fields / sections marked in * are mandatory.)				
Section A - General Information* (Mandatory for all sector Subscribers. Please tick the respective block which is applicable.)				
I) Subscriber's Name *:				
II) PRAN (Permanent Retirement Account Number) *: III) Existing PRAN association (Refer Instruction No. I)				
a) Sector: * Central Government State Government All Citizens of India (UOS) Corporate Sector				
b) DDO / CBO / POP-SP Reg. No: * DDO / CBO / POP-SP Name: *				
IV) Target PRAN association (Refer Instruction No. II)				
a) Sector: * Central Government State Government All Citizens of India (UOS) Corporate Sector				
b) DDO / CBO / POP-SP Reg. No: * DDO / CBO / POP-SP Name: *				
V) PAN				
VI) Nomination Details* (Mandatory - You can nominate up to a maximum of 3 nominees and if you desire so please fill Additional Nomination				
Form provided on Page 5&6. Please refer to Instruction No. VI.)				
Nominee's Name: :				
Relationship with the Nominee: Date of Birth (In Case of Minor): D D M Y Y Y				
Nominee's Guardian Details (in case of a minor):				
(First Name) (Middle Name) (Last Name)				
Section B - Additional information for Subscribers shifting to Government Sector				
I. <u>Employment Details (All Details are Mandatory)</u> :				
[Subscriber's Employment Details to be filled and attested by DDO. Please refer to Instruction No. VII, VIII & IX]				
a) Date of Joining: (dd/mm/yyyy) b) Date of Retirement: (dd/mm/yyyy) (dd/mm/yyyy)				
c) Group of the Employee : A B C D				
d) Office:				
e) Department:				
f) Ministry:				
g) Basic Salary:				
h) Pay Scale:				
II. <u>Scheme Preference Details</u> : Please submit Subscriber Scheme Preference details on Page 4.				
Certified that the above declaration has been signed / thumb impressed before me by				
Signature of the Authorised Person Rubber Stamp of the DDO				
Designation of the Authorised Person Name of the DDO				
Date Department / Ministry				

Form-ISS (Ver 1.4) Page 2				
Section C - Additional information for Subscribers shifting to All Citizens of India (UOS) & Corporate Sector				
I. Subscriber Scheme Preference*:				
Do you wish to continue with the existing Pension Fund and Investment Option: Yes No (If 'No, please submit details on Page 4)				
• If Subscriber is shifting to Corporate sector, applicable only if the target Corporate has given the option of selecting scheme preference to the associated employees.				
• If Subscriber is shifting from Government Sector, please submit Subscriber Scheme Preference details on Page 4.				
II. KYC details* (Applicable only if Subscriber is shifting from Government Sector. Refer Instruction No. X)				
a) KYC document accepted for Identify Proof:				
b) KYC document accepted for Address Proof :				
c) Document accepted for Date of birth proof :				
d) Existing Customer:				
I/we hereby certify/confirm that Shri/Smt/Kum				
I/We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP).				
III. Employment Details * (Applicable if Subscriber is shifting to Corporate Sector. To be verified by the Corporate Office of the Subscriber.)				
a) Date of Joining*: b) Date of Retirement*: D D M M Y Y Y Y D D D M M Y Y Y Y				
c) Employee ID*: d) CHO Reg No*:				
Certified that the above declaration has been signed before me by				
Signature of the Authorised Person				
Designation of the Authorised Person Rubber Stamp of the Corporate				
Declaration (Applies to Subscribers across all sectors):				
I agree to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting request) and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / Undertaking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector.				
Date Signature/Left Thumb impression of Subscriber*				
For Office use only (To be filled up by the officer accepting the form)				
Received by:				
Received at: Date: Date: Time Stamp				
Details verified by: Date: Time stamp				
Receipt Number issued by the receiving office (only for POP-SP)				

Form-ISS (Ver 1.4)

INSTRUCTIONS FOR FILLING THE FORM

I. Details of the DDO / CBO / POP-SP with which the PRAN is currently associated.

- II. Details of the DDO / CBO / POP-SP with which the PRAN will be associated after shifting.
- III. Please quote the correct PRAN and attach a copy of the PRAN card.
- IV. This form is to be used by the Subscriber only.
- V. Sector for 'Existing PRAN association' and 'Target PRAN association' can be the same only if a Subscriber is shifting from one State Government to another State.
- VI. 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.
- VII. Employment details are to be captured in CRA system by the target PAO/DTO/DTA along with other details, if the Subscriber is shifting from UOS to Central / State Government sector.
- VIII.Nodal Office have to modify the employment details of the Subscriber after the shifting of the PRAN, in case of Subscriber Shifting from Central Government to State Government or vice versa or across two State Governments, i.e, both existing and new PRAN association are Government Sectors.
- IX. On execution of Subscriber Shifting request, Nodal Office shall ensure that the Subscriber is FATCA compliant in the CRA system (Applicable if subscriber is registered on/after July 1, 2014).
- X. Illustrative list of documents acceptable as proof of identity and address.

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 address
3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residential address
4	Certificate of the POP for an existing customer.	4	Certificate of the POP for an existing customer.
5	Voters Identity card with photograph and residential address.	5	Voters Identity 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 photograph signed by a Member of Parliament or Member of Legislative Assembly	7	Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.
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
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
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
11	Identity card issued by Central/State government and its Departments, Statutory/ 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 or letter of allotment of accomodation issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companises for their employees. Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address.
	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old)
13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than 2 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)

You are required to bring original documents & two self-attested photocopies for verification.

SUBSCRIBER SCHEME PREFERENCE:

(i). PENSION FUND SELECTION – (TIER I): Please read below conditions before opting for the choice of Pension Funds:

1. Government Sector: The following Pension Funds (PFs) will act jointly as default PFs, if choice is not exercised by the government employee/subscriber (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd.

In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous Bodies (SAB) employees, selection made under this section needs to be ignored, if choice to employees is not notified by the respective State Govt/Ministry.

2. All Citizens of India Sector: Subscribers have the option to choose the available PFs as per their choice in the table below.

3. Corporate Sector: Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer.

Name of the Pension Fund (Please select only one)	Please Tick ($$) only one	Default Choice of Pension Funds
LIC Pension Fund Limited		Available in Government sector, if
SBI Pension Funds Private Limited		employee/subscriber does not exercise choice of PF
UTI Retirement Solutions Limited		
ICICI Prudential Pension Funds Management Company Limited		
Kotak Mahindra Pension Fund Limited		
HDFC Pension Management Company Limited		
Birla Sunlife Pension Management Limited		

* Selection of 01 Pension Fund is mandatory for All Citizens subscriber

(ii). INVESTMENT OPTION [Please Tick ($\sqrt{}$) in the box given below showing your investment option].

Active Choice

Auto Choice

Please note:

- 1. In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below.
- 2. In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).
- 3. In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE-ASSET ALLOCATION (To be filled up only in case you have selected 'Active Choice' the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Note:1. Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G- Government Bonds and related instruments; Asset Class A- Alternative Investment Funds including instruments like CMBS,	
Specify %					100%	MBS, REITS, AIFs, Invlts. Etc.	
Choices in Govt sector	Not avai	lable	Available	Not available	In case of Government employee/subscriber the Active choice of As Allocation is restricted to Asset Class 'G' only		

Please note:

1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.

2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in **Annexure A**. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

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

(iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option. In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.)

Life Cycle (LC) Funds	Please Tick (√) Only One	Choices in Govt sector	Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset
LC75		Not available	2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset
LC50			3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC25		Available	1. Solve employee can excluse made endice of Asset Anotation for De 25 & De 50 only

Date:

Place:

Signature/Thumb Impression* of Subscriber in black ink (* LTI in case of male and RTI in case of females)

Name of Subscriber:

ADDITIONAL NOMINATION FORM

The details of nominees to whom the outstanding pension wealth of the Subscriber is payable in case of the demise of the Subscriber before entire proceeds are withdrawn is to be provided hereunder (Please refer instruction no: VI). Also, please note that in case of demise of the Subscriber after opting for deferred withdrawal, all the outstanding pension wealth present in the NPS account of the Subscriber shall be withdrawn upon receiving the request and paid to the nominees as mentioned in this form and the same would be treated as full and final discharge of the obligation.

I,	_hereby	nominate	the	person(s)	mentioned	below
who is/are member(s)/ of my family to receive the amount in my PRAN account under National	Pensio	n System i	n the	event of 1	ny death.	

1. Name of the 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. Present Communication address of the Nominees*:

Address of 1st Nominee	Address of 2nd Nominee	Address of 3rd nominee

3. Date of Birth* (Only in case of a minor. In DD/MM/YYYY):

1st Nominee://	2nd Nominee://	3rd Nominee://
----------------	----------------	----------------

4. Relationship with the Nominee*:

1st Nominee	2nd Nominee	3rd Nominee

5. Percentage Share*:

1st Nominee	%	2nd Nominee	%	3rd Nominee	%

6. Nominee's Guardian Details (Only 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

Dated	

Signature/ Thumb Impression* of the Subscriber

	etails has been signed / thumb impressed before me by ad the entries / entries have been read over to him / her by me and go
POP-SP/DDO Registration Number	
POP-SP/DDO Registration Number	
	Signature of the Authorised Person
(Allotted by CRA)	Designation of the Authorised Person :
	POP-SP/DDO Office Name
Date:	
	POP/POP-SP/PAO/DTO/DTA/PrAO Registration Number (Allotted by CRA):
_	
Rubber Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO	

Page 6

Form-ISS (Ver 1.4)

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

Equity Allocation Matrix for Active Choice

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

Statement showing the subscription particulars under NPS/CPS (to be submitted to the concerned Treasury)

Name of the E	mployee/De	signation:				Name of the Office	e:			
Employee ID:						Designation of the	DDO:			
PRAN Numbe	er:					DDO Code:				
Date of Appoin	ntment:									
Salary for the		Da/DA Arrears if	Total (2+3)	Subscription Recovered if	Token Number/Trans	Gross Amount of	Net Amount of	Date of Encashment of	Major Head of	Remarks
Month of		any		any	ID of the Bill	Bill	Bill	the Bill	the Bill	
1	2	3	4	5	6	7	8	9	10	11
Totals							-	-	•	
Verified that Tot	tal amount of	Rs	(in w	ords	_ 	is I	Recovered from the	individual towards CPS for	the period rom	

to.....

Siganature of the DDO

1. Verified Account Statement of the Individal and confirmed the missing credit.

2. Verified Form 47 of the respective month

3. Verfied the above records with reference to the CPS Schedule of the respective month

4. Verified reconcilation report of repective month

5. Verified the records with reference to the Text file uploaded to NSDL

6. CPS subscription amount is in our PD Account

7. The above missing credits not uploaded before

Verified

Stamp & Signature of the Treasury Officer

Cent	ral Re	cord					N SYS				uctu	re Lin	nitec	1		
Request For Char	nge/C						r Details					I-PIN/	T-PI	N/PF	RAN (Card
For POP-SP/DDO/NL-CO	use:					For PO	P/POP-SP/I	PAO/DTO	/DTA/Pi	AO/ N	L-AO	NL-00	use:			
Registration No.						Registra	tion No.:									
Date of Receipt:						U U	Receipt :				POP-S D Starr		DTO/	DTA/Pi	rao/Nl	L-AO/
Signature and Stamp of P	OP-SP	/DDO/N	NL-CC				By : By:									
Receipt No.: (Mandatory for PC		P)														
Acknowledgement No. (To be filled by Nodal Office as ge			CAN / CRA	system)												
hereby request for the followi	ing detai	ils for th	ie change	e [Please ti	ck (✔)].											
 Change or Correction Reissue of PRAN Car Permanent Retirement Active 	ď			er Details		B) Re	issue of I-	PIN or T-	PIN (Not	t Applica	able for l	NPS-Lite	Subscr	iber)		
hereby submit the following o orresponding rows.]	details o	f chang	je. [Pleas e	e tick (✓) ti	he box or	left margin	of appropria	te row whe	ere chang	e/corre	ction is	require	d and p	orovide i	the deta	ails in th
Section A – Change or Co	orrectio	on in S	Subscrib	er Maste	r Detail	s (* Indicat	es Mandato	ry Field)								
1. PERSONAL DETAIL	S: (Plea	se refer	to Sr. No.	.1 of the ins	tructions)											
Name of Applicant in full First Name*		Shri		Smt.		Kumari										
Middle Name																
Last Name																
Subscriber's Maiden Name																
Father's Full Name:																
First Name																
Middle Name																
Last Name																
Mother's Full Name:																
First Name																
Middle Name																
Last Name																
Date of Birth		1	m m /	И у у												
(Date of Birth should be sup	ported b	y releva	nt docume	entary proof	. Nodal C	office shall ve	erify the same	e before up	dating de	etails in	the CR	A system	n.)			
Gender [please tick (✓)]		Male	•	Fem	ale		Others									
Marital Status [please tic	:k (✓)]	Marr	ied	Unm	arried		Others									
PAN CARD																
Spouse Name (Refer Sr. No. 1 of instructions)																
KYC Number								Gen	erated from	Central K	YC Regis	try. Submis	sion of pr	oof for the	same is n	necessary.
Retirement Adviser Code KYC Number, Retirement A	dvicor (Codo an	d Snousa	Namo fiel	te aro no	t applicable	for Govern	nont & NP	S Lito Su	beerib	ore					
_													_			
2. PROOF OF IDENTIT	Y (Pol)	(Any on	ne of the d	ocuments r	leed to be	e provided a	ong with the	identificatio	on numbe	er) [Plea	se refer	Sr. No. 2 c	f the ins	structions		
Passport							Passport B	Expiry Dat	te		1		1			
Voter ID Card							PAN Card									
Driving License							Driving Lie	cense Exp	oiry Date	e d		/ m	m	у		
NREGA JOB Card		-64	D												• •	
Others	Namo	of the I	1)									Please re	efer Sr. I	No. 2 of th	ne instruc	ctions.
Others	Name		D					IN	u III		~ '					

Annexure - S2

3. PROOF OF ADDRESS	i (PoA)			Corre	espo	onder	nce A	ddress	5				Pe	rman	ent A	ddr	ess						
[Please tick (✔), as applicable	e]							ID (Aadh	aar)/Vo	ter ID ca	ard/NRE	GA Job		sport /[(Aadh	aar)/V	oter II) card	/NRE(GA Job
#Not more than 2 months old. Please refer Sr. No. 2 of the instruct	#Not more than 2 months old. Please refer Sr. No. 2 of the instructions					Card/Ration Card/Others Registered Lease/Sale agreement of residence/Municipal Tax							Card/Ration Card/Others Registered Lease/Sale agreement of residence/Municipal Tax										
				Receipt #Latest		d Gas/M	/ater/Ele	ctricity/T	elephor	ie[Landli	ne or pos	stpaid		eipt test Pip	ed Gas	/Wate	/Elect	ricity/Te	elepho	one[La	ndline	or pos	stpaid
				mobile]	Bill				-			-	mot	oile] Bill									
4.1 CORRESPONDENCE	ADDRES	SS DE	ETAILS	S [Please	e refer	Sr. No.	2 of the	e instruct	ions]														
Address Type*	Reside	ential/E	Busine	ss		Resi	dentia	ıl	E	lusine	ss		Regi	stered	d Offi	ce		Ur	nspe	cifie			
Flat/Room/Door/Block no.											L	andm	ark										
Premises/Building/Village																							
Road/Street/Lane																							
Area/Locality/Taluk																							
City/Town/District															PI	N Co	de						
State/U.T.																							
									_								_	_	-	-			
								e box i	n case			is same					r	No. 2 o	1			_	
Address Type*	Reside	ential/E	Busine	SS		Res	identi	al		Bus	ness			Regis	stered	l Off	ce		U	nspe	cified	d 🗌	
Flat/Room/Door/Block no.											L	andm	ark										
Premises/Building/Village																							
Road/Street/Lane																							
Area/Locality/Taluk																							
City/Town/District															PI	N Co	de						
State/U.T.																							
5. CONTACT DETAILS																							
Tel. (Off) (with STD code) +								-	Tel (Pr	es) (with	STD cov	do) +											
	0 1												a d fu			e e ti e				M0 -	lanta	、	
	9 1								(aoivi)	ile Nur	iber is	requi		or con	mun	calic	nan	α ιο ε	jet S	1013 6	liens)	
Email ID																							
6. OTHER DETAILS (Plea	ase refer to	Sr no.	3 of the	e instruc	ctions	5)																	
Occupation Details [p	lease tick	(√)]																					
Private Sector	Public S	Sector	[Go	vern	ment	Secto	or 📃	Profe	ssiona												_	
Self Employed	Homema		[udent					s (Ple		_ •											
 Income Range (per an 	, ,				ac to 5	5 lac				to 10 I	ac] 10 la		25 la	c			nd al			~~~~	-	
 Educational Qualification Please Tick If Applicab 		low SS		SS Sed pe			HSC		Grad	Jate o Polit		Mas		erson				onals refer					.)
											-	-								ucu	511110	5.5)	
7. SUBSCRIBER BANK	DETAILS	[All b	ank de	etails ai	re m	anda	tory e	xcept I	MICR	Code	.](Ple	ease re	fer to	Sr no	. 4 of 1	he in	struc	tions)					
You want to change Ban	k details o	of:Tie	ər I			Tier																	
(In case you want to chang	ge bank de	etails	in both	۱ Tier I	& Tie	er II A	ccour	nt, tick	both	check	box)												
Tier I Account :	Savings A	vc			Cur	rrent /	4/c																
Bank A/c Number																							
Bank Name																							
Branch Name																							
Branch Address															PIN	l Co	de						
Bank MICR Code								S Coc	le														
Tior II Accounty 16			000- ") 61-		- ام ارد	4ha -	telle	heler													
Tier II Account: If sar	Savings A		ease	11CK (*)		rrent /		the de	talis	Delov	/:												
Bank A/c Number	oavings A				Oui	Tent 7																	
Bank Name																							
Branch Name																							
Branch Address															DIN		de						
																l Co							
Bank MICR Code								S Cod							PI								

Annexure - S2

8. SUBSCRIBERS NOMINATION DETAILS (Ple	ase refer to Sr. No . 5 of the instructions)	
You want to change Nomination details of: Tie	er I Tier II	
	n both Tier I & Tier II Account, tick both check box)	
Tier I Account :		
	mum of 3 nominees and if you desire so please fill in Addition	al Nomination Form provided on page no. 4 & 5 separately.)
First Name	Middle Name	Last Name
Relationship with the Nominee	Date of Birth (In case of I	Minor) d d / m m / y y y
Nominee's Guardian Details (in case of a minor)		
First Name	Middle Name	Last Name
Tier II Account : If same as Tier I, Please 1		
Name of the Nominee (You can nominate up to a maxi First Name	mum of 3 nominees and if you desire so please fill Additional Middle Name	Nomination Form provided on pages 4 & 5 separately) Last Name
First Name		
Relationship with the Nominee	Date of Birth (In case of	Minor) d d / m m / y y y y
Nominee's Guardian Details (in case of a minor)		
First Name	Middle Name	Last Name
Section C – Request for Reissue of PRA Reissue of T-PIN, I-PIN and reissue of PRA per the preference given at the time of regis I the applicant, do hereby declare that the information & belief. Date : d d / m m / y y y y To be filled by POP / POP-SP KYC Compliance : Yes KYC document accepted for identify proof : Copy of PAN card submitted : Yes PAN Compliance : Yes	N card will be chargeable to Subscriber/emplo stration under NPS. provided above is true to the best of my knowledge	oyer by CRA. PRAN Card will be re-printed as Signature/Thumb Impression* of the Subscriber
	Signature of Aut	horized Signatory
	Name :	Place :
		Date : d d / m m / y y y y
POP / POP-SP Seal	5	

Annexure - S2

	ADDITIONAL NOMINATION FO	DRM
	INSTRUCTIONS FOR FILLING IN THI	EFORM
are withdrawn is to be provided hereunder (Please	refer instruction no: 5). Also, please note tha sent in the NPS account of the Subscriber sh	n case of the demise of the Subscriber before entire proceeds at in case of demise of the Subscriber after opting for deferred hall be withdrawn upon receiving the request and paid to the of the obligation.
I hereby submit the Nomination details for: (Pleas	e Tick{√}) Tier I Tier II	account under NPS.
(Please Tick on above both the option (i.e Tier I an	d Tier II) in case you want to retain same non	nination for both account and in case of different nomination
kindly fill separate Nomination Form)		
I, of my family to receive the amount in my PRAN acc		ninate the person(s) mentioned below who is/are member(s)/ event of my death.
1. Name of the Nominee:		
1st Nominee	2nd Nominee	3rd Nominee
First Name Middle Name Last Name	First Name Middle Name Last Name	First Name Middle Name Last Name
2. Present Communication address of the nom	nees:	
Address of 1st Nominee	Address of 2nd Nominee	Address of 3rd Nominee
3. Date of Birth* (Only in case of a minor):		
1st Nominee d I m m I y <th< th=""><th>2nd Nominee d I m m I y y</th><th>y y 3rd Nominee d d / m m / y y y y</th></th<>	2nd Nominee d I m m I y y	y y 3rd Nominee d d / m m / y y y y
4. Relationship with the Nominee: 1st Nominee	2nd Nominee	3rd Nominee
5. Percentage Share:		
1st Nominee %	2nd Nominee	% 3rd Nominee %
6. Nominee's Guardian Details (Only in case of a	i 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
Dated this day of	20 at	Signature/ Thumb Impression* of the Subscriber

*Note: Left thumb impression in case of illiterate male Subscriber and Right thumb impression in case of illiterate female subscriber must be obtained.

Certified that the above declaration and nomination details has been signed / thumb impressed before me by Sh/Smt/Ms	TO BE	FILLED/ATTESTED BY POP-SP/DDO/NL-CC						
Rubber Stamp of the POP-SP/DDO/NL-CC Signature of the Authorised Person POP-SP/DDO/NL-CC Registration Number Designation of the Authorised Person : (Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d d / m m / y y y y TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number	Certifie	-						
POP-SP/DDO/NL-CC Registration Number		after he / she have read the entries / entr	ies have been read over to him / her by me and got confirmed by him / her.					
POP-SP/DDO/NL-CC Registration Number								
POP-SP/DDO/NL-CC Registration Number Designation of the Authorised Person : (Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d / m m / y y y TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number								
POP-SP/DDO/NL-CC Registration Number Designation of the Authorised Person : (Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d / m m / y y y TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number								
POP-SP/DDO/NL-CC Registration Number								
(Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d d / m m / y y y y TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number		Rubber Stamp of the POP-SP/DDO/NL-CC	Signature of the Authorised Person					
(Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d / _ m / _ yyy TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number								
(Allotted by CRA) POP-SP/DDO/NL-CC Office Name : Date d d / m m / y y y y TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number								
Date d d / m m / y y y To BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number		-	Designation of the Authorised Person :					
TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number	(7110		POP-SP/DDO/NL-CC Office Name :					
TO BE FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number								
POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number	Date	d d I m m I y y y y						
	TO BE	FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO						
Rubber Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO	Rubbei	Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO/NI -AO/NI -OO						
Signature of the Authorised Person			Signature of the Authorised Person					

INSTRUCTIONS FOR FILLING THE FORM

General Guidelines

- (a) This form is to be used for the purpose of change/correction in Subscriber master details, reissue of I-Pin /T-Pin, reissue of PRAN card.
- (b) The form is to be submitted at the Nodal Office POP/POP-SP for carrying out the necessary changes.
- (c) Please tick the box on the left margin of appropriate row where change/correction is required and provide the details in the corresponding row. Please strike off the remaining blank rows for which no change is requested.
- (d) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- (e) Details Marked with (*) are the mandatory fields. Mention 12 digits PRAN correctly.
- (f) All Dates should be in "DD/MM/YYYY" Format.
- (g) Reissue of T-PIN, I-PIN (Not Applicable for NPS-Lite Subscriber) and reissue of PRAN card will be chargeable to Subscriber/employer by CRA.

S. No	ltem No.	Item Details		Instructions									
1	1	Spouse Name	lf mai	rried, spouse name is mandatory.									
			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 address							
			3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residen address							
			4	Certificate of the POP for an existing customer.	4	Certificate of the POP for an existing customer.							
			5	Voters Identity card with photograph and residential address.	5	Voters Identity 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 photograph signed by a Member of Parliament or Member of Legislative Assembly	7	Letter from any recognized public authority at the level Gazetted officer like District Magistrate, Divisional commission BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate							
		Identity,	8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Membe 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 Authorit India clearly showing the address							
2	2, 3 & 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 State Government							
		11	Identity card issued by Central/State government and its Departments, Statutory/ 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.		The identity card/document with address or letter of allotrr of accomodation issued by any of the following: Cen State Government and its Departments, Statutory/Regula Authorities, Public Sector Undertakings, Scheduled Commer Banks, Financial Institutions and listed companises for t employees.Pension or Family Pension Payment Orders iss by Govt. Departments or PSU containing address.								
			12	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water/piped gas bill in the name of the Subscr / Claimant and showing the address (less than 2 months old)							
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name the Subscriber / Claimant and showing the address (less that months old)							
			14 Photo Credit card. 14 Latest Property/house Tax receipt (not more than one y										
					15	Existing valid registered lease agreement of the house on sta paper (in case of rented/leased accommodation)							
			th (ii) If t op	the address on the document submitted for identity proof be account opening form, the document may be accepted a the address indicated on the document submitted for iden- bening form, a separate proof of address should be obtained correspondence & Permanent address are different, then	as a va tity pro d. All fu	alid proof of both identity and address. bof differs from the current address mentioned in the acco uture communications will be sent to correspondence addre							
3	6	Politically Exposed Person	count	cally Exposed Persons' (PEPs) are individuals who are or ry, for example heads of state or of the government, senio utives of state-owned corporations, important political party	or polit	ticians, senior government, judicial or military officials, ser							
4	7	Subscriber's Bank Details	conta prepr	se, subscriber provides bank details, it should be suppor ining Subscriber Name, Bank Name, Bank Account Nur inted with Subscriber name, a copy of bank passbook or criber Name, Bank Name, Bank Account No. and IFS Cod	mber a bank	and IFS Code. If cheque is not available or cheque is statement or bank certificate or letter from Bank mentior							
5	8	Subscriber's Nomination Details	not be	se of more than one nominee, percentage share value for e accepted in the nomination(s). Sum of percentage share equal to 100, entire nomination will be rejected.									
				General Information for Subscribe	rs								

b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the Nodal Officer / POP / POP-SP where they submit the application.

c) For more information, 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

	CENTRAL RECOR	D KEEPING AGENCY	<u>Annexure S7</u>
<u> </u>	Request For change in sign		
(To avoid mistak	ke(s), please follow the accomp	panying instructions carefully	<i>i</i> before filling up the form)
			_
Acknowledgement No.			
(To be filled by FC)			
Subcribers Name			
			To affix colour photograph
			(3.5 cm x 2.5 cm)
Permanent Retirement Acc	sount Number		- I
Fernanent Nethenient Acc			
			Subscriber's sign/Thum impression in black ink only
			(Applicable in case of chang
			of Photograph)
	we are to the a faille surface and a second The		
I nereby, request you to car	ry out the following change.Th	e necessary details are prov	Ided as below:
Change in sign	ature Change in p	hotograph	
Section A: Change in Sig	nature		
Reason for change in signa	turo		
Reason for change in signa			
Section B: Change in pho	otograph		
Reason for change in photo	graph:		
Subscriber's Signature		Date	
(New Signature)			
	For PAO Use	For FC Use	Entored by Data
	For PAO Use Date of Receipt	Date of Receipt	Entered by Date
			Entered by Date
			Entered by Date
		Date of Receipt	
For DDO Use Date of Receipt			Entered by Date
Date of Receipt	_ Date of Receipt Name & Signature	Date of Receipt	
Date of Receipt Name & Signature of Authorised person/	_ Date of Receipt Name & Signature of Authorised person/	Date of Receipt	
Date of Receipt Name & Signature of Authorised person/	_ Date of Receipt Name & Signature	Date of Receipt	
Date of Receipt Name & Signature of Authorised person/ Stamp of DDO	_ Date of Receipt Name & Signature of Authorised person/	Date of Receipt	
Date of Receipt Name & Signature of Authorised person/ Stamp of DDO	_ Date of Receipt Name & Signature of Authorised person/	Date of Receipt	
Date of Receipt Name & Signature of Authorised person/ Stamp of DDO ructions his form is to be submitted t	_ Date of Receipt Name & Signature of Authorised person/ Stamp of PAO	Date of Receipt	Verified by Date
Date of Receipt Name & Signature of Authorised person/ Stamp of DDO ructions This form is to be submitted to Please indicate whether requir The change request will be c	_ Date of Receipt Name & Signature of Authorised person/ Stamp of PAO	Centre.	Verified by Date

<u>Annexure S10 (Ver1.3)</u> Request for Activation of Tier-II ac	Page-1 Count under National Pension System (NPS)
NSDL e-Governan	g a pre-existing Tier I account under NPS
(To avoid mistake(s), please read the accompa	inving instructions carefully before filling up the form)
For Nodal Office [#] use:	
Nodal Office Registration No. :	
Receipt No.: (Mandatory for POP/POP-SP)	
Entered By : Date:	Verified By: Date:
I hereby submit the following details for activation of Tier – II account under N	PS.
Permanent Retirement Account Number (PRAN)*:	
1. Subscriber's Name*:	le Name) (Last Name)
2. Bank Details* (All bank details are mandatory except MICR Code):	
If same as Tier I, Please Tick ($$) else, provide the details below:	
Savings A/c Current A/c (please refer to Sr. No. j of th	e instructions)
Bank A/c Number*	
Bank Name*	
Bank Branch*	
Bank Address*	
Pin Code* Bank MICR Code	
IFS code*	
3. Subscriber's Nomination Details (Please refer to Sr. No. k of the instruction	ns)
Do you want to retain the same nomination as in your Tier I account?	YES NO
If NO, please fill in the details below (You can nominate up to a maximum of 3 Page 3.)	nominees and if you desire so please fill Additional Nomination Form provided on
Nominee's Name:	
(First Name) (Middle Na	
Relationship with the Nominee: Date	e of Birth (In Case of Minor):
Nominee's Guardian Details (in case of a minor) :	(Middle Name) (Last Name)
4. Subscriber Scheme Preference (Please refer to Sr. No. l of the instruction	
,	mandatory both in Active and Auto Choice. In case you do not indicate a choice
of PFM, your application form shall be summarily rejected.	
*Name of the Pension Funds are given in alphabetical order.	
PFM Name (Please select only one)	Please Tick ($$) only one
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	
SBI Pension Funds Private Limited	
UTI Retirement Solutions Limited	

Annexure S10 (Ver 1.3)

Active Choice Auto Choice

Please note:

- 1. In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below.
- 2. In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).
- 3. In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

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

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	Total	Note:1. Asset class E-Equity and related instruments; Asset class C- Corporate debt and related instruments; Asset class G-Government Bonds
Specify %				100%	and related instruments.

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- 3. The total allocation across E, C, and G asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(iv). Auto Choice Option (To be filled up only in case you have selected the 'Auto Choice' investment option. In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.)

Life Cycle (LC)Funds	Please Tick (√) Only One	Note:1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset
LC75		2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset
LC50		3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset
LC25		

5. PAN (Mandatory)*:						

6. Declaration & Authorization

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the National Pension System Trust, of any change in the above information furnished by me. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby 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.

CRA generated Acknowledgement Number (to be filled by Nodal Office):

I	, the applicant, do hereby my knowledge & belief. //MM/YYYY)	Signature/Thumb Impression* of Subscriber
TO BE FILLED/ATTESTED BY DDO (Mandatory if the request is processed by the associated Nodal Office)		
Rubber Stamp of the DDO	Signature Name : Do	of the DDO esignation:
To be filled by Nodal Office (PAO/DTO/DTA/POP/POP-SP)		
	Signature of Auth	norized Signatory
Nodal Office Seal	Name : Désignation :	Place : Date :

ADDITIONAL NOMINATION FORM

Page-3

The details of nominees to whom the outstanding pension wealth of the Subscriber is payable in case of the demise of the Subscriber before entire proceeds are withdrawn is to be provided hereunder (Please refer instruction no: k).

Ι,_

_hereby nominate the person(s) mentioned below who is/are member(s)/ of my family to receive the amount in my PRAN account under National Pension System in the event of my death.

1. Name of the 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. Present Communication address of the Nominees*:

Address of 1st Nominee	Address of	2nd Nominee	Address of 3r	d nominee

3. Date of Birth* (Only in case of a minor. In DD/MM/YYYY):

1st Nominee://	2nd Nominee://	3rd Nominee://
----------------	----------------	----------------

4. Relationship with the Nominee*:

4. Kelauonship with the Nonlinee*:			
1st Nominee	2nd Nominee	3rd Nominee	

5. Percentage Share*:

1st Nominee	%	2nd Nominee	%	3rd Nominee	%

6. Nominee's Guardian Details (Only in case of a minor):

1st Nominee's Guardian Details	2nd No	ominee's Guardian Details 3rd Nominee's	s Guard	lian Details
First Name		First Name		First Name
Middle Name		Middle Name		Middle Name
Last Name		Last Name		Last Name

Signature/ Thumb Impression* of the Subscriber

Dated this ______ day of ______ 20 at _____

Annexure S10 (Ver	<u>1.3)</u>		Pa
Acknowledgement to th	e Subscriber		
· • • • · ·		(To be filled b	by Nodal Office)
<u>Tier II Activation:</u> Nodal Office Regist	ration Number:		PRAN:
-			
Jame of the Subscr			Date: _/_/ Time Stamp:
Receipt Num (Mandatory for POP/			
. Transaction Charg	ges:	Rs.	2. Tax as applicable: Rs.
. Total Charges:		Rs.	
			Signature/Stamp of Nodal Office/Place
 list of POP-SPs h) Any Indian citiz registered with i) Subscribers are j) Bank Details : a. Bank details b. Subscriber sla are same as in 	rendering services u zen (other than gover CRA for Tier 1 acco advised to retain the are mandatory for Ti nall provide cancelle	nder NPS is available on CRA we nment employee mandatorily cov ant. acknowledgement slip signed/ sta er-II else, account will not be act d cheque , the details of which sh er should provide a 'cancelled ch 1) Subscriber can nominate a m 2) Subscriber cannot fill the sar	overed under NPS) may submit the application only to the POP-SP through which th stamped by the Nodal Office where they submit the application. ctivated. In case bank details are same as Tier I account, tick mark the corresponding should match with the details provided under Point No.2 on Page 1. Even if the bank cheque'.
Perc	entage Share	in the nomination(s).	all the nominees must be integer. Decimals/Fractional values shall not be accepted cross all the nominees must be equal to 100. If sum of percentage is not equal to 100, cted.
	s Guardian Details		nominee's guardian details shall be mandatory. applicable to Tier II. A Subscriber to Tier II is required to make a fresh nomination.
			ease select "YES" by putting tick mark in the box.
Selec <u>Activ</u> 1. P 2. A 3. A al <u>Auto</u> 4. A 5. In	e choice FM selection is mane llocation under Equ . Subscriber opting fo location across all th location table at Poin <u>choice</u> . Subscriber opting fo	ity (E) cannot exceed 75% or active choice may select the av- e selected asset classes must equa it No. 4 (iii) is left blank, the appl or Auto Choice must also select a nt option and the asset allocation	available asset classes ("E", "C", & "G"). However, the sum of percentage ual 100. If the sum of percentage allocations is not equal to 100%, or the asset plication shall be rejected.
For	more details on 'Inv	estment Option', you may visit	it CRA website (www.npscra.nsdl.co.in).
 The Su For mo Visit us Call us 	re information at http://www.npscr at 022-4090 4242 b: Central Recordkee	ne status of his/her application fro a.nsdl.co.in	from the CRA website or through the respective Nodal Office. ance Infrastructure Limited, 1 st Floor, Times Tower, Kamala Mills W), Mumbai - 400 013.

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

Equity Allocation Matrix for Active Choice

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

<u>Annexure S12</u>			<u>Page 1</u>
Withdrawa	I form for Tier II a details in CAPITAL LETTER	ccount under NPS	
(Please fill all the For Nodal Office [#] use:	details in CAPITAL LETTER	S & in BLACK INK only.)	
Nodal Office Registration No.:			
Receipt No.:			
(Mandatory for POP/POP-SP)			
Entered By:	D	ate:	
Verified By:	D	ate:	
Date :		Acknowledgement Number	(Generated by CRA)
Sir/Madam,			
I hereby submit withdrawal request for Tier II and give belo	w the necessary details:		
PRAN *:			
Name of the Subscriber *:			
Type of Withdrawal* (Please Tick any one):			
I. Amount Wise Withdrawal (Please Tick a	ny one)		
Partial Withdrawal			
	nount in Figures)	(Amount in words)	
Complete Withdrawal			
II. Scheme Wise Units Withdrawal	Scheme E	Scheme C Scheme G	
	(No. of U	nits) (No. of Units)	(No. of Units)
I	, the applica	nt, do hereby declare that	
Information stated above is true to the best of my information a	& belief.		
Date : Signature/ Thumb Impression of the Subs			ture/ Thumb
D D M M Y Y Y Y		Inpression	of the Subscriber
O BE FILLED/ATTESTED BY DDO (Mandatory if the equest is processed by the associated Nodal Office)			
Debbas Sterres of the DDO	Nome	Signature of the DDO	
Rubber Stamp of the DDO		Designation:	
O BE FILLED/ATTESTED BY NODAL OFFICE			
Rubber Stamp of the Nodal Office	Signature	e of the Nodal Office (PAO/DTO/DTA/POP/POP- Designation:	

Acknowledgement to the Subscriber							
Tier II Withdrawal: Nodal office Registration Number: Name of the Subscriber:	(To be filled by Nodal Office) PRAN: Date:						
Receipt Number (Mandatory for POP/POP-SP) 1. Transaction Charges: 3. Total Charges: Rs.	2. Service Tax (as applicable): Rs.						
	Signature/Stamp of Nodal Office/Place						

Instruction for filling the Form:

- 1. Nodal Office[#] refers to PAO/DTO/DTA/POP/POP-SP.
- 2. All fields marked with * are mandatory. All dates should be in DDMMYYYY format.
- 3. The Subscriber shall submit the application only to the Nodal Office with which they are currently registered with CRA for Tier 11.
- 4. Before submitting the withdrawal form, Subscriber should ensure that the Subscriber's bank account is active. If he/she intends to make any correction in the details he/she can submit Subscriber Details Change Request and should get all the details updated prior to submission of withdrawal request form.
- 5. In case of complete withdrawal, the total contributions under Tier II will be remitted to the Subscriber.
- 6. Partial withdrawal request shall be rejected if sufficient balance is not available in Subscriber's Tier II account.
- 7. In case the subscriber wishes to carry out scheme wise units withdrawal, the % in equity cannot be more than 50% post carrying out the activity of withdrawal.
- 8. Withdrawal amount received after the execution of the withdrawal request can be different from the requested amount to the extent of difference in NAV of two different days.
- 9. The redeemed amount shall be directly credited to the bank account of the subscriber as per details available in the CRA database.

Sl. No.	Partial Withdrawal, Exit and Annuity (01-02-2020) Topic	Minutes
51. INO.	Concept & Role of Treasury	215
1	Questions and Answers	
	Introduction on NPS	5
		10
3 4	PFRDA, NPS Trust, Trust Bank, NSDL Types of Subscribers	5
-	Functionaries in NPS System	15
	NPS App	5
7	Forms for generating PRAN & OPGM	5
	Changes in PRAN & relevant Forms	5
9	Investment Options	15
	Subscriber Login	25
	DDO Login and DDO views	5
	Uploading of Subscriptions to NSDL	15
	Transfer of Funds to Trustee	5
	Regular Monthly Subscriptions, Arrear Subscriptions - Procedure to be followed in IFMIS, Schedules	10
	Subscriber shifting in case of transfer, Inter State transfer	10
	Remittance and Rectification of missing credits	
17	Describe the procedure of rectifying the missing credits.	10
18	Procedures of remittance of CPS for foreign service employees	10
19	Partial Withdrawal	10
20	G.O. 123	10
	Exit policy	
21	Superannuation	10
22	Death	10
23	Annuity	10
24	Registers to be maintained	5
	Total	215



GOVERNMENT OF ANDHRA PRADESH ABSTRACT

PUBLIC SERVICES – New Pension Scheme (Contributory Pension Scheme) - Payment of interest @ 8% per annum on the CPS contributions of the employees and matching contributions of the Government for the legacy period from 01-09-2004 to 31-03-2011 – Orders – Issued.

FINANCE (PENSION-I) DEPARTMENT

G.O.Ms.No. 226

Dated: 29.09.2011 Read the following:-

- 1. G.O.Ms.No.653, Finance (Pen.I) Department, dt. 22.09.2004.
- 2. G.O.Ms.No.655, Finance (Pen-I) Department, dt. 22.09.2004.
- 3. DTA, A.P., Hyderabad, Letter No.D2/10393/2009-11, dated. 15.07.2011.

ORDER:

In the G.O. 1st read above, Government have introduced New Pension Scheme (CPS) to the AP Government employees who were appointed on or after 1-9-2004. In the G.O. 2nd read above, Government have issued operational guidelines. In the New Pension scheme each employee shall pay a monthly contribution of 10% basic pay + DA from his salary and the Government will contribute an equal amount as its share. Government have reviewed the progress of the implementation of New Pension Scheme (Contributory Pension Scheme) and issued instructions to the DTA/PAO, Hyderabad to complete the uploading process of the data relating to the contributions to the individual accounts of the employees concerned for legacy period i.e. from 01-09-2004 to 31-3-2011 in a time bound manner. Further, the DTA was directed to furnish necessary proposals to fix the rate of interest payable on the CPS contributions of the employees and matching contributions of the Government for the legacy period from 01-09-2004 to 31-03-2011 as the said funds are with the State Government only.

2. In the reference 3rd read above, the Director of Treasuries and Accounts duly obtaining information from the O/o the Principal Accountant General (A&E)., A.P., Hyderabad has furnished a proposal for fixation of interest rate @ 8% per annum on the CPS contributions of the employees and matching contributions of the Government for the above said legacy period on par with the interest rate being paid for GPF contributions during the period from 01-09-2004 to 31-03-2011.

3. Government, after careful consideration of the matter, hereby order for payment of simple interest @ 8% per annum on yearly basis on the CPS contributions of the employees and on the matching contributions of the Government for the legacy period from 01-09-2004 to 31-03-2011 on par with the interest rate being paid for GPF contributions during the period from 2004.

4. The operational guidelines to the Drawing and Disbursing Officers and Treasury Officers in this regard will be issued separately.
[BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDRHA PRADESH]

RANJEEV R. ACHARYA PRINCIPAL SECRETARY TO GOVERNMENT (FP)

То

All the Departments of Secretariat. All Heads of Departments. The Director of Treasuries and Accounts, A.P., Hyderabad. The Pay and Accounts Officer, Hyderabad. The Director of Works and Projects, A.P., Hyderabad. The Director of State Audit, A.P., Hyderabad. Copy to P.S. to PFS. Copy to the P.S. to PFS (FP). SF/SC.

//FORWARDED :: BY ORDER//



GOVERNMENT OF ANDHRA PRADESH ABSTRACT

PUBLIC SERVICES – New Pension Scheme (Contributory Pension Scheme) - Payment of interest @ 8% per annum on the CPS contributions of the employees and matching contributions of the Government for the legacy period from 01-04-2011 upto the period of the legacy data is uploaded – Orders – Issued.

FINANCE (PENSION-I) DEPARTMENT

G.O.Ms.No. 142

Dated:17.06.2013 Read the following:-

	Redd the following.
	G.O.Ms.No.653, Finance (Pen.I) Department, dt. 22.09.2004.
2	G.O.Ms.No.655, Finance (Pen-I) Department, dt. 22.09.2004.
3	G.O.Ms.No.226, Finance (Pen.I) Department, dt. 29.09.2011.
4	DTA, A.P., Hyderabad, Letter No.D(II)/CPS/14291/2013,
	dated. 19.02.2013.

ORDER:

In the G.O. 1st read above, Government have introduced New Pension Scheme (CPS) to the AP Government employees who were appointed on or after 01.09.2004. In the G.O. 2nd read above, Government have issued operational guidelines. In the New Pension scheme each employee shall pay a monthly contribution of 10% basic pay + DA from his salary and the Government will contribute an equal amount as its share. Government have reviewed the progress of the implementation of New Pension Scheme (Contributory Pension Scheme) and issued instructions to the DTA/PAO, Hyderabad to complete the uploading process of the data relating to the contributions to the individual accounts of the employees concerned for legacy period i.e. from 01.09.2004 to 31.03.2011 in a time bound manner. Further, the DTA was directed to furnish necessary proposals to fix the rate of interest payable on the CPS contributions of the employees and matching contributions of the Government for the legacy period from 01.09.2004 to 31.03.2011 as the said funds are with the State Government only. In the reference 3rd read above Government have issued orders for payment of simple interest @ 8% per annum on yearly basis on the CPS contributions of the employees and on the matching contributions of the Government for the legacy period from 01.09.2004 to 31.03.2011 on par with the interest rate being paid for GPF contributions during the period from 01.09.2004 to 31.03.2011.

2. In the reference 4th read above, the Director of Treasuries and Accounts has requested to examine for payment of interest for the period beyond 31.03.2011.

3. Government, after careful consideration of the matter, hereby order for payment of simple interest @ 8% per annum on yearly basis on the CPS contributions of the employees and on the matching contributions of the Government for the legacy period from 01.04.2011 upto the period of the legacy data uploaded.

4. The payment of interest on the CPS contributions shall be debitable to the following Head of Account.

2049 - Interest Payments
03 - Interest on Small Savings, Provident Funds etc.,
117 - Interest on Defined Contribution Pension Schemes
(04) - Interest on Defined Contribution Pension Schemes
(to be opened)
450 - Interest (Charged)

5. The Director of Treasuries and Accounts, Pay and Accounts Officer and the Director of Works Accounts should ensure that the legacy data shall be uploaded during this financial year.

6. All the Drawing and Disbursing Officers and Treasury Officers are requested to take necessary action immediately.

7. The Government Order is available on internet and can be accessed at the address http://goir.ap.gov.in.

[BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDRHA PRADESH]

DR. D. SAMBASIVA RAO PRINCIPAL SECRETARY TO GOVERNMENT (FP)

To All the Departments of Secretariat. All Heads of Departments. The Director of Treasuries and Accounts, A.P., Hyderabad. The Pay and Accounts Officer, Hyderabad. The Director of Works and Projects, A.P., Hyderabad. The Director of State Audit, A.P., Hyderabad. Copy to P.S. to PFS. Copy to the P.S. to PFS (FP). SF/SC.

//FORWARDED : : BY ORDER//

S-P. Dade



NEW PENSION SCHEME - Contributory Pension Scheme – Procedure for uploading the contributions of the regular Government servants, who come under NPS and who are working on **Foreign Service** –Orders – Issued.

FINANCE (HRM-V) DEPARTMENT

G.O.MS.No. 37

Dated: 28/03/2016. Read the following:

- 1. G.O.Ms.No.653, 654 and 655, Dated 24/09/2004 of Finance (Pen-I) Department.
- 2. Director of Treasuries and Accounts, Telangana Hyderabad Letter No. DI/2331/2015 , Dated 1011-20015.

ORDER:

In the G.O. 1^{st} read above, Government have introduced New Pension Scheme (NPS), i.e., Contributory Pension Scheme to the AP State Government employees who were appointed on or after 01/09/2004 and issued operational guidelines thereon. In the New pension scheme each employee shall pay a monthly contribution of 10% (Basic Pay + DA) from his salary and the Government will contribute an equal amount as its share.

In the reference 2nd read above, the Director of Treasuries and 2. Accounts, Telangana, Hyderabad informed that as per the New Pension Scheme, a Government servant can contribute 10% of his Pay and Dearness Allowance towards his part of contribution and the Government contributes equal amount to the Pension Retirement Account Number (PRAN) of the Government Servant concerned. In respect of regular system, the treasury officers can capture the details of CPS deductions of every Government servant from the pay bills concerned, draw equivalent amount towards the Government contribution and transfer both the components to the NPS account of the Government servant concerned. This kind of procedure is not possible in respect of the Government servants working with certain borrowing authorities on Foreign Service terms, since the pay and allowances of those employees are not drawn from the treasury system. For this purpose the Director of Treasuries and Accounts, Telangana, Hyderabad has proposed a detailed procedure in order to facilitate uploading the data and transfer of CPS contributions of all such employees who are working on Foreign Service.

3. Government after careful examination of the matter here by issue the following detailed procedure for uploading the CPS contribution of employee's as well as employer's share to the Central Record-keeping Agency (CRA) and for transfer of funds to the subscriber's accounts in respect of the Government servants working with certain borrowing authorities on Foreign Service terms :-

- a) The Drawing and Disbursing Officer of the foreign employer (Borrowing authority) registers with the Director of Treasuries and Accounts, who provides an User ID and Password and also a facility for furnishing the details of employee contribution and employer contribution to be transferred to the individuals' account.
- b) The Drawing and Disbursing Officer of the Borrowing Department concerned deducts the CPS subscription from the employees pay and provides the details of employee and his subscription by logging into the treasury system and thereby the system enables to generate two challans -One towards Employee Contribution under the HOA: 8342-00-117-00-04-001-000-NVN and the other towards Employer Contribution under the HOA: 8342-00-117-00-04-003 (Employer Contribution in respect of Government Servants working on Foreign Service) (to be opened). This new Head of Account facilitates distinct identification of all such remittances and their reconciliation.
- c) The Drawing and Disbursing Officer of the borrowing Department remits the two challans to the Government accounts concerned through a Government authorized Bank. The challan once generated will be active for fourteen (14) days from the date of generation. If it is not remitted within the period, it gets lapsed and the Drawing and Disbursing Officer is required to generate a fresh challan.
- d) The details of all challan remittances made as above are captured centralized in the DTA, processed and uploaded to the CRA for crediting into the individual accounts.
- e) The DTA, TS, Hyderabad reconciles the details, draws the funds corresponding to the uploaded data towards both contributions and transfers, the same to the trustee bank as per the procedure prescribed.
- f) For this purpose, to facilitate uploading of the contributions of all the CPS employees working on Foreign Service terms, from the Directorate of Treasuries and Accounts shall take action to create a new drawing and disbursing officer and obtain a separate DTO / PAO Registration No. from the NSDL/ CRA and all the transactions into those subscribers' accounts shall be conducted and monitored through this registration.

- g) The subscribers, who do not have PRAN shall obtain them by submitting the required application to the CRA through the respective appointing authority (Lending department) and the Treasury Officer/ PAO of the respective jurisdiction.
- h) In cases, where the employee subscription was already deducted and remitted in to HoA: 8342-00-117-00-04-001-000-NVN, but the Employers Contributions are not remitted, the borrowing authority is required to remit Employer Contribution under the HOA: 8342-00-117-00-04-003-000-NVN as matching amount and furnish those details together to enable the treasury to verify the details and transfer the data and the funds to the respective subscribers' accounts.
- i) In cases, where the employee contribution was already deducted and kept with them, the CPS amounts so deducted along with the employer contribution shall remitted in to the respective said HoA's.
- j) In cases, where the employee contribution is not at all recovered, the same may be recovered and remitted along with employer contribution to the respective HoA's prescribed.

4. All the Departments of Secretariat and all Heads of Departments are requested to issue necessary instructions to all the Drawing and disbursing Officers where Government servants are working on depuration on foreign services basis to follow the above procedure scrupulously.

5 Necessary amendments to the Andhra Pradesh Fundamental Rules will be issued separately.

6. The Director of Treasuries and Accounts, Telangana, Hyderabad is directed to take action accordingly.

[BY ORDER AND IN THE NAME OF THE GOVERNOR OF TELANGANA]

K.RAMAKRISHNA RAO PRINCIPAL SECRETARY TO GOVERNMENT

То

The Accountant General, Telangana, Hyderabad (20 copies). The Accountant General, Telangana, Hyderabad (by name). All the Heads of Departments (including Collectors and District Judges). The Director of Treasuries and Accounts, Telangana, Hyderabad. The Pay & Accounts Officer, Hyderabad.

The Director of State Audit, Telangana Hyderabad.

The Director of Works and Projects, Hyderabad.

All the District Treasury Officers (with copies to Sub-Treasury Officers) The Special Chief Secretary to Governor, Telangana, Hyderabad.

The Principal Secretary to the Chief Minister and Private Secretaries

to all Ministers. All the Departments of Secretariat

The Registrar General, High Court of Judicature at

Hyderabad for the State of Telangana and the State of Andhra Pradesh (with covering letter).

The Secretary, Telangana Public Service Commission.

The Managing Director, Telangana GENCO/TRANSCO.

The V.C. & M.D., Telangana State Road Transport

Corporation, Hyderabad (with covering letter).

All District Educational Officers / All Principals of Junior Colleges.

All the Chief Executive Officers, Zilla Praja Parishads. All District Panchayat Officers.

All Secretaries of Zilla Grandhalaya Samasthas through Director of Public Libraries, Hyd.

All Secretaries of Agricultural Market Committees through the Commissioner and Director of Agricultural Marketing, Telangana, Hyd.

All Commissioners / Special Officers of Municipalities.

The Registrar, A.P. Administrative Tribunal, Hyderabad. (with a covering letter)

The Registrar, Acharya Jayashankar University, Hyderabad, Dr. B. R. Ambedkar Open University, Hyderabad, English and Foreign Languages University, Hyderabad, Jawaharlal Nehru Technological

University, Hyderabad, Kakatiya University, Warangal, K L University, Maulana Azad National Urdu University, Hyderabad, Osmania University,Hyderabad, Potti Sreeramulu Telugu University, Hyderabad, , University of Hyderabad, Hyderabad, Andhra Pradesh, Indian Institute of Technology Hyderabad, Hyderabad, International Institute of Information Technology, Hyderabad, ICFAI University, Hyderabad, NALSAR University

of Law, Hyderabad, National Institute of Technology, Warangal,

Telangana University, Nizamabad, Mahatma Gandhi

University, Nalgonda, National Institute of Fashion Technology,

Hyderabad, Satavahana University, Karimnagar

The Chairman, Tribunal for Disciplinary Proceedings, Hyderabad.

The Vice Chairman, Telangana, Housing Board, Hyderabad.

The Joint Director, Pension Payment Office, Jambagh, Hyderabad All the District Educational Officers.

The F.A.& C.A.O., N.S. Project, Secretariat Buildings, Hyderabad. The Secretary Tungabhadra Project, Via. Hospet, Bellary District. The Joint Director(Works & Accounts), N.S. Right Canals, Vijayapuri North, Nalgonda District. The Joint Director(Works & Accounts), N.S. Left Canals, Tekulapally, Khammam District.

The Director of Accounts, Sriramsagar Project, Nizamabad District.

All the Secretaries of Agricultural Market Committees through Director of Marketing (30 copies).

All the Commissioners/ Special Officers of Municipalities through the Commissioner of Municipalities (50 copies).

The Director General, Dr. M.C.R. H.R.D Institute of A.P., Jubilee Hills, Hyderabad. The Chairman, Commission of Enquiries, Telangana Hyderabad.

The Lokayukta and Upa Lokayukta, A.P. Hyderabad (with a covering letter). The Resident Commissioner, telangana Bhavan, Ashoka Road, New Delhi-110 001.

The Pay & Accounts Officer, Government of Telangana, New Delhi-110 001

All the Pensioners Associations.

The Commissioner, Printing and Stationery, Hyderabad for publication in Copy to the General Administration (Cabinet) Department.

Copy to the General Administration (SW) Department.

Copy to SF/SCs.

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20200275 25 SECTION OFFICER



GOVERNMENT OF TELANGANA ABSTRACT

CPS – Procedure for drawal of Funds in case of employees who died or retired or resigned before assigning a PRAN Number - Orders - Issued.

FINANCE (HRM.V) DEPARTMENT

G.O.Ms.No. 123

Dated: 31-07-2017

Read the following:

- 1. G.O. Ms No.62, Finance(Pen-I) Dept., dt.07.03.2014.
- 2. Lr.No.D1/2281/2016, Date.19.05.2017 of DTA, Telangana, Hyderabad.

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ORDER:

In the reference 1st read above, Govt., have issued guidelines indicating the procedure for withdrawal for NPS subscribers whose PRAN Number was registered and subsequently, retired/died/ pre exited.

2. In the reference 2nd read above, the DTA has brought to the notice to the Government that some of the employees covered under New Pension System were retired from Government Service on Superannuation even without their registering with CRA i.e., NSDL for obtaining Permanent Retirement Account Number (PRAN) during their tenure in the office.

3. The PFRDA, New Delhi informed that retrospective registration(i.e., issue of PRAN after retirement) of employees is not allowed under NPS as the same is out of purview of PFRDA and advised that payment of accumulated amount of such cases may be decided by the competent authority of the State Government

4. The Government after examining the issue hereby order to settle the claims of such of those employees who are covered under New Pension Scheme & Retired/Expired/Exited from service before obtaining PRAN, and their contributions were credited to PD Accounts of DDOs or lying in Government Accounts. The claimants may be paid the accumulated balance (both self & Government contribution) along with interest.

5. The DTA has proposed the following procedure, for drawal of funds in case of employees who had died or retired or resigned without assigning a

PRAN Number., as the funds are credited to the Non-lapsable Deposits and the PD administrators are Treasury Officers.

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A. The DDO of the office where the employee last worked before retirement /death/ resignation may submit the requisition for withdrawal of funds to the concerned Treasury Officer with the following:

i) Retirement order or death certificate as the case may be.

ii) Nominee details for payment of amount (Service Book)

iii) Legal Heir Certificate

iy) Bank Account No., Bank Name, Branch Name, IFSC Code of the beneficiary (1st page of the Bank Pass Book)

v) 1ndemnity Bond if requires as per T.S. Financial Code

vi) DDO wise statements showing the NPS/CPS subscriptions of the employee duly attested by the DDO concerned and the Treasury Officer concerned.

B. The Treasury Officer in turn may forward to the DTA, TS, Hyderabad through proper channel with his recommendation in the prescribed format duly entering the details in a separate register.

C. An adjustment bill is prepared for the total amount of employee share to be paid from the HOA 8342-117-04-001 to 8342-117-04-002.

D. Another adjustment bill is prepared for the equivalent matching grant from the Govt. to be paid from the HOA 2071- to 8342-117-04-002

5. Another adjustment bill is prepared for the interest on the accumulated on the funds at the rate of 8.5% per annum from the HOA 2071- to 8342-117-04-002.

E. A cheque will be issued by the DTA, TS, Hyderabad in favour of beneficiary from the PD Account No.302 (8342-117-04-002) as per Treasury Procedure.

F. The amount will be adjusted to the beneficiary account through RTGS/ NEFT.

G. In case of employees working under Foreign Service, the request shall be forwarded through their concerned parent HOD.

H. It is the responsibility of the DDO to collect details from the concerned offices based on the details entered in the Service Book.

6. Government after careful examination of the matter hereby order to adopt the above procedure, for drawl of funds in case of employees who had died or retired or resigned before assigning a PRAN Number.

//3//

7. The G.O.is available on Internet and can be accessed at the address http://goir.telangana.gov.in and <u>http://finance.telangana.gov.in</u>.

(BY ORDER AND IN THE NAME OF THE HONOURABLE GOVERNOR OF TELANGANA)

K.RAMAKRISHNA RAO, PRINCIPAL SECRETARY TO GOVERNMENT

То

The Principal Accountant General (Audit-I) Telangana, Hyderabad The Principal Accountant General (Audit-II), Telangana, Hyderabad The Accountant General (A&E), Telangana, Hyderabad. The Director of Treasuries and Accounts, Telangana, Hyderabad The Director of State Audit, Telangana, Hyderabad The Director of Insurance, Telangana, Hyderabad The Director of Works Accounts, Telangana, Hyderabad The Pay & Accounts Officer, Hyderabad All the Secretariat Departments for information All the Head of the Departments in the State for information Copy to SF/SCs.

//FORWARDER::BY ORDER//

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GOVERNMENT OF TELANGANA ABSTRACT

CPS – Procedure for drawal of funds in case of employees who died or retired or resigned before assigning a PRAN Number - Amendment – Orders – Issued.

FINANCE (HRM.V) DEPARTMENT

G.O.Ms.No. 24

Dated: 20-03-2019 Read the following:-

1. G.O.Ms No.123, Finance (HRM.V) Department, dt. 31.07.2017.

2. Lr.No.D1/2281/2016, Dated: 21-08-2018 of DTA, Telangana, Hyderabad.

ORDER:

In the G.O. 1st read above, orders were issued indicating the procedure for drawal of funds in case of employees who died or retired or resigned before assigning a PRAN Number.

2. The Director of Treasuries and Accounts in the reference 2nd read above has requested for issue of orders adopting uniform procedure for PRAN and non-PRAN account number holders. Government, after careful examination, hereby issue the following amendment to the orders issued vide G.O.Ms No.123, Finance (HRM.V) Department, dated. 31-07-2017.

AMENDMENT

In para 5.5, the words "Another adjustment bill is prepared for the interest on the accumulated on the funds at the rate of 8.5% per annum from the HOA 2071-to 8342-117-04-002" shall be **read as** "Another adjustment bill shall be prepared for payment of interest on the accumulated fund at the rate of 8% per annum under the HOA 2049-03-117-(04)-450 Interest (Charged)".

3. The Director of Treasuries and Accounts is requested to take necessary further action in the matter accordingly.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF TELANGANA)

K.RAMAKRISHNA RAO PRINCIPAL SECRETARY TO GOVERNMENT

То

The Principal Accountant General (Audit-I) Telangana, Hyderabad

The Principal Accountant General (Audit-II), Telangana, Hyderabad

The Accountant General (A&E), Telangana, Hyderabad.

The Director of Treasuries and Accounts, Telangana, Hyderabad

The Director of State Audit, Telangana, Hyderabad

The Director of Insurance, Telangana, Hyderabad

The Director of Works Accounts, Telangana, Hyderabad

The Pay & Accounts Officer, Hyderabad

All the Secretariat Departments for information

All the Head of the Departments in the State for information Copy to SF/SCs.

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Annexure I to CSRF

	TIER II DI	ETAILS							
l he	I hereby submit the following details for activation of Tier – II account under NPS.								
1.	PAN card Number (Mandatory):								
2.	2. Subscribers Bank Details: (All bank details are mandatory except MIC	R Code)							
	If same as Tier I, Please Tick ($$) else, provide the details below: Saw	vings A/c Current A/c							
	Bank A/c Number								
	Bank Name								
	Branch Name								
	Branch Address								
	State/U.T.								
	Bank MICR Code								
-									
	Subscriber's Nomination Details								
lf sa	f same as Tier I, Please Tick ($$) else, provide the details below. In case y	you desire to nominate more than one person, please fill Annexure III.							
3.	3. Name of the Nominee:								
Fi	First Name Middle Name	Last Name							
4.	I. Date of Birth (In case of Minor) ddd/d/mmm//yyyyy								
0.									
6	Neminae's Cuardian Dataile (in accord for minar);								
0.	 Nominee's Guardian Details (in case of a minor): 								
Fi	First Name Middle Name	Last Name							
Su	Subscriber Scheme Preference								
7.	7. If same as Tier I, Please Tick ($$) else, provide the details below								
	(i) PENSION FUND SELECTION (Tier II) : Please read below conditions be	fore opting for the choice of Pension Funds:							
	* Name of the Pension Funds are given in alphabetical order.								
	Name of the Pension Fund (Please select only one) P	Please Tick ($$) Only One							
	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								
	SBI Pension Funds Private Limited UTI Retirement Solutions Limited								
	 * Selection of Pension Fund is mandatory both in Active and Auto Choice. (ii) INVESTMENT OPTION 								
	(Please Tick ($$) in the box given below showing your investment option)).							
	Active Choice Auto Choice								
	Please note:								
	 In case you select Active Choice fill up section (iii) below and if you In case you do not indicate any investment option, your funds will be 								
	2. In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).								

 In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE - ASSET ALLOCATION (to be filled up only in case you have selected 'Active Choice' the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Goverment Bonds and related instruments.
Specify %				100%	

Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- 3. The total allocation across E, C and G asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.

Life Cycle (LC)Funds	Please Tick ($$) Only One	
LC 75		Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset
LC 50		3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset
LC 25		

Declaration & Authorization by subscriber

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the National Pension System Trust, of any change in the above information furnished by me. 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.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-pin (to access CRA/NPSCAN and view details) & T-pin on the CRA website.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby 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:			
Place:	(* L1	Subs	e/Thumb Impression* of scriber in black ink male and RTI in case of female)
	To be filled by POP/POP – SP/Nod	al Office	
POP-SP/Nodal Office Registration Number			
Copy of PAN Card Submitted YES NO			
		Name:	
		Designati	on:
		Place:	
POP-SP/Nodal Office Seal	Signature of Authorised Signatory	Date	d d <i>I</i> m m <i>I</i> y y y y

ADDITIONAL REQUEST DETAILS

1.	Name of Father (required if na	ame	exc	eed	s 30	char	acter	rs an	d no	t able	e to l	be co	vere	d on	page	1 of	f the	appli	catio	on fo	orm)						
	First Name																										
	Middle Name																										
	Last Name																										
2.	Name of Mother (required if n	am	eex	ceec	ls 30) cha	racte	ers a	nd no	ot ab	le to	be co	overe	ed on	page	e 1 c	of the	арр	licat	ion f	orm)	I					
2.	Name of Mother (required if n	am	e ex	ceec	ls 3() cha	racte	ers a	nd no	ot ab	le to	be co	overe	ed on	page	e 1 c	of the	app	licat	ion f	orm)						
2.			e ex		ls 30) cha	racte	ers a	nd nc	ot ab	le to	be co	overe	ed on	 	e 1 c	of the	app	licat	ion f	form)						
2.	First Name		e ex		ls 30) cha	racte	ers a	nd nc	ot ab	le to	be co) 	ed on	 	e 1 c	of the	app	licat	ion f	form)						

3. Request for Printing Permanent Retirement Account Number (PRAN) card in Hindi (required only if applicant wants PRAN card in Hindi)

Please provide the following details in Devnagri script for printing the PRAN card in Hindi. Also, 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. All the given below fields are mandatory.

	Subscriber's Full Name in Hindi	Father/Mother's Full Name in Hindi (As selected in the Subscriber Registration form) Please refer Sr. No. 1 of the instructions.
First Name		
Middle Name		
Last Name		

	Name:
	Place:
Signature/Thumb Impression* of Subscriber in black ink	Date: d d / m m / y y y y

(* LTI (Left Thumb Impression) in case of male and RTI (Right Thumb Impression) in case of female)