

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)

Nominee Name Relationship with the Nominee Date of Birth (In case of Minor)

Nominee's Guardian Details (in case of a minor)

Nominee's Guardian **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. (Tier II account is not available for NPS Lite/Swavalamban subscribers).I would like my PRAN to be printed in Hindi YES NO If Yes, please submit details on Annexure II**10. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION*** (Please refer to Sr no. 6 of the instructions)**(i) PENSION FUND SELECTION (Tier I) : The names of the all PFs are mentioned in the instructions page and are available to the all sector subscribers with following conditions:**(i) **Government Sector:** For Government Subscribers, the following PFs act as default PFs as per the guidelines issued by the Government:

(a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd.

(ii) **NPS Lite/Swavalamban:** NPS Lite Swavalamban is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator.(iii) **All Citizen Model:** Subscribers under All Citizen model has the option to choose the available PFs as per their choice in the table below.(iv) **Corporate Model:** 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 Tick (√)	Availability of the Pension Funds			
LIC Pension Fund Limited	<input type="checkbox"/>	Available to Government Sector	Available to NPS Lite/Swavalamban	Available to All Citizen Model*	Available to Corporate Model*
SBI Pension Funds Private Limited	<input type="checkbox"/>				
UTI Retirement Solutions Limited	<input type="checkbox"/>				
ICICI Prudential Pension Funds Management Company Limited	<input type="checkbox"/>				
Kotak Mahindra Pension Fund Limited	<input type="checkbox"/>				
Reliance Capital Pension Fund Limited	<input type="checkbox"/>				
HDFC Pension Management Company Limited	<input type="checkbox"/>				
Birla Sunlife Pension Management Limited	<input type="checkbox"/>				

* Selection of Pension Fund is mandatory both in Active and Auto Choice. In case, you do not indicate a choice of PF, please note that it is deemed that you have consented for the default PF specified by PFRDA. Currently, SBI Pension Funds Private Limited is the default PF.

(ii) INVESTMENT OPTION (Available for All Citizen Model and Corporate Model Subscribers)

(Please Tick (√) in the box given below showing your investment option).

Active Choice Auto Choice

Please note:

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

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

Asset Class	E (Cannot exceed 50%)	C	G	Total	Note:- 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.
%					

11. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 7 of the instructions)**Declaration & Authorization by all subscribers**

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 Central Record Keeping Agency/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.

Additional declaration by Swavalamban subscriber

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

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that 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 :

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of female)**ACKNOWLEDGEMENT**Name of the Subscriber: Contribution Amount Remitted: ₹ Date of Receipt of Application and Contribution Amount:

Stamp and Signature of the Employer/Pop/Aggregator:

12. DECLARATION BY EMPLOYER/POP/AGGREGATOR

Applicable to Government Subscribers only

(Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory))

Date of Joining [d d / m m / y y y y] Date of Retirement [d d / m m / y y y y]
Employee Code/ID []
Group of Employee (Tick as applicable) Group A [] Group 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 by _____ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person (In the box above) Rubber Stamp of the DDO (In the box above)
Signature of the Authorised person (In the box above) Rubber Stamp of the DTO/PAO/CDDO/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 [] Date [d d / m m / y y y y]

Applicable to Corporate Subscribers only

(Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory))

Date of Joining [d d / m m / y y y y] Date of Retirement [d d / m m / y y y y]
Employee ID []
Corporate Regd. No Allotted by CRA [] CBO No. allotted by CRA []

Certified that the details provided in this subscriber registration form by _____ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Signature of the Authorized Person (In the box above) Date [d d / m m / y y y y]
Designation of the Authorized Person: [] Place [] Rubber Stamp of the Corporate (In the box above)

To be filled by POP-SP (Only in case of All Citizen Model or Corporate subscribers)

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 []

Existing Bank Customer:

I/we hereby certify/confirm that Shri/Smt/Kum _____ is an existing customer of the Bank having fully operative Saving Bank account no _____ at _____ branch and KYC norms required for opening Bank Account which match the requirements for opening NPS account have been fully complied with. We further confirm that the S. B. a/c of Sh/Smt/Kum _____ is not a 'Basic Savings Bank Deposit Account'.

Adhaar Based KYC Certificate:

I/we hereby certify that Aadhaar Number _____ of Sh/Smt/Kum _____ has been checked and the name and address mentioned on the original Aadhaar card are matching with that mentioned on NPS application form.

To be filled by POP-SP Name: []
POP-SP Seal Signature of Authorized Signatory Designation: [] Place: []
Date [d d / m m / y y y y]

Declaration by the Aggregator (Only in case of NPS Lite/Swavalamban 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 NPS and the above declaration has been signed /thumb impressed before me by _____ after (s)/he has read the entries/ entries have 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]

[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 y]
Acknowledgement Number (by CRA-FC) []
PRAN Alloted []

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

General Guidelines

- (a) 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 blank box after each word.
- (b) Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back
- (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.
- (e) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (f) The subscriber's thumb impression should be verified by the DDO/PAO/DTO/designated officer of POP-SP/Aggregator
- (g) Government employees (mandatorily covered under NPS) may submit their application for Tier II to any POP-SP of their choice. The list of POP-SPs rendering services under NPS is available on CRA website <http://www.npsra.nsdsl.co.in>

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1	1	Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.																																																														
		Father's Name	i. If father's name has more than 30 digits, you may fill Annexure II for the same.																																																														
			ii. Father's name is mandatory. However, if applicant does not want to provide father's name, he/she has an option to provide mother's name on Annexure II and the mother's name will be printed on PRAN card iii. If the applicant wants mother's name to be printed instead of Father's name on PRAN Card, he/she must fill Annexure II																																																														
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3	6	Other Details (Occupation Details)	An NRI subscriber would need to furnish an Indian address for communication and bank details within India. Fund transfers by NRIs would be subject to regulatory requirements as prescribed by RBI from time to time and FEMA requirements.																																																														
		Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for 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.																																																														
4	7	Subscriber's Bank Details	For Tier I, bank details are optional. For activation of Tier II, bank details are mandatory. Please attach a Cancelled cheque (containing Subscriber Name, Bank Account Number and IFS Code) or Bank Certificate containing Name, Bank Account Number and IFS code, for direct credit or electronic transfer. In case if the cheque is not preprinted with name, additionally, a copy of the bank passbook or bank certificate containing Name, Bank Account Number and IFS code should be submitted.																																																														
5	8	Subscriber's Nomination 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.																																																														
6	10	Pension Fund (PF) Selection and Investment Option	For more detail on 'Investment Option', you may visit CRA website (www.npsra.nsdsl.co.in)																																																														
7	11	Declaration by Subscriber	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the nodal officer with the official seal and stamp. Left Thumb Impression in case of male and Right Thumb Impression in case of female.																																																														

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:
 Website: <https://www.npsra.nsdsl.co.in>
 Call: 022-2499-4200
 e-mail: info.cra@nsdl.co.in
 Address: Central Recordkeeping Agency, NSDL e-Governance Infrastructure Limited, 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.