NATIONAL PENSION	N SYSTEM (NP	S) – SUBSCR	IBER REG	ISTRATION FO	ORM [
Central Recordkeepi	ng Agency (CRA) -	- NSDL e-Gover		tructure Limited	A.F.
[Please tick(√)]	All Citizen Model	Corporate		NPS Lite (GDS)	Affix recent colour photograph of
o, lational Pension System Trust. lear Sir/Madam, hereby request that an NPS account b	e opened in my name as pe	r the particulars given be	elow:		3.5 cm × 2.5 cm size / Passport size
indicates mandatory fields. Please fill KYC Number, Retirement Adviser Co	ū		, ,	. 0 /	
CYC Number (if applicable) Retirement Adviser Code (If applicable			G	enerated from Central KYC F	Registry
I. PERSONAL DETAILS: (Pleas		tructions)			
Name of Applicant in full First Name*	Shri Sn				
Middle Name					
Last Name					
Subscriber's Maiden Name (if an Father's Name*	F i r s t				
(Refer Sr. No. 1 of instructions) Mother's Name*					
(Refer Sr. No. 1 of instructions) Father's name will be printed on PR	AN card in case mother's na	me to be printed instead of	f father's name [Plea	ese tick (🗸) 1	
Date of Birth*	d d / m m /			d be supported by relevant	documentary proof)
City of Birth*					
Country of Birth*					
Gender* [Please tick (✓)]	Male Fema		_	lationality* In-	Indian
Marital Status*	Married Unma	arried Other	S L		
Spouse Name* (Refer Sr. No. 1 of instructions)					
Residential Status*	Indian				
PROOF OF IDENTITY (Pol)*	(Any one of the documents	need to be provided alor	ng with the identific	ation number)	
Passport			Passport Ex	piry Date	I I m m I y y y
Voter ID Card			PAN Card		
Driving License			Driving Lice	nse Expiry Date	
NREGA JOB Card Others	Name of the ID				Please refer Sr. No. 2 of the instructio
UID (Aadhaar)					
and authenticate my identity (Targeted Delivery of Financ Aadhaar details (physical ar inactive in NPS or the timefr provided, for the purpose of As per the amendments made un	through the Aadhaar Auther ial and other Subsidies, Ber nd / or digital, as the case n rame decided by PFRDA, the Aadhaar based authentication der Prevention of Money-La	ntication system (Aadhaa nefits and Services) Act, naybe) submitted for ava the regulator of NPS, which on is ensured by CRA re- undering (Maintenance of	ar based e-KYC sen 2016 and the allied illing services unde hever is later. I unde gistered with PFRD of Records) Second	vices of UIDAI) in accordant I rules and regulations notifi r NPS will be maintained in erstand that Security and cc A till such time it is acting a Amendment Rules, 2017 A	s for National Pension System (NPS ce with the provisions of the Aadhaa ied thereunder. I understand that the NPS till the time the account is nonfidentiality of personal identity dates CRA for my NPS account. In this Subscriber Registration Form
B. PROOF OF ADDRESS (PoA	-/	spondence Address		Permanent Add	
[Please tick (), as applicable] #Not more than 3 months old. Please refer Sr. No. 2 of the instruction	s Register	t /Driving License/UID (Aadhation Card/Others red Lease/Sale agreement of a Gas/Electricity/Telephone[Lan	residence	Registered Lease/Sale	ense/UID (Aadhaar)/Voter ID card/NREGA ers a agreement of residence //Telephone[Landline] Bill
1.1 CORRESPONDENCE ADDR	RESS DETAILS*				
Address Type*	Residential/Business	Residential	Business	Registered Office	Unspecified
Flat/Room/Door/Block no.				Landmark	
Premises/Building/Village					
Road/Street/Lane					
Area/Locality/Taluk City/Town/District				DIK	I Code
State/U.T.					o u n t r y
0 PEDM4 VENE 17-17-17	-TAU 05				
.2 PERMANENT ADDRESS DE		k (✓) in the box in case t			l Inonocifi - d
Address Type* Flat/Room/Door/Block no.	Residential/Business	Residential	Business	Registered Office Landmark	Unspecified
Premises/Building/Village				Lanumank	
Road/Street/Lane					
Area/Locality/Taluk				DIA	I Code
City/Town/District					
State/U.T.					ountry

LC 50 LC 25

	ACT DETAILS									
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Mobile	(Desirable)	+ 9 1				(Mobile N	Number is requir	ed for communica	ation and to get SM	IS alerts)
Email I	ID									
OTHE	R DETAILS (Plea	se refer to Sr	no. 3 of the instr	uctions)						
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	Private Sector		ic Sector	Governmen	nt Sector	Profess	sional]		
	Self Employed	d Hom	nemaker	Student		Others	(Please Specify	y)		
▶ In	come Range (pe	annum) L	Jpto 1 lac 🗌	1 lac to 5 lac	;	5 lac to	10 lac	10 lac to 25 lac	25 lac and	d above
▶ Ed	ducational Qualifi	cations E	Below SSC	SSC	HSC	Gradua	ate	Masters P	rofessionals (CA, C	S, CMA, etc.)
▶ PI	lease Tick If Appli	cable P	olitically expos	sed person		Related to I	Politically expos	sed Person	(Please refer ins	truction no.3)
SUBS	CRIBER BANK I	DETAILS (PI	ease refer to Sr	no. 4 of the in	structions)				
(If Sub	scriber mentions	any of the ba	ank details, all	the bank de	tails will	be mandator	ry except MICR	Code.)		
Accour	nt Type [please t	ick(✓)1	Savings A/c		Current	t A/c				
	Vc Number	` / .								
Bank N	lama									
Branch	n Name									
Branch	n Address							PI	N Code	
	4100 0 1					150.0				
Bank N	MICR Code					IFS Code				
SUBS	CRIBERS NOMI	NATION DET	TAILS* (Please	refer to Sr. No	o . 5 of the	instructions)				
Name	of the Nominee (You can nomin	ate up to a maxir	num of 3 nom	inees and	if you desire s	o please fill in Ann	exure III (Additiona	l Nomination Form) p	provided separatel
	First	Name			Middle	e Name		I	Last Name	
Relatio	onship with the No	minee				Data of D	irth (In agas of I	Minor) d d	1 m m 1 v	
	ee's Guardian De		of a minor)			_ Date of B	irur (iii case or i	viirior) a a	I m m I y	
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Name of subscriber

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11. DECLARATION BY SUBSCRIBER* (Please	se refer to Sr no. 7 of the	e instructions)		
Declaration & Authorization by all subscribers	s			
I have read and understood the terms and conditi and declare that the information and documents Record Keeping Agency/National Pension Syste understand that I shall be fully liable for submissi I further agree to be bound by the terms and co complete or partial without any new declaration be	furnished by me are true em Trust, of any change ion of any false or incorre inditions of provision of s	e and correct, to the best e in the above information ect information or docume services by CRA, from tir	of my knowledge and belief. I undertak n furnished by me. I do not hold any ents. ne to time and any amendment thereo	e to inform immediately the Centra pre-existing account under NPS. f as approved by PFRDA, whether
details) & T-PIN.				
Declaration under the Prevention of Money La I hereby declare that the contribution paid by me		derived from legally dec	lared and assessed sources of income	Lunderstand that NPS Trust ha
the right to peruse my financial profile or share th found violating the provisions of any law relating	ne information, with other	government authorities.		
Date ddlmmlyyy				
Place :				
			Signature/Thumb Impression* (* LTI in case of male and I	
40 DECLADATION ON EATON (T		4-4) 00115: 14:13	,	,
12. DECLARATION ON FATCA* (Foreign Ac	count lax Complian	ce Act) COMPLIANC	E (Please refer to Sr no. 8 of the instru	ctions):
Section I*				
US Person* Yes No				
140				
Section II*				
For the purposes of taxation, I am a resident ir	the following countri	es and my Tax Identifi	cation Number (TIN)/functional eq	uivalent in each country is set
out below or I have indicated that a TIN/function				
Particulars		Country (1)	Country (2)	Country (3)
Country/countries of tax residency				
	Address Line 1			
Address in the jurisdiction for Tax	City/Town/Village			
Residence	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional ed	quivalent Number			
TIN/ Functional equivalent Number Issuing C	Country			
Validity of documentary evidence provided (Wh	erever applicable)	dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy
"I certify that: a) It shall be my responsibility to educate mys with the Rules 114F to 114H of the Income rules, b) the information provided by me in the Forn belief, true, correct and complete and that I a Reportable account or otherwise. c) I permit/authorise the NPS Trust to collect, so Trust and any of NPS intermediaries where India of any confidential information for cond) I undertake the responsibility to declare an provided in the Form, its supporting Annext provide fresh self-certification along with decent of the NPS Trust if the deficiency is not remed the NPS Trust if the deficiency is not remed to the NPS Trust if the information provided I also agree to furnish such information an India or abroad in the subject matter herein I shall indemnify NPS Trust for any loss that	e tax Rules, 1962 there at ax Rules, 1962 there are tax Rules, 1962 there are tax Rules, 1962 there are tax Rules, 1962 the are tax Rules, 1962 the are tax Rules and tax Rules as well as in the commentary evidence, close any material factor findia (GOI) /RBI/IRD died by me within the state of the RPS Trust shall have the tax Rules as the dor documents as the fine.	exures as well as in the y material information and process information sharing, transfer and or regulation whether days from the date of documentary evidence of the transfer and an extension or the purpostipulated period. The right and authority to S Trust e NPS Trust may required.	e documentary evidence are, to the that may affect the assessment/can relating to the Account and all trained disclosure between them and to the domestic or foreign. If change, any changes that may be provided by me or if any certification in future, the NPS Trust may repose or take any other action as made or carry out investigations from the suite from time to time on account of the document of the suite from time to time on account of the suite from time to time the suite from time time to time the suite from time time the suite from time time time time time time time tim	ne best of my knowledge and tegorization of the account as insactions therein, by the NPS e authorities in and/or outside take place in the information becomes incorrect and to bot to any regulator and/or any ay be deemed appropriate by information available in public of any change in law either in
Date dd l m m l y y y				
Place :			Signature/Thumb Impression* (* LTI in case of male and	

13. DECLARATION BY EMPLOYER			
	Applicable to Govern	ment Subscribers only	
(Subscribers Emp	oloyment Details to be filled an	d attested by the Deptt. (All Details a	re Mandatory)
Date of Joining	m m I y y y y	Date of Retirement	d 1 m m 1 y y y y
Employee Code/ID (If applicable)			e/ID and PPAN are optional. If you intend
PPAN (If applicable)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	to provide, mer	
Group of Employee (Tick as applicable	e) Group A G	roup B Group C G	Group D
Office			
Department			
Ministry			
DDO Registration Number	on Number		
DTO/PAO/CDDO/DTA/PrAO Registrati	on number		
Basic Pay Pay Scale			
It is certified that the details provided in	this subscriber registration form	h	employed with us, including
the address and employment details phe/she has read entries/entries have		vice record of the employee maintained and got confirmed by him/her.	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)	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	(III tile box above)	Designation of the Authorised Person	,
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date d d / m m / y	
Date of Joining Employee Code/ID Corporate Regd. Number (CHO No.) Allottee CBO No. allotted by CRA Certified that the details provided in this semployment details provided above are as entries / entries have been read over to him Date d d / m m / y y y Signature of the Authorised person	ubscriber registration form by _ per the service record of the emp / her by us and got confirmed by	loyee maintained by us. Also, it is further him / her. Place	employed with us, including the er certified that he / she has read the
15. DECLARATION BY THE AGGREGATE	OR .		
Authorisation by Aggregator's office of Certified that the subscriber is registered and the above declaration has been sign been read over to her/him by me. Signature of the Authorised per Name of the Aggregator	NL - AO) with the aggregator and he/she had /thumb impressed before me	Rubber Stamp of the Aggre	egator (In the box above)
NPS Lite Account Office (NL-AO) Registration		PS Lite - Collection Centre (NL - CC) Registration	Number
Membership No. allotted by Aggregator (if an Place	y) Date d d / m m /	y y y y	

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16. TO BE FILLED	BY POP-SP											
Receipt No. (17	digits)					POP-S	SP Regis	stration	Number			
Document acce	pted for date of Birth P	roof:										
Copy of PAN ca	Copy of PAN card submitted YES NO KYC Compliance YES NO											
Documents Rec		Originals Verified) Self	Certified	(Atte	ested)	True Co	pies					
Identity Verificat	tion :	Oone										
Existing Bank	Customer: tify/confirm that Shri/S	mt/Kum				ie an	ovietina	a cueto	mor of th	o Bank l	havina full	v oporativo
Saving Bank ac which match th	e requirements for op	at pening NPS account I	nave been			.branch	and KY	C nor	ms requir	ed for op	pening Bar	nk Account
Adhaar Based I/we hereby cer	KYC Certificate: tify that Aadhaar Numb entioned on the original	per	of Sh/S							been ch	necked and	d the name
To be fi	lled by POP-SP				N	ame:						
					D	esignatio	on:			Pla	ice:	
PC	P-SP Seal	Signature of Au	thorized Sigr	atory	D	ate		1 m	m /			
Received by		[To be filled b		cilitation			-FC)]					
Received at							[Date		/ m	m / y	
Acknowledgement	Number (by CRA-FC)											
PRAN Alloted												
			ACKNOWI	EDGEM	ENT							<i>,</i>
Name of the Sub	oscriber:											
Contribution Am	ount Remitted:	₹										
Date of Receipt	of Application and Con	tribution Amount:	d d / I	m m /								
							Stam	np and	Signature	e of the E	imployer/P	oP:

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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.

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

left blank or the application form is printed back to back
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.

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.

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S. No	Item No.	Item Details	Instructions								
		Personal Details	 i. This Form is applicable to Resident Indians and there is a separate Form for Non Resident Indians. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card. 								
		Spouse Name	If married, spouse name is mandatory.								
1	1	Father's Name	i. Father's name is mandatory.								
			ii. If father's name has more than 30 digits, you may fill Annexure II for the same. i. Mother's name is mandatory								
		Mother's Name	ii. If Mother's name has more than 30 digits, you may fill Annexure II for the same.								
		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.								
			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 2 Ration card with photograph and residential address 3 Rank Resea healt or extilinate with photograph and residential								
			3 Bank Pass book or certificate with Photograph. 3 Bank Pass book or certificate with photograph and residential address								
			4 Certificate of the POP bank for an existing Bank customer. 4 Certificate of the POP bank for an existing Bank 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 Continue of identity with photograph signed by a Mamber of 7 Letter from any recognized multiple systems of the level of								
			7 Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly 8 PAN Card issued by Income tax department 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 Certificate of address with photograph signed by a Member of								
		Identity,	Parliament or Member of Legislative Assembly								
		Correspondence & Permanent address details	of India clearly showing the address								
2	2, 3 & 4	uetalis	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 11 The identity card/document with address, issued by an officer of the State Government								
			11 Identity card issued by Central/State government and its Departments, statuary/ 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.								
			Photo. Identity Card issued by Defence, Paramilitary and Police department's 12 Latest Electricity/water bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)								
			13 Ex-Service Man Card issued by Ministry of Defence to their employees. 13 Latest Telephone bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)								
			14 Photo Credit card. 14 Latest Property/house Tax receipt (not more than one year old)								
			Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation) 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 								
3	6	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.								
4	7	Subscriber's Bank Details	For Tier I, bank details are optional. In case, subscriber provides bank details, it should be supported by cancelled cheque. 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 details on 'Investment Option', you may visit CRA website. Subscribers from Government sector are currently not allowed to exercise the investment option. As mentioned, your contribution will be invested by default PFs as per the guidelines issued by the Government.								
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 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.								
8	12	Declaration by subscriber on FATCA Compliance	 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 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								

General Information for Subscribers

- 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.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