	KFINTE ease select your category Please tick(✓)]			Cent Cent All C	ral (ral <i>l</i> itize	Gov Auto en M	t. onon	nou							Sta	ate /	Gov Aut	rt.		ıs Bo	dy	[3.	ph 5 cm	notog n × 2	recer grapl 2.5 cr	h of n siz	e /
)ear	nal Pension System Trust. Sir/Madam,	oper	ned	in my	, nan	ne as	s per	the i	oarti	cular	s aiv	ven b	elow	r:															_		
	licates mandatory fields. Please fil														pen.	(Refe	er gei	neral (quidel	lines at	instr	uctic	ns p	age)							
KYC	Number, Retirement Adviser Code																								_						
	C Number (if applicable)																Ger	erate	d fro	m Cer	ntral	KYC	Re	gistry	/						
Ret	rement Adviser Code (If applicable)																														
1.	PERSONAL DETAILS: (Please				0.1	of the			ons)					,																	
	Name of Applicant in full First Name*		Shri				Sm	t			Κι	ımaı	ri L								_										
	Middle Name																				+	_							\vdash		=
	Last Name				<u> </u>	<u> </u>						<u> </u>									+							<u> </u>	\vdash		=
	Subscriber's Maiden Name (if any)																				+	_	_						₩		
	Father's Name*	F	-	r	0	+								IV/I		d	d		е		+					a	0	+	₩		
	(Refer Sr. No. 1 of instructions)													IVI		u	u								_	a	0	-	<u> </u>		
	Mother's Name* (Refer Sr. No. 1 of instructions)	F	i	r	S	t								M	i	d	d		е						L	а	S	t			
	Father's name will be printed on PRAI	N car	d. Ir	n case	, mo	ther's	s nam	ne to	be p	rinted	l inst	ead o	of fatl	ner's	nam	e [P	leas	e tick	(/)]											
	Date of Birth*	d	d	/	m	m	/	У	У	У	У		(Da	te of	Birtl	sho	ould	be sı	uppo	rted b	y rel	eva	nt do	ocun	nenta	ary p	roof)			
	City of Birth*																														
	Country of Birth*																														
	Gender* [Please tick (✓)]	Mal	е			Fe	mal	е 🗌		С	the	rs [Na	tiona	ality*				lr	ndia	ın 🗌						
	Marital Status*	Mar	rrie	d	1	Ur	nmar	rried			(Othe	rs																		
	Spouse Name* (Refer Sr. No. 1 of instructions)	F	İ	r	S	t								M	İ	d	d		е						L	а	S	t			
	Residential Status*	Indi	an																												
•	DDOOF OF IDENTITY (D. IV.																			,											
۷.	PROOF OF IDENTITY (Pol)* (Any (one	or the	e dod	cume	ents r	neea	to b	e pro	ovide	ed ald	ong v							er)	_	al	ما	,			,	L			
	Passport Voter ID Card		\vdash	+											assp AN C			iry D	ate		+	a	a	/	m	m	/	У	У	У	У
	Driving License													_				se F	xpir\	/ Dat	2	d	d	1	m	m	1	V	V	V	V
	NREGA JOB Card															5															,
	Others	Nai	me	of th	e ID)											D		Ν	u	m	b	е	r	Pleas	se ref	er Sr.	No. 2	of the	instru	tions.
	As per the amendments made unde NPS. If you do not have PAN at pres																												ory u	ınder	
			pie	ase e	risur									11 312	. 11101	illis	01 31	ibillic								LIOIT	OIII	1.	_		
3.	PROOF OF ADDRESS (PoA)* [Please tick (✓), as applicable]	f					rres sport	•						/oter	ID car	d/NR	FGA	.loh		erma ssport						lhaar	\/\/ote	er ID d	eard/N	REGA	loh
	#Not more than 2 months old.					Car	d/Rati	ion Ca	ard/O	thers									Ca	rd/Rati	on Ca	ard/C	Others	3	` _						
	Please refer Sr. No. 2 of the instructions					_	gistere test Pig									-				gistere atest Pir				-							
	000000000000000000000000000000000000000	00.			0.4																										
4.1	CORRESPONDENCE ADDRE								1				_			_	_					-		1							
	Address Type*	Re	side	entia	l/Bu	sine	SS		R	esid	entia	al _		Bu	sine	ss		Re	egist	ered	Off	ice		Uı	nspe	ecifi	ed				
	Flat/Room/Door/Block no.																	Lar	ndma	ark											
	Premises/Building/Village																												П		
	Road/Street/Lane																														
	Area/Locality/Taluk																														
	City/Town/District																				Ť	Р	IN (Cod	е						
	State/U.T.																						С	0	u	n	t	r	У		
4.2	PERMANENT ADDRESS DET	TAIL	S*				Tick	(✓)	in th	ne bo	x in	case	the	addı	ess	is sa	me	as ab	ove.												
	Address Type*	Re	side	entia	l/Bu	sine	SS		R	esid	entia	al [Bu	sine	ss		Re	egist	tered	Off	ice		U	nspe	ecifi	ed [
	Flat/Room/Door/Block no.												_				_	l ar	ndma	ark	\Box										
	Premises/Building/Village			+																	\pm								\vdash		_
	Road/Street/Lane																				\pm										_
				 																	\pm								\vdash		
	Area/Locality/Taluk																														
	City/Town/District					1																	IN (<u> </u>	_			1			

Ver 1.11 KFINTECH 1 of 5

State/U.T.

5.	CONTACT DETAILS																													
	Tel. (Off) (with STD code)	+										Tel.	(Res	s): (wi	th STE) cc	ode)	+												
	Mobile*	+	9	1								(Mo	obile	Num	nber is	red	quire	ed fo	or co	mm	nunio	cation	n ar	nd to	get	SM	IS al	erts)		
	Email ID																													
	Email ID OTHER DETAILS (Ple Occupation Detail Private Sector Self Employer Income Range (pr Educational Quali Please Tick If App SUBSCRIBER BANK (All the bank details ar Account Type [please Bank A/c Number Bank Name Branch Name Branch Address	s* [or	Poleas Finum) Pons e AILS	e tick Public Home Up Be Pc	c Sector Sector 1 I elow Solitical ease recept	tor car car car car car car car car car ca	Go Stu 1 la SS cosed Sr no.	vernnident c to 5 C perso	lac	Struct]]] •	O 5 G Relate	thers lac t radu	o 10 iate	ease (_ 10 Ма	ster	s			ssio	onals ise re	(C	A, C		MA,	[[no.3]	
			L						State	te/U.	Т.					_	_	_				С	0	U	n	t	r	У		
	Bank MICR Code											IFS (Code	Э																
8.	SUBSCRIBERS NOM	NAT	ION	DET/	AILS*	(Plea	se refe	to Sr.	. No .	. 5 of	the in	nstruct	tions))																
Na	me of the Nominee (Yo	u can	nomi	nate ı	up to a	maxii	mum of	3 non	ninee	es and	d if yo	ou des	ire so	o plea	ase fill	in A	nne	xure	III (Addi	tiona	al Nor	mina	ation	For	m) p	rovid	led se	parat	ely)
	Firs	t Naı	ne							Mi	ddle	Nam	е									Las	t Na	ame						
	Relationship with the A		L									Date	e of E	Birth	(In ca	se	of N	Vinc	or)	d	d	/	m	m	/	У	У	У	У	
	Nominee's Guardian D	etails t Nai		case	of a n	ninor))			Mi	ddle	Nam	ρ									Las	t Na	ame						
												110	Ť																	
	I would like to subscribe (If you wish to activate Tier	acco	i er II unt su	Acco bsequ	unt al	you ma	YES [ay subm		arate a	applic	cation	(Annex			Is in A				dal (Office	or t	o POF	P/PC	DP-SF	of of	your	choic	ce. Th	e list o	f
10.		SELI ELEC Stor:	unt su unde inted inted inted inted inted inted inted inted inted inted interest in its intere	Acco bsequer NPS in Hi ON A N (Ti ollowid (b) se Auto /Minis	unt al uently, y and Al indi ND II er I): ng Per SBI Per conomoditry.	NVES Pleansion ension bus Bo	YES ay submre S10 is YES STMEN ase rea Funds (Funds dies (S	IT OF ad be PFs) Pvt. L AB) e	PTIO Llow will ac imite mploy	If Ye ON* (con ct join dt (c) yees	Plea ditio ntly a UTI I	(Annex bsite) ease s se refe ens be s defa Retirer	efore subm	S10) to	tails o tails o . 6 of t ting for choice tions L er this	he i	instructe in the not earling the string the	uction choexerouse convillation	ons) ice cisec of Ce	of I	Penothed, if	sion gover onom	Fu nous	nds: ent er s Bod o emp	: mplo dies ploy	oyee (CA	/subs	scribe	er	ıf
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Governmen by the respective 2. All Citizen Model 3. Corporate Model	SELI ELEC tor: fund I ot (SG State I: Sub	unt su unde inted interest	Acco bsequer NPS in Hi DN A N (Ti ollowid d (b) se Auto /Ministers u	unt al iently, y and Ai indi er I): ng Pei SBI Peo onomo stry. nder A	NVES Pleansion ension bus Bo	YES ay submree S10 is YES STMEN ase rea Funds (Funds odies (Seen mode)	it sepa s availa NO IT OF ad be (PFs) (Pvt. L AB) e	PTIO Ilow will ac imite mploy ve the se the	on CR If Ye ON* (con ct join ed (c) yees e opti	Plea dition to to table	(Annexibility) ease serefeens be serefeens be serefeen rection rechoose PFs and serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen	er to sefore ult Planent made se the sperious per	Since option of the control of the c	tails o . 6 of the discount o	n A he i is i td. I sec	instructe instructe instructe in case in case in case in case in case	uction exercise consumer to the ons) ice cisec of Ce be ig	of I by ntra nore choi	Penothed, if	sion gover onom choic n the	Fu nous ce to	nds: ent er s Bod o emp	: mplo dies ploy ow.	oyee (CA) ees	/subs B)/ is no	scribe	er	rf	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Governmen by the respective 2. All Citizen Model 4. Default Choice of	SELI ELEC tor: fund lat (SG State I: Su : Sub of Per	unt su unde rinted CTIO The familie (CTIO)/State (CTIO)/S	Acco bsequer NPS in Hi DN A N (Ti ollowid d (b) Se e Auto /Minis ers u	unt all lently, and All indi IND II I	NVES Plea nsion pus Bo all Citiz the callable	YES ay submre S10 is YES THEN SE rea Funds (Funds dies (Sen moorption to e in Gov	it sepa s availa NO IT OF ad be (PFs) (Pvt. L AB) e del have choose	PTIO Ilow will ac imite mploy ve the se the	application CR If Ye ON* (condition of cond	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	Sr no e opt Fs, if Solute under the boscrib	tails o . 6 of the discount o	n A he i is i td. I sec	instructe instructe instructe in case in case in case in case in case	xure uuctic cho exerci	ons) oice cisec of Ce be ig	of I I by entra nore choi on w	Pen the of I Aut ed, if ce ir ith the	sion gover onom choic the the reir re	Fu nme nous ce to table	nds: ent er s Bod o emp e belo	: mploidies ploy ow.	oyee (CA) ees	/subs B)/ is no	scribe	er	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Governmen by the respective 2. All Citizen Model 3. Corporate Model	SELI ELEC tor: fund l tt (SC State I: Sub of Per	ier II unt su unde intec intec CTIO The f imite)/Stat oscribe scribe sion Pens	Acco bsequer NPS in Hi DN A N (Ti ollowid d (b) Se e Auto /Minis ers u	unt all lently, and All indi IND II I	NVES Plea nsion pus Bo all Citiz the callable	YES ay submre S10 is YES THEN SE rea Funds (Funds dies (Sen moorption to e in Gov	it sepa s availa NO IT OF ad be (PFs) (Pvt. L AB) e del have choose	PTIO Ilow will ac imite mploy ve the se the	application CR If Ye ON* (condition of cond	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Annexibility) ease serefeens be serefeens be serefeen rection rechoose PFs and serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen be serefeens be serefeens be serefeens be serefeens be serefeen	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of t ting for choice cions L er this illable I below ta er doe	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice cisecos Company being their ultationse company	of I by ntra nore choice on whoice It CI	Pen: I Aut I Aut ed, if ce ir ith the of	sion gover onom choic the neir re PF	Fu nous ce to table	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Mode 4. Default Choice of LIC Pension Fundament State Government State Gov	l accorvices be p be p ELECTOR :: Constant of the constant of	rier II unt su unde rintection (CTIO) The CTIO The Govt bescribe scribe scribe sion Pens	Acco Acco Acco Acco Acco Acco Acco Acco	unt al uently, and Ai indi IND II er I): ng Pei SBI Peo onomo stry. nder A all have s: Ave und (P	NVES Plea nsion pus Bo all Citiz the callable	YES ay submre S10 is YES THEN SE rea Funds (Funds dies (Sen moorption to e in Gov	it sepa s availa NO IT OF ad be (PFs) (Pvt. L AB) e del have choose	PTIO Ilow will ac imite mploy ve the se the	application CR If Ye ON* (condition of cond	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of the discount o	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice ciseco f Cebe ig	of I by ntra nore choice who ice to the choice the choi	Pen: I Auther of I ce irith the of	sion gover onom choic the neir re PF e of F	Funnement of the following states of the following sta	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Governmen by the respective 2. All Citizen Model 4. Default Choice of Name of LIC Pension Full Components of the component	l accorvices be p be p SELI ELEC ctor:: und I t (SG State I: Sub f Per f the nd Lir Solution	rier II unt su unde rintectintection (CCTIO) The finite Government	Acco bseque r NPS in Hi ON A N (Ti ibl (b) s e Auti //Minis ers u ers sha fund ion Fi Limit imited	unt all lently, y and Ai	NVES Plea nsion ension ension dill Citiz el the c	yes ay submire S10 is YES STMEN SE rea Funds (Funds dies (Steen modern to be in Government of Selection to selection	It sepas available NO IT OF ad be PFS) Pvt. L AB) e del have choose rernme	PTIO VICE THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T	application CRI If Ye N* (CON: CO	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of t ting for choice cions L er this illable I below ta er doe	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice ciseco f Cebe ig	of I by ntra nore choice who ice to the choice the choi	Pen: I Auther of I ce irith the of	sion gover onom choic the neir re PF e of F	Funnement of the following states of the following sta	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Model 3. Corporate Model 4. Default Choice of LIC Pension Fund SBI Pension Fund SBI Pension Fund SBI Pension Fund ICICI Prudentia Kotak Mahindra	l acccorvices be p be p SELI ELEC tor:: und I it (SG State I: Sub if Per ind Lir nds F Solut Pens Pens	ier II unt su unde rinted ECTIO The finimite Government obscribe scribe scribe rivate ons L ion F ion F	Acco bsequence of the sequence	unt al liently, and Ai indi ND III Per I): String Per String Pe	so you mannexul Plea nesion nesion nus Bo Il Citiz e the c ailable lease s	yes ay submire S10 is YES STMEN SE rea Funds (Funds dies (Steen modern sein Government Selection selection	It sepas available NO IT OF ad be PFS) Pvt. L AB) e del have choose rernme	PTIO VICE THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T	application CRI If Ye N* (CON: CO	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of t ting for choice cions L er this illable I below ta er doe	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice ciseco f Cebe ig	of I by ntra nore choice who ice to the choice the choi	Pen: I Auther of I ce irith the of	sion gover onom choic the neir re PF e of F	Funnement of the following states of the following sta	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Model 3. Corporate Model 4. Default Choice of LIC Pension Fundering SBI Pension Fundering SBI Pension Fundering SBI Pension Fundering Kotak Mahindra HDFC Pension	l accordices be p be p be p be p be p be p be p be	ier II unt su unde rinted trinted The frimite CTIO The frimite Govt boscribe scion Pens in Trinted rivate ons Lion Frimite Government The frimite CTIO The frim	Acco bseqq r NPS i in Hi DN A (Ti ibllowid d (b) s e Aut '/Minisiers und F Limit imiter unds und L	unt al annument and Alliand Al	so you mannexur Plea nsnion us Bc Il Citiz e the c e the c gemen	yes ay submire S10 is YES STMEN SE rea Funds (Funds dies (Steen modern sein Government Selection selection	It sepas available NO IT OF ad be PFS) Pvt. L AB) e del have choose rernme	PTIO VICE THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T	application CRI If Ye N* (CON: CO	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of t ting for choice cions L er this illable I below ta er doe	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice ciseco f Cebe ig	of I by ntra nore choice who ice to the choice the choi	Pen: I Auther of I ce irith the of	sion gover onom choic the neir re PF e of F	Funnement of the following states of the following sta	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Model 3. Corporate Model 4. Default Choice of LIC Pension Fund SBI Pension Fund SBI Pension Fund SBI Pension Fund ICICI Prudentia Kotak Mahindra	l accorvices be p be p SELI ELECT: iund I it (SG State I: Sub f Per f the nd Lir Pens Mana nsion	ier II unt su under intection interest	Acco bsequence of the control of the	unt al annument and American A	so you mannexui NVES Plea nsion nension nus Bc Il Citiz e the c ailable lease s	yes ay submine S10 is YES TMEN SE rea Funds (Funds dies (Steen modern potion to be in Government Company and the Company seed	it sepas savailates sa	PTIO Ilow will actimite the set the se	application CRI If Ye N* (con. ct join d (c) yyees, e opti e ava ector,	Plea Plea ditio ntly a UTI I , sele ion to ilable , if en	(Anne) bsite) ease s se refe ns be s defa Retirer ction r choose	er to sefore ult Planent made se the spere e/sub	S10) to	tails o . 6 of t ting for choice cions L er this illable I below ta er doe	he i bor to is i td. I sec	wnne instru the not e ln ca tion s as p	xure cho exercise c consu	ons) ice ciseco f Cebe ig	of I by ntra nore choice who ice to the choice the choi	Pen: I Auther of I ce irith the of	sion gover onom choic the neir re PF e of F	Funnement of the following states of the following sta	nds: ent er s Bod o emp e belo ective	: mplodies ploy ow. Em	oyeee (CA) ees	/subs B)/ is no er.	scribe	er fied	
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Mode 3. Corporate Mode 4. Default Choice of LIC Pension Fundament Set In Pension Fundament ICICI Prudentia Kotak Mahindra HDFC Pension Birla Sunlife Pe	I according to the control of the co	rier II unt su unde rintec unde rintec CTIO The finimite CTIO The formation of the control of th	Acco bsequer NPS in H ON A N (Ti bllowid (b) s e Auto //Minis //Minis //Minis //Minis //Minis //Minis //Minis //Minis //Minis	unt al annument and American A	NVES Plea nsion nension nension nension nension us Bc lil Citiz e the c ailable gemen / Limit ttory fo	yES ay submine S10 is YES TMEN ase rea Funds of Funds of Early submine S10 is YES and the S10 is YES are readed as the YES are readed as the YES are readed	it separation it separation it separation it separation it separation it separation in the separation	PTIO Ilow will ac imited we the ent see imited ind if yads wi	application CR If Ye N* (Con d (c) yyees e opti e ava ector, which is the con d d d ber	eation RA we see see see see see see see see see	(Annex basite) ease s se refe se defa Retirer ction r choose PFs a nployee Auto (sted in	choice Auto	S10) to the state of the state	o the astails of a control of the astails of a control of the astails of a control of the astails of a control of the astail of	n A he i he i is r td. I is r td. I le i ille i i	instruction of the control of the co	wurtice cho exercise consultations and the consultation consultation consultations are consultationally consultations.	pnns) ice properties in the pr	of I by ntra inore choice the cho	Pen: I Aut I Aut Ce irith the e of ector cise	sion gover choice the the eight re per e of F er, if e	Funnement of the second of the	nds: s Bod o emple beloctive sion	: mpldies ployy ow. Em	pyeee ((CAI ees ploye	s/subs B)/ is no er.	scribe	es no	t
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Mode 3. Corporate Mode 4. Default Choice 6. LIC Pension Funder 1. LIC Pension Funder 1. LIC Pension Funder 1. LIC Prudentia 1. Kotak Mahindra 1. HDFC Pension Birla Sunlife Pension 1. Birla Sunlife Pension 1. In Case you sele 2. In case you sele 2. In case you have 1. In case you h	I according to according to the position of th	rier II unt su unde rintec intection II unt su unde rintec intection II unt su unde rintection II under II unde	Acco bsequer NPS in H DN A N (Ti	unt al anently, and Al anently, anently, and Al anently, anently, and Al anently, ane	NVES Plea nsion nension nension nension nension service per the c ailable lease s // Limit ttory fo sectior sectior pen and 1).	yes ay submine S10 is yes a S10	it sepas savailates sa	PTIO Ilow will a a cimited when the set the se	application CR If Ye N* (CON* (CO	Pleas Pleas Pleas elected investments elected in	(Annex basis) (A	sethor sper e/sub	sand the same same same same same same same sam	o the astalls of a few parts of the astalls of a few parts of the astalls of a few parts of the astalls f the astall of the a	n A the i pr t is in tid. I sec PFs able s n tion tion tion the ii	instruction as as in coordinate of the coordi	wurte cho exercise consulting per t per t consulting per t belo	pons) ice il in s) ice ice ice	of I by ntra nore choi on w hoic It Ch	Pen: I Aut ed, iff the of noice ectccise	sion gover onon choice the neir re pe e of F cho	Furnmendous ce to table espe	nds: s Bod o emple beloctive sion	: mpldies ployy ow. Em	pyeee ((CAI ees ploye	s/subs B)/ is no er.	scribe	es no	t
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to PENSION FUND (PF) (I) PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Mode 3. Corporate Model 4. Default Choice of LIC Pension Funder Set In Case of Set In Case of Set In Case of Set In Case of Set In Case of Set In Case you sele 2. In case you save will be made as Incase you have will be made as Incase you have will be made as Incase you have the set In Case you have will be made as Incase you have will be made as Incase you have the set Incase you have will be made as Incase you have will be made as Incase you have will be made as Incase you have the set Incase you have will be made as Incase you have the set Incase you have will be made as Incase you have the set Incase you have the year of the year	I according to according to the position of th	river II unt su unde rintec interior II under	Acco bsequer NPS in H DN A N (Ti DN	unt al alently, y and Alindi ND II and Alindi	NVESS Plea nsion nension nension nension service place nsion nension nus Bc lace nsion nus Bc rension nus Bc re	yes ay submine S10 is yes a S10	it sepas savailates sa	PTIO Ilow will a a cimited when the set the se	application CR If Ye N* (CON* (CO	elect invest relations of the select	(Anne) bsite) ease s see referens be see referens be see referens be see referens be see referens be see referens be see referens be see referens be see referens be see referens be see referens see re	choice Asse	stop to the control of the control o	o the actails of a constant of the actails of a constant of the constant of th	nn A he i i s i s i s i s i s i s i s i s i s	instruction in (iv)	belower A as equal seed a seed	be II Inns) bice cisecute Control of Control be ignored to be ignore	of I by intra inore choice on whoice the choice the choice of the choice	inst oph inst oph inst inst	sion gover onon choic n the eier re PF e of F cr, if e cho corpor sset C nvits e plicati tettent styll be plicati tets styll in the st	Fundamental Fundam	nds: s Bod o emple beloctive sion will be debt a A-Alto fas peed out il to 10 hall be ee thar	: mplodiles ploy ow. Em Fun e/s F	poyeee (CA) ees ploye eds subs	d instruvestrusses, til.	er dd inverument alloca action rix on he	es no es no estmer tts;	nt birth.
10.	(If you wish to activate Tier POP/POP-SPs rendering set I would like my PRAN to I would like my PRAN to PENSION FUND S 1. Government Se (a) LIC Pension I State Government by the respective 2. All Citizen Mode 3. Corporate Model 4. Default Choice of LIC Pension Funder I CICI Prudentian Kotak Mahindra HDFC Pension Birla Sunlife Per Selection of one (ii) INVESTMENT OPT (Please Tick (✔) in the Active Choice Please note: 1. In case you do note in case you have will be made as (iii) ASSET ALLOCAT Asset Class (Can exceed Specify %	I according to according to the position of th	rier II unt su unde rintec intection of the finite intection of the finite interest in the finite interest inte	Acco Acco Acco Acco Boseque F NPS In H DN A N (Ti Bollowid G) G E Autu Ministers u G E Autu Ministers u G E Bollowid G C C C C C C C C C C C C C C	unt al alently, and Alindi ND II er I): ng Pei SBI Pee SBI Pe	NVESS Plea nsion nnsion nsion	YES ay submire S10 is YES STMEN SEE reasons of Funds (Funds of Funds of Fun	it sepas savailates sa	arate a able of able o	application CR If Ye N* (CON* (CO	elect invest relations. Select Select 1. Upt	(Annex basite) ease s see reference to no be see the see that see the see that see the see that see the see that see the see that see tha	choice Auto Asse	set fill be a strume of age, and about the library and about the characteristic file.	up seccice (LC cation, missile in the late of the maximum second cate of th	nn A he i i s i s i s i s i s i s i s i s i s	note ein coot expanding in (iv)	belower A as equal seed in a part of a general seed in a general s	be II Inns.)	of I by intra increase choice on whoice the choice interest in the choice of the choic	inst inst oph sc-cise inst	sion gover onor choic n the neir re PF e of F or, if e cho corpor sset C nvits e plicatic ted is S% in locate	Fundamental Fundam	nds: s Bod o emple beloctive sion loyee of PP	: mplodiles ploy ow. Em Fun e / s f the er the er the er the ploy ow. e rejen who again class	ployee (CA) ees ploye eds ubs	d and d instrument asset tralloo	er do	es no es no estmer tion. matrix, date of I	nt birth.

(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
LC 75		Not available	2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset
LC 50		A	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
LC 25		Available	4. dovi. employee can exercise Auto enoice of Asset Allocation for Lo 25 a 25 of entry

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 along with the PFRDA Act, regulations framed thereunder 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 website and view details) & T-PIN.

Dec	laration	under the	Prevention	of Money	Laundering	Δct	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 s found violating the provisions of any law	nare the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am elating to prevention of money laundering.
Date ddlmm//y	уууу
Place :	
	Signature/Thumb Impression* of Subscriber in black ink (* LTI in case of male and RTI in case of females)

12. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 8 of the ins	tructions):	
---	-------------	--

Section I*

US Person*

Section II*

For the purposes of taxation, I am a resident in the following countries and my Permanent Account Number (PAN) / Tax Identification Number (TIN) / Functional Equivalent Number in each country is setout below or I have indicated that a PAN/TIN/functional equivalent Number is unavailable (kindly fill details of all countries of tax residence if more than one):

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			
Permanent Account Number (PAN) / Tax Io (TIN)/Functional Equivalent Number	dentification Number			
PAN/TIN/ Functional equivalent Number Is	suing Country			
Validity of documentary evidence provided (\	Wherever applicable)	dd / mm / yyyy	dd / mm / yyyy	dd / mm/yyyy

"I certify that:

- a) It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid
- b) the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- c) I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- d) I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence,
- e) I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI) /RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- f) I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- g) I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- h) I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date ddl/mm/m//yyyyy	of 5
Place:	Signature/Thumb Impression* of Subscriber in black ink
	(* LTI in case of male and RTI in case of females)
Name of subscriber	
13. DECLARATION BY EMPLOYER	
	nment Subscribers only
	d attested by the Deptt. (All Details are Mandatory)
Date of Joining	Date of Retirement
Employee Code/ID (If applicable)	Employee Code/ID and PPAN are optional. If you intend
PPAN (If applicable)	to provide, mention any one.
Group of Employee (Tick as applicable) Group A	roup 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	employed with us, including
	rvice 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 Rubber Stamp of the DDO	Signature of the Authorised person Rubber Stamp of the DTO/PAO/CDDO/
(In the box above) (In the box above)	(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	Date d d / m m / y y y y
14. DECLARATION BY EMPLOYER/ CORPORATE	
Applicable to Corp	orate Subscribers only
(Subscribers Employment Details to be filled an	d attested by Corporate (All Details are Mandatory))
Date of Joining	Date of Retirement ddd/mmm//yyyyy
Employee Code/ID	
Corporate Regd. Number (CHO 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
	loyee maintained by us. Also, it is further certified that he / she has read the
Date d d / m m / y y y y	Place
	-
Signature of the Authorised person (In the box above)	
Designation of the Authorized Person	Pubbar Stamp of the Corporate (In the box above)

Ver 1.11 4 of 5



15. TO BE FILLED BY POP-SP			
Receipt No. (17 digits)		POP-SP Registration Number	
Document accepted for date of Birth F	Proof:		
Copy of PAN card submitted YES	NO KYC Complia	ance YES NO	
Documents Received:	(Originals Verified) Self Certified (Attested	d) True Copies	
Identity Verification :	Done		
Existing Customer:			
The above applicant is having an ope number/client IDm customer/client matches the requirem	mt/Kumbranch/off ent for opening NPS account and are in complia		the account) having account e with us for this er confirm that the Savings
To be filled by POP-SP		Name:	
		Designation:	Place:
POP-SP Seal	Signature of Authorized Signatory	Date d d / m m /	у у у у
	To Be Filled by CRA Br	anch	
Received by		CRA-Branch	
Received at		Date d d	I m m I y y y y
Acknowledgement Number (by CRA-Branch	n)		
PRAN Alloted			
	ACKNOWLEDGEMENT	 Г	
Name of the Subscriber:			
Contribution Amount Remitted:	,		
Date of Descipt of Application and Co.	Aributian Amazuntu		

Stamp and Signature of the Employer/PoP:

Ver 1.11 5 of 5

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

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 blank box after
- 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 c) 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.
- The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office.

em lo.	Item Details		Instr	uction	ns				
40.	Personal Details	ii.	This Form is only for Resident Indians and there is a separate Form fo Currently, Foreign Nationals / Other Country Individuals (OCI) and Per The applicant shall mention father's name and mother's name and sha	sons o	of Indian Origin (PIO) are not allowed to open PRAN.				
	Spouse Name		narried, spouse name is mandatory.						
1	Father's Name		Father's name is mandatory. If father's name has more than 30 digits, you may fill Annexure II for the	ne sam	00				
	Mother's Name	i.	Mother's name is mandatory If Mother's name has more than 30 digits, you may fill Annexure II for						
	Date of Birth	Ple	ease ensure that the date of birth matches as indicated in the documen	t provi	ided in the support.				
	Date of Birth	S.No	Proof of Identity (Copy of any one)	S.No					
		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.	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, Tehsidar, 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				
3 & 4	Identity, Correspondence &	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				
) Q 4	Permanent address details	10	Job cards issued by NREGA duly signed by an officer of th State Government	10	Job cards issued by NREGA duly signed by an officer of the State Government				
	State	11	The identity card/document with address or letter of allotment of accommodation 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 companies for their employees. Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address.	11	The identity card/document with address or letter of allotment of accommodation 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 companies for their employees. Pension or Family Pension Payment Orders issued 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 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) 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)				
		(II) I	f the address on the document submitted for identity proof by the prospening form, the document may be accepted as a valid proof of both in the address indicated on the document submitted for identity proof difform, a separate proof of address should be obtained. All future communic correspondence & Permanent address are different, then proof for bothe KYC documents may be submitted within a period of 30 days after	dentity fers frontication the have gener	and address. om the current address mentioned in the account opening form, a ons will be sent to correspondence address. te to be submitted. ration of PRAN. (Only for Government Subscribers)				
6	Politically Exposed Person	heads	cally Exposed Persons' (PEPs) are individuals who are or have been eles of state or of the government, senior politicians, senior government, jutant political party officials.						
7	Subscriber's Bank Details	Code	er I & Tier II account, Bank details are mandatory. Please attach a Cance) or Bank Certificate containing Name, Bank Account Number and IFS co- nted with name, additionally, a copy of the bank passbook or bank certific	de, for					
8	Subscriber's Nomination Details	the nomin	se of more than one nominee, percentage share value for all the nomin omination(s). Sum of percentage share across all the nominees must be nation(s). Sum of percentage share across all the nominees must be en e rejected.	e equ	al to 100. If sum of percentage is not equal to accepted in the				
10	Pension Fund (PF) Selection and Investment Option	Funds	nment employee/ subscribers can exercise choice of Pension Funds and alloc s - LC 50 or LC 25 under 'Auto Choice'. In case a Government employee/subs ted among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pens	scribers	s does not exercises the choices of Pension Fund, their contributions will be				
11	Declaration by Subscriber	office	ture/Thumb impression should only be within the box provided in the for POP/POP-SP/Nodal office with the official seal and stamp. Left Thees.						
12	Declaration by subscriber on FATCA Compliance	Juri for Tax issuming that regular Nur on the control of the	arification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India urisdiction(s) of Tax Residence :Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident or 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 sesued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of hat type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident egistration number) applicant residence for tax purpose in jurisdiction(s) within India, Permanent Account Number (PAN) to be provided as Tax Identification						
12		Declaration by subscriber on FATCA	Declaration by subscriber on FATCA Compliance I far Nur line (1) for the complex of the complex	Clarification / Guidelines on filling details if applicant residence for tax purpo Jurisdiction(s) of Tax Residence :Since US taxes the global income of its of rot tax purpose in USA. Tax Identification Number(TIN) : TIN need not be reported if it has not bee issued a high integrity number with an equivalent level of identification (a state of the type of number for individual include, a social security/insurance num registration number) If applicant residence for tax purpose in jurisdiction(s) within India, Perman Number (TIN) In case applicant is declaring US person status as 'No' but his/her Country	Clarification / Guidelines on filling details if applicant residence for tax purposes in Jurisdiction(s) of Tax Residence :Since US taxes the global income of its citizen for tax purpose in USA. Tax Identification Number(TIN) : TIN need not be reported if it has not been issu issued a high integrity number with an equivalent level of identification (a "Funct that type of number for individual include, a social security/insurance number, ci registration number) If applicant residence for tax purpose in jurisdiction(s) within India, Permanent A Number (TIN)				

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:

Call: 1800 208 1516

Website: https://nps.kfintech.com

Address Kfintech Pvt Limited Tower – B, Plot No 31 & 32, Selenuim Building, Financial district, Nanakramguda, Gachibowli, Hyderabad - 500 032,

