

INDL.RELATIONS SECTION, HR DIVISION CORPORATE OFFICE, NOIDA

HO/19/IR/PD-62

27.11.2018

CIRCULAR NO. - 632

Sub: <u>Implementation of National Pension System (NPS) in KRIBHCO.</u>

Board of Directors in its 327th meeting held on 29.10.2018 has approved the implementation of National Pension System (NPS) for the benefit of the employees of KRIBHCO. The scheme and registration forms in this regard are appended at Annexure - I.

All employees who are interested to opt for the scheme are requested to fill the form for Registration. New subscribers are required to fill "National Pension System (NPS) - Subscriber Registration Form". Existing Account Holders are required to fill the "National Pension System (NPS) - Request for Subscriber Shifting Form."

The scheme shall be implemented w.e.f. 01.01.2019.

(POONAM SHARMA)

Chief General Manager (HR)

DISTRIBUTION: -

- EDs
- All CGMs/GMs
- All AGMs/DGMs
- All CMs/Chief SMMs
- All SMs/Sr. SMMs
- All Area Managers
- Administrator SAP
- GS- KAS/AIKEU/KOA/KKS
- All employees/Notice Board

CC : Office of MD/FD/Mktg. Director/OD

NATIONAL PENSION SYSTEM (NPS) IN KRIBHCO

About NPS

NPS a Social-Economic product, is regulated by Pension Fund Regulatory Authority (PFRDA) under PFRDA Act, has been made mandatory for Central Govt. employees. NPS is now available to employees of State Govt., private institutions/organizations and citizen of India between age of 18 to 65 years old, to protect their old age income security. Investment in NPS is available to employee at individual level and as an employee of an organization under corporate module as well.

Benefit of NPS

NPS offers the following benefits:-

- 1. Prudentially Regulated under PFRDA Act 2013, Low Cost, Portability across jobs and location, Flexibility with investment choice, Market linked return, No entry or exit loads.
- 2. No approval from Income Tax authority is required for NPS Corporate enrolment.
- 3. No need to establish and manage your TRUST like Superannuation Trust.
- 4. NPS corporate enrolment is absolutely cost free.
- 5. Contribution by employer to NPS a/c of employees, up to 10% of Basic and DA can be accounted as business expenses u/s 36(1)IV(A) of Income Tax Act.
- 6. Self contribution by employee Tax deduction u/s 80CCD(1) Investment upto 10% of salary (Basic +DA) is deductible from Taxable income subject to Rs. 1.50 lakh limit of 80C.



- 7. Additional Tax deduction for individual of Rs. 50,000/- u/s 80CCD(1B).
- 8. Employer contribution Tax deduction u/s 80CCD2 Investment upto 10% of salary (Basic +DA) is deductible from Taxable income without any cap.
- 9. Tax benefit u/s 80CCD (1B) and 80CCD(2) are over and above limit u/s 80C.
- 10. No service tax on annuity through NPS unlike immediate annuity.
- 11. Minimum 40% and upto 100% of corpus tax exempt on annuitisation. Corpus up to 40% is tax exempt on withdrawal. Upto 60% of corpus can be withdrawn on superannuation, however 20% withdrawal will be taxed in the year of withdrawal.
- 12. Deferment to start annuity, for three years and deferment of withdrawal till 70 years of age.
- 13. Aadhar based NPS account opening through agencies.
- 14. **Flexible**: Employees are requested to give investment choice. They have the option to choose from an assortment of asset classes (Equity, Corporate Debt & Government Securities) and can have the freedom to invest in a variety of Pension Funds.
- 15. The NPS can be operated from anywhere in the country even if one changes the job location or the job itself.

NPS shall be operated by Stock Holding Corporation of India Ltd. (Stock Holding) a Government company, promoted by leading Financial Institutions.

Other features to operate the scheme shall be as under :-

1. As per discussions with the stock holding representatives, the employees who are already having their NPS account may also come under the ambit of Corporate account i.e. operated by KRIBHCO.



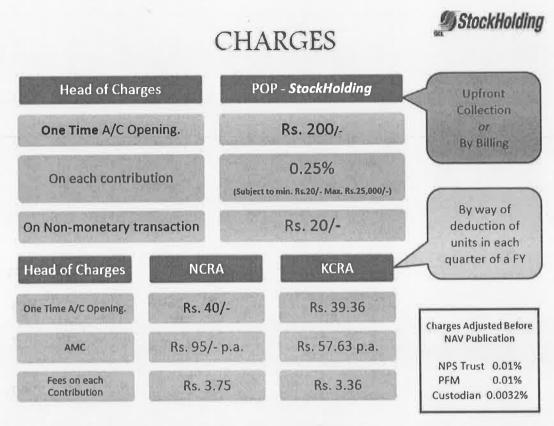
- 2. This Scheme shall not be mandatory. It will be optional to the employees of KRIBHCO.
- 3. All the permanent employees of KRIBHCO and Management trainees can become member of NPS as per the rules of the NPS.
- 4. The contribution equivalent upto 10% of Basic shall be taken from the perks/allowances of the employees. For example at present 25% allowances are paid to the employees and after implementation of this scheme allowances shall be reduced to 15% and NPS contribution will be 10%. In case of rest of employees allowances shall continue to be paid @ 25%.

On implementation of this scheme the perks shall be revised for the employees who opt for Corporate NPS as under:

S. Particulars No.		(AG at	ade D M) & oove	Grade H to D (DGM)		Grade R to H1 (HO/CMO/ FMO)		Grade R to H1 (Plant)	
		Exist- ing (%)	Revise d (%)	Exist- ing (%)	Revise d (%)	Exist- ing (%)	Revise d (%)	Exist- ing (%)	Revise d (%)
1	Reimburse- ment of Washing Expenses	4	4	3	2	3	2	3	2
2	Education Allowance	1	1	1	NIL	2	1	1	NIL
3	Reimburse- ment of Expenses for Newspaper and Periodicals	4	4	3	2	3	2	3	2
4	Canteen subsidy/ Meal Coupons (at employee's option)	2	2	3	2	3	2	3	2
5	Transport Allowance	NIL	NIL	2	NIL	2	NIL	2	NIL
6	Reimburse- ment of Conveyance Expenses	NIL	NIL	7	7	2	2	7	7
7	Furnishing Allowance	8	2	NIL	NIL	NIL	NIL	NIL	NIL
8	LTC/LTE (Yearly)	6	2	6	2 🗹	10	6	6	2



- 5. No financial implication shall be borne by KRIBHCO.
- 6. Charges such as initial subscription, fund maintenance/ management charges or any other charges applicable shall be borne by the employees.



(The same are subject to changes by PFRDA.)

After implementation, in case any employee wants to join/ withdraw from the scheme, he/she has to submit his/her request latest by 28th February of the each year so that contribution from 1st April of the next financial year can be started/ discontinued and the employee can be included/excluded from the employer scheme. The request for join/ withdrawal, in between the financial year will not be entertained. (Such employees should not have claimed LTE/LTC for the respective calendar year before requesting for change.)

The Nodal officer of the scheme shall be Sh. Girish Chandra, M(HR) - Corporate Office and Alternate Nodal officer shall be Sh. Laxmi Kant Dingliwala, CM(F&A) - Corporate Office.



All the employees who have given their consent for opting this scheme in response to our Circular No. 627 are requested to send their duly filled up enclosed form for registration to the Nodal officer within 20 days from the date of notification of this circular.

The employees who have not given their consent in response to our Circular no. 627 and want to opt this scheme may also send their duly filled enclosed form along with the option cum undertaking for NPS form for registration.

New subscribers are required to fill the enclosed "National Pension System (NPS) - Subscriber Registration Form". The following documents are required to be enclosed with the registration form for new accounts:-

- 1. One photograph
- 2. Self attested Pan Card copy of Subscriber
- 3. Self attested address proof (Aadhar/ Voter ID/ Passport/ Driving Licence) copy of subscriber.
- 4. Cancelled cheque for bank details proof of subscriber

Existing account holders are required to fill in the enclosed "National Pension System (NPS) – Request for Subscriber Shifting Form". They are required to enclose Self attested PRAN Card Copy along with form.

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	Subscriber's Maiden Name (if any	r)						
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Att.					
11. DECLARATION BY SUBSCRIBER* (Ple	ase refer to Sr no. 7 of the i	nstructions)			
Declaration & Authorization by all subscribe	ers		80 10	a property	latings framed thereunder
I have read and understood the terms and cond and declare that the information and document Record Keeping Agency/National Pension Sysunderstand that I shall be fully liable for submis	is furnished by me are true a stem Trust, of any change ssion of any false or incorrec	and correct, to the best of in the above information at information or documen	furnished by me. I do r ts.	not hold any pre-	existing account under NPS. I
I further agree to be bound by the terms and complete or partial without any new declaration details) & T-PIN	title as at a model on of oc	paigon by CRA from time	to time and any amend	dment thereof as usage of I-PIN (to	approved by PFRDA, whether access CRA website and view
Declaration under the Prevention of Money I hereby declare that the contribution paid by r the right to peruse my financial profile or share found violating the provisions of any law relating	me/on my behalf has been the information, with other g	government authorities. I	ared and assessed source further agree that NPS T	ces of income. To	inderstand that NPS Trust has o close my PRAN in case I am
Date / /					
Place :			Signature/Thumb le	mpression* of	Subscriber in black ink
			(* LTI in case o	of male and RTI	in case of females)
12. DECLARATION ON FATCA* (Foreign A	Account Tax Compliand	ce Act) COMPLIANCE	(Please refer to Sr no.	8 of the instruction	ns):
Section I*					
US Person* Yes No					
Section II*					
For the purposes of taxation, I am a resident out below or I have indicated that a TIN/func	t in the following countric ctional equivalent is unav	es and my Tax Identific vailable (kindly fill deta	cation Number (TIN)/f ils of all countries of t	unctional equivo ax residence if	alent in each country is set more than one):
Particulars		Country (1)	Countr		Country (3)
Country/countries of tax residency					
	Address Line 1				
the invited lating for Tox	City/Town/Village				
Address in the jurisdiction for Tax Residence	State				
	ZIP/Post Code				
Tax Identification Number (TIN)/Functiona	al equivalent Number				
TIN/ Functional equivalent Number Issuing					
Validity of documentary evidence provided (1 1	1	1	<i>I</i> = <i>I</i> = = = = =
"I certify that: a) It shall be my responsibility to educate n with the Rules 114F to 114H of the Inco	ome tax Rules, 1962 the	ereunder and the inion	naudi provided in the	- 1130111111011113	Water Water Company
b) the information provided by me in the F belief, true, correct and complete and th a Reportable account or otherwise.	at I have not withheld ar	ny material information	that may ancor the di	300001110110	9-11-11-11-1
c) I permit/authorise the NPS Trust to colle Trust and any of NPS intermediaries wh India of any confidential information for	nerever situated including	g snaring, transier and w or regulation whethe	r domestic or foreign.	nom and to the	
d) I undertake the responsibility to declar provided in the Form, its supporting Anr provide fresh self-certification along with	nexures as well as in the	e documentary evident	e provided by the or	arry corumean	
e) I also agree that in case of my failure to authority designated by the Government.	odisclose any material fa nt of India (GOI) /RBI/IRI	DA/PERDA for the pur	pose or take any other	er action as mag	be deemed appropriate by
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the NPS Trust if the deficiency is not re f) I hereby accept and acknowledge that the domain for confirming the information p g) I also agree to furnish such information.	emedied by me within the he NPS Trust shall have provided by me to the NF n and/or documents as t	e stipulated period. the right and authority	to carry out investiga	tions from the ir	formation available in public
the NPS Trust if the deficiency is not re f) I hereby accept and acknowledge that the domain for confirming the information p g) I also agree to furnish such information provided to the subject matter be	medied by me within the he NPS Trust shall have provided by me to the NF n and/or documents as t prein	e stipulated period. the right and authority PS Trust the NPS Trust may rec	to carry out investiga	tions from the ir	formation available in public
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Name of subscriber

6. TO BE FILLED BY POP-SP			
Receipt No. (17 digits)		POP-SP Registration Number	
Document accepted for date of Birt	th Proof:		
Copy of PAN card submitted Y	ES NO KYC Comp	liance YES NO	
Documents Received:	(Originals Verified) Self Certified (Attest	ted) True Copies	
Identity Verification:	Done		
Saving Bank account no	r opening NPS account have been fully comp Basic Savings Bank Deposit Account'	is an existing customer of the Bank having fully operabranch and KYC norms required for opening Bank According with. We further confirm that the S. B. a/c of Sh/Smt/k	Cum
		Name:	
		Designation: Place:	
POP-SP Seal	Signature of Authorized Signatory	Date / /	
Received by Received at	[To be filled by CRA - Facilitation CRA-FC Regist		
	CRA-FC Regist	ration Number	
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Received at \ Acknowledgement Number (by CRA-FC	CRA-FC Regist	ration Number Date / /	
Received at Acknowledgement Number (by CRA-FO PRAN Alloted Name of the Subscriber:	CRA-FC Regist	ration Number Date / /	
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INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

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.

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.

Name and in applicant mentioned on the form, should match with the documentary proof submitted.

Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.

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Identity.

Correspondence & Permanent address

details

Politically Exposed

Person Subscriber's Bank

Details

Subscriber's Nomination Details

Pension Fund (PF)

Selection and Investment Option

Declaration by Subscriber

Declaration by

subscriber on FATCA

Compliance

2 2.3 & 4

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(d)

(p)

This Form is applicable to Resident Indians and there is a separate Form for Non Resident Indians.

Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIQ) 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. S. No Item Item Details No. Personal Details If married, spouse name is mandatory. Father's name is mandatory.
If father's name has more than 30 digits, you may fill Annexure II for the same. Spouse Name

Father's Name

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

Job cards issued by NREGA duly signed by an officer of the

state Government 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.

Ex-Service Man Card issued by Ministry of Defence to their

Proof of Address (Copy of any one)
Passport issued by Government of India Proof of Identity (Copy of any one)
Passport issued by Government of India. Ration card with photograph and residential address Bank Pass book or certificate with photograph and residential Ration card with photograph, 2 3

Bank Pass book or certificate with Photograph. address Certificate of the POP bank for an existing Bank customer. Voters Identity card with photograph and residential address Certificate of the POP bank for an existing Bank customer, 4

Valid Driving license with photograph and residential address Voters Identity card with photograph and residential address. Valid Driving license with photograph

Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsilder, Mandal Revenue Officer, Judicial Magistrate etc. Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly

Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly PAN Card issued by Income tax department Aadhar Card / letter issued by Unique Identification Authority

Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address

Job cards issued by NREGA duly signed by an officer of the State Government

The identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statuary/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions for

their employees. Latest Electricity/water bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)

Photo. Identity Card issued by Defence, Paramilitary and Police department's Latest Telephone bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)

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)

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employees.

Photo Credit card

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, opening form, the document may be accepted as a valid proof differs from the current address mentioned in the account opening (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.

§ Permanent address are different, then proof for both have to be submitted.

§ Permanent address are different, then proof for both have to be submitted.

§ Permanent address are different, then proof for both have to be submitted.

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§ Permanent address are different, then proof for both have to be submitted.

§ Permanent address are different, then proof for both have to be submitted.

§ Permanent address are different submitted within a period of 30 days after generation of PRAN. (Only for Government Subscribers)

Finance of the proof for both have to be submitted.

§ Permanent address are different, then proof for both have to be submitted.

§ Permanent address are different proof for both have to be submitted.

§ Permanent address are different proof for both have to be submitted.

§ Permanent address mentions and the account of both have to be submitted.

§ Permanent address are different proof different proo

For Tier I & Tier II, bank details are mandatory and it should be supported by cancelled cheque. Please attach a Cancelled cheque (containing Subscriber Name, Bank Account Number and IFS code, for direct cubscriber 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.

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 hominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected. For more details on 'Investment Option', you may visit CRA website.

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.

invested by default PFs as per the guidelines issued by the Government.

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.

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 purposes in USA.

Jurisdiction(s) of Tax Residence; Since US taxes the global that has not been issued by the jurisdiction. However, if the said jurisdiction has 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. Examples issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples issued a high integrity number with an equivalent level of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and that type of number (PAN) to be provided as Tax Identification to the provided as Tax Identification in the provided in

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.
Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
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

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 Subscribers. Please tick the respective block which is applicable.) (Last Name) 1) Subscriber's Name * (Middle Name) (First Name) II) PRAN (Permanent Retirement Account Number) *: III) Existing PRAN association (Refer Instruction No. I) Corporate Sector All Citizens of India (UOS) State Government a) Sector: * Central Government DDO / CBO / POP-SP Name: *_ b) DDO / CBO / POP-SP Reg. No: * IV) Target PRAN association (Refer Instruction No. II) Corporate Sector All Citizens of India (UOS) State Government a) Sector: * Central Government DDO / CBO / POP-SP Name: *_ b) DDO / CBO / POP-SP Reg. No: *_ V) PAN I hereby authorize CRA registered with Pension Fund Regulatory and Development Authority (PFRDA) to use my Aadhaar details for National Pension System (NPS) and authenticate my I nereny aumorize CRA registerea with Pension ruma regulatory and Development Aumority (PPRDA) to use my Adamaar aetails for reamonal rension system (PPS) and aumenticate my identify through the Andhaar Authentication system (Aadhaar based e-KYC services of UIDAI) in accordance with the provisions of the Aadhaar (Targeted Delivery of Financial and identify through the Aadhaar Authentication system (Aadhaar based e-KYC services of UIDAI) in accordance with the provisions of the Aadhaar (Targeted Delivery of Financial and other Substitutes and Services) Act, 2016 and the allied rules and regulations notified thereunder. I understand that the Aadhaar details (physical and or digital, as the case other Substitutes and Services) Act, 2016 and the allied rules and regulations notified thereunder. I understand that the Aadhaar details (physical and or digital, as the case other Substitutes). unter sunstates, penegus and services) Act, 2010 and the attent rules and regulations notified inervalues. I understand that the Adamaer details (physical and / or digital, as the case maybe) submitted for availing services under NPS will be maintained in NPS till the time the account is not inactive in NPS or the timeframe decided by PFRDA, the regulator of NPS, mayor, summared for availing services under (v) 8 will be maintained in (v) 8 has the after the purpose of Andhaar based authentication is ensured by CRA registered with whichever is later. I understand that Security and confidentiality of personal identity data provided, for the purpose of Andhaar based authentication is ensured by CRA registered with PFRDA till such time it is acting as CRA for my NPS account. VII) 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.) (Last Name) (Middle Name) Nominee's Name: (First Name) Date of Birth (In Case of Minor): D D M M Y Y Y Relationship with the Nominee: Nominee's Guardian Details (in case of a minor) (Last Name) (Middle Name) (First Name) Section B - Additional information for Subscribers shifting to Government Sector (All Details are Mandatory) [Subscriber's Employment Details to be filled and attested by DDO. Please refer to Instruction No. IX & X] (dd/mm/yyyy) b) Date of Retirement: (dd/mm/yyyy) a) Date of Joining: c) Group of the Employee: A d) Office: e) Department: f) Ministry: g) Basic Salary: h) Pay Scale: after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the employment details are as per employee records available with the Department Rubber Stamp of the DDO Signature of the Authorised Person ____ Name of the DDO_ Designation of the Authorised Person _____ Department / Ministry_

Section C - Additional information for Subscribers shifting to All Citizens of India (UOS) & Corporate Sector

1. Subsc	
	riber 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 S	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 S	Subscriber is shifting from Government Sector, please submit Subscriber Scheme Preference details on Page 4.
	C details* (Applicable only if Subscriber is shifting from Government Sector. Refer Instruction No. XII)
	KYC document accepted for Identify Proof:
b)	KYC document accepted for Address Proof;
c)	Document accepted for Date of birth proof:
	Existing Bank Customer: I/we hereby certify/confirm that Shri/Smt/Kum at
III. Er	nployment Details* (Applicable if Subscriber is shifting to Corporate Sector. To be verified by the Corporate Office of the Subscriber.)
	b) Date of Retirement*:
a) Date	of Joining*
	D D M M Y Y Y Y d) CHO Reg No*:
c) Emp	oloyee ID*
0 1 /	that the above declaration has been signed before me by she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the employment e as per employee records available with the Corporate.
	e of the Authorised Person
Designat	ion of the Authorised Person
	Delegation (Applies to Subscribers across all sectors):
I agree request)	Declaration (Applies to Subscribers across all sectors): to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / sking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector.
request) Underta	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / aking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signeture/Left Thumb impression of Subscriber*
request) Underta	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / sking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber*
Underta Date	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / taking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber* For Office use only (To be filled up by the officer accepting the form)
Date	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / aking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber* For Office use only (To be filled up by the officer accepting the form) Nodal Office Registration Number:
Date Received	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / taking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber* For Office use only (To be filled up by the officer accepting the form) Nodal Office Registration Number: Date: Time Stamp Time stamp
DateReceived	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / aking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber* For Office use only (To be filled up by the officer accepting the form) Nodal Office Registration Number:
Date Receive Receive Details	to be bound by the terms and conditions for the target sector (in which my PRAN will belong after processing of this Intersector Shifting and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration / taking being signed. Further, I agree to pay all the necessary charges, as applicable, of the target sector. Signature/Left Thumb impression of Subscriber* For Office use only (To be filled up by the officer accepting the form) Nodal Office Registration Number: Date:

- 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. Active choice Under Active choice, Subscribers have an option to choose a fund manager and provide the ratio in which his / her funds are to be invested among asset classes.
 - a) PFM selection is mandatory. The form shall be rejected if a PFM is not opted for.
 - b) Allocation under Equity (E) cannot exceed 50.
 - c) A Subscriber opting for active choice may select the available asset classes ("E", "C", "G", & "A"). However, the sum of percentage allocation across all the selected asset classes must equal 100. If the sum of percentage allocations is not equal to 100%, or the asset allocation table is left blank, the application shall be rejected.
- VIII. Auto choice Under Auto choice investment will be made in a lifecycle fund in the schemes of PFM chosen by Subscriber.
 - a) A Subscriber opting for Auto Choice must also select a PFM. The form shall be rejected if a PFM is not opted for.
 - b) In case both investment option and the asset allocation table are left blank, the Subscriber's funds will be invested as per Auto Choice.
 - For more details on investment options and asset classes, please refer to the scheme information available on CRA website (www.npscra.nsdl.co.in).
- IX. 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.
- X. 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.
- XI. 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).

XII. 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 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	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 Gazette officer like District Magistrate, Divisional commissioner, BDC 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 Indiclearly 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, statuary/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAl, ICWAl, ICSI, Bar Council etc.	11	The identity card/document with address, issued by any of the following: Central/State Government and its Department Statuary/Regulatory Authorities, Public Sector Undertaking Scheduled Commercial Banks, Public Financial Institutions for the employees.
12	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)
		15	Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation)

Page 4	
1 age 4	
31	
If be summarily rejected).	
ctions will be ignored and	
asset classes must be equal	
or does not equal 100%, the uity and related instruments;	
ts; Asset class G-Government Alternative Investment Funds	
IFs, Invits etc	
n In case, you do not	

Form-ISS (Ver 1.1)

I SUBSCRIBER SCHEN	ME PREFERENCE:
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(i), PENSION FUND SELECTION - TI	IER I (Select only one P	FM)
----------------------------------	--------------------------	-----

PFM Name (in alphabetical order)	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		
Reliance Capital Pension Fund Limited		
SBI Pension Funds Private Limited		
UTI Retirement Solutions Limited	CONTA your application form	shall be summarily rejected
UTI Retirement Solutions Limited tion of PFM is mandatory both in Active and Auto Choice. In case you do not in NVESTMENT OPTION (Please Tick ($$) in the box given below shows active Choice Auto Choice	ing your investment option).	

Please note:

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

(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 (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	10	Note: 1. The total allocation across E, C, G and A asset classes must be equal 100%. In case, the allocation is left blank and/or does not equal 100%, application shall be rejected. 2. Asset class E-Equity and related instrument Asset class C-Corporate debt and related instruments; Asset class A-Alternative Investment Fu Bonds and related instruments; Asset Class A-Alternative Investment Fu
Specify %						Bonds and related instruments, Asset including instruments like CMBS, MBS, REITS, AIFs, Invits etc

(iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option. In indicate a choice of LC, your funds will be invested as per LC 50.)

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

N N	
Signature/Thumb Impres	sion* of Subscriber in black in and RTI in case of females)

Date:	Place:		
Name of Subscriber			

ADDITIONAL NOMINATION FORM

ADDITIONAL NOMINATION TO SEE	
The details of nominees to whom the outstanding pension wealth of the Subscriber is payable in proceeds are withdrawn is to be provided hereunder (Please refer instruction no: VI). Also, pleaster opting for deferred withdrawal, all the outstanding pension wealth present in the NPS are receiving the request and paid to the nominees as mentioned in this form and the same we	case of the demise of the Subscriber before entire ease note that in case of demise of the Subscriber
receiving the request and paid to the	
obligation. I. PRAN account under National Individual research of my family to receive the amount in my PRAN account under National Individual research of my family to receive the amount in my PRAN account under National	hereby nominate the person(s) mentioned below all Pension System in the event of my death.

		hereby nominate the person(s) mentioned below
to 12/ of my family to receive t	he amount in my PRAN account under	National Pension System in the event of my death.
is/are member(s)/ of my failing to receive		
ame of the Nominee*:		3rd Nominee
st Nominee	2nd Nominee First Name	First Name
t Name	First Name	Middle Name
	Middle Name	
Idle Name		Last Name
t Name	Last Name	
Present Communication address of the N	ominees^:	Address of 3rd nominee
	Address of 2nd Nominee	Address of 5td Holland
Address of 1st Nominee		
A	_	
		FI
. Date of Birth* (Only in case of a minor. I	n DD/MM/YYYY):	
. Date of Birth* (Only in case of a nimor.		3rd Nominee://
st Nominee:/	2nd Nominee://	
		×
	2nd Nominee	3rd Nominee
4. Relationship with the Nominee*:	2nd Nominee	3rd Nominee
4. Relationship with the Nominee*:	2nd Nominee	3rd Nominee
I. Relationship with the Nominée*: 1st Nominee	2nd Nominee	%
4. Relationship with the Nominée*: 1st Nominee 5. Percentage Share*:		
4. Relationship with the Nominée*: 1st Nominee 5. Percentage Share*:	2nd Nominee 2nd Nominee	% 3rd Nominee%
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*:	2nd Nominee	% 3rd Nominee%
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee%	2nd Nominee case of a minor): 2nd Nominee's Guardian De	% 3rd Nominee%
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details	2nd Nominee	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details	2nd Nominee case of a minor): 2nd Nominee's Guardian De	% 3rd Nominee% 3rd Nominee's Guardian Details
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name Last Name
4. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name Last Name
1. Relationship with the Nominee*: 1st Nominee 5. Percentage Share*: 1st Nominee% 6. Nominee's Guardian Details (Only in 1st Nominee's Guardian Details First Name Middle Name	2nd Nominee case of a minor): 2nd Nominee's Guardian De First Name Middle Name	% 3rd Nominee% tails 3rd Nominee's Guardian Details First Name Middle Name

Rubber Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO Signature of the Authorised Person