CSRF-P

NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM - Private Sector					
How did you hear about N	Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.) Friend / family Social media News paper / magazines TV / Radio Financial advisor / apps Employee				
	i PRAN Card (plaase tick(\/\) ii Account Opening Kit (plaase tick (\/\)				
PRAN Card & Kit* (refer sl no. 1 of instructions)	ePRAN Card Physical PRAN Card Through Email Physical Kit (Courier / post)				
Drint my DRAN in Hindi	Paste				
Print my PRAN in Hindi					
Please select your category	Corporate All Citizen photograph (3.5 cm × 2.5 cm size)				
To, National Pension System Tru	Do not sign across				
Dear Sir/Madam,	Do not stapple / clip				
	ccount be opened in my name as per the particulars given below: lease fill the form in English and BLOCK letters (Refer general guidelines at instructions page.)				
CKYC Identifier	RA Code U T I P F L P A 5 0 1 2				
1. PERSONAL DETAIL	: (Refer Sr. No. 1 of the instructions) Use Annexure II if name exceeds the space provided belo				
Salutation*	Shri Smt. Kumari				
Applicant Name*	F i r s t L a s t				
Father's Name	First IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				
Mother's Name	F i r s t M i d d l e L a s t l				
Either Father's or Mo	er's name is mandatory* Select the name to appear on PRAN Card Father's name Mother's Name				
Date of Birth*	d d m m y y y y				
Place of Birth*					
Country of Birth*					
Gender*	Male Female Transgender Nationality*				
Marital Status*	Unmarried Married Widow/Widower Divorcee				
Spouse Name* (if ma	ied) First Middle Last				
PAN*	or Form 60 furnished Submission of PAN or Form 60 is mandatory				
Annual Income Rang					
Occupation Details*	Public Sector Professional Self Employed Homemaker Others				
Please Tick if Applica					
2. PROOF OF IDENTIT	AND ADDRESS* (Refer Sr. No. 2 of the instructions)				
Passport	Passport Expiry Date d d m y y y y				
Driving License	Driving License Expiry Date d d m y y y y				
Voter ID Card	Proof of possession of Aadhaar Provide last four digits				
NREGA Job Card	PoP Certificat				
National Population R	pister (refer section 12				
3 CURRENT ADDRE	DETAILS* (Proof to be submitted)				
Line 1					
Line 2					
District	State/U.T.				
Country	PIN Code				
4. CONTACT DETAILS					
Mobile*	9 1 Telephone with STD code				
Email ID*					
	to be submitted - Refer Sr. No. 3 of the instructions)				
Account Type	Saving A/c Current A/c				
Bank A/c Number					
Bank Name	IFS Code				
6. NOMINATION DETA	S* (Refer Sr. No. 4 of the instructions)				
	e in favor of one or more persons belonging to his/her family. For nominating more than one person, submit Annexure III				
B. A fresh nomination shall be made by the subscriber on his/her marriage.					
	ails, please refer Nomination relationship matrix provided on instructions page.				
Nominee Name	F i r s t M i d d l e L a s t				
Relationship	Age Date of Birth (In case of Minor) d d / m / y y y y				
Name of Guardian	F i r s t M i d d l e L a s t				
(if nominee is a minor)					

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7. SELECTION OF PENSION FUND		CHOICE* (Refer Sr	no 5 of the instru	uctions)			
1. The maximum permitted Equity Investme	nt is 75% of the total asset a	allocation.		,			
2. All Citizen : Selection of one PF is manda	, ,			unds will be invested in Auto	Choice (LC 50).		
· · · · · · · · · · · · · · · · · · ·	3. Corporate Model : The PF / Investment Choice may be exercised in consultation with your Employer. Pension Fund* (Please Tick (√) one) Investment Choice (Please Tick (√) one)						
Aditya Birla Sunlife Pension Mgmt Ltd		d Management Limited	Bala	nced Life Cycle Fund (BLC)			
DSP Pension Fund Managers Private L				OR			
		Ū.	Active	e Choice mention the % sh	are in applicable asset class below		
ICICI Prudential Pension Funds Mgmt Co I			E (upto 75%)	C (Upto 100%) G (Upto 100%)			
LIC Pension Fund Limited	Max Life Pension	-	% Equity	% Corp Bonds % Govt. See OR	c. % Alt. Assets 100%		
SBI Pension Funds Private Limited	TATA Pension Man	agement Private Limited	Auto	Choice Select one life cy	cle fund below		
UTI Pension Fund Limited			Conservative (L	C25) Moderate (LC50)	Aggressive (LC75)		
8. Activate my Tier-II account (pleas	e tick ($$) to activate) -	(Refer Sr. no. 7 of instr	uctions)		Providing PAN is mandatory		
With the same bank, nominee & invest	.,	• 	,	nt details as per Annexure IV	,		
9 EATCA* (Foreign Account Tox Co	malianaa Aat) & CBS D		r Orna Cafthai	notry offens);			
9. FATCA* (Foreign Account Tax Con	. ,	I am a tax resident		,			
US Person Yes No.	sident of any other country		or the country/ie.	s mentioned below			
Particulars		Country (1)	Country (2)	Country (3)		
Country/countries of Tax Residency			,		· · · · · · · · · · · · · · · · · · ·		
Address in the jurisdiction for Tax	Address Line 1 City/Town/Village	 					
Residence	State ZIP/Post Code						
Tax Identification Number (TIN)/Functional equivale							
TIN/ Functional equivalent Number Issuing Country Validity of documentary evidence provided (Wherev	er applicable)	ddmmyyy	/	ddmmyyyy	ddmmyyyy		
I have understood the information requirement of							
hereby confirm that the information provided by n	ne/us on this Form is true, corr	ect, and complete and h	ereby accept the s		/ Thumb Impression* of Applicant		
				Signature	(refer instructions)		
10. DECLARATION BY APPLICANT*	(Refer Sr no. 7 of the instru	ctions)					
I have read and understood the terms and co	ndition sof the National Pen	sion System. The inform	ation and docume	ents			
furnished by me are true and correct, to the best informed to CRA / NPS Trust. I do not hold any submission of any false or incorrect information	t of my knowledge. Any chang pre-existing account under N	ges in the information fur NPS. I understand that I	nished by me shal shall be fully liable	l be e for			
submission of any false or incorrect information Declaration under the Prevention of Money L							
I here by declare that the contribution paid by me	e/on my behalf has been deriv	ed from legally declared	and assessed sour	rces			
of income. I understand that NPS Trust has the government authorities. I further agree that NF provisions of any law relating to prevention of m	PS Trust has the right to close oney laundering	e my PRAN in case I a	im found violating		nb Impression* of Applicant		
Date: d d m m v v v v	Place:			-	s and RTI in case of females to be		
				provided. Toe in	npression in case no hands)		
11. DECLARATION BY EMPLOYER (All Details are Mandator	y)					
Date of Retirement	m m y y y y						
Employee Code/ID			Non-r	mandatory if not available			
CHO Registration Number			CBO	Registration Number			
It is certified that provided above are as per the service record of					the address and employment details		
us and got confirmed by him/her.							
Name of the Authorised Person							
Designation of the Authorised Person							
Date	d d m m y y	уу	0	nature of Authorised person	Rubber stamp of the Employer		
Place			Sigr	ature of Authonised person	Rubber stamp of the Employer		
12. TO BE FILLED BY POP							
Receipt No. (17 digits)							
POP Registration Number	POP-	SP Registration Number	er l				
			I				
Documents Received.							
Existing Customer: I/ we hereby certify/confirm that Shri/Smt/Kumaccount (specify nature of the account) having account number/client IDmaintained at							
branch/of	fice. The KYC documents	available with us for th	is customer/clien	t matches the requirement for	or opening NPS account and are in		
compliance with PMLA Rules. I/We further con Account (applicable in case of Bank PoP)	ninn mai me Saviriys Bark				S HOL & DASIC SAVILIYS BALIK DEPOSI		
Name of the Authorised Person							
Designation of the Authorised Person							
Date	d d m m	у у у	У	nature of Antheorem	Dubbas stars (10) - D		
Place			Sig	nature of Authorised person	Rubber stamp of the Pop		
			MENT				
Name of the Subscriber		ACKNOWLEDGE	MENT				
Name of the Subscriber	a b b	ACKNOWLEDGE					
Application Receipt Date:	d d m m	ACKNOWLEDGE	MENT				
		ACKNOWLEDGE	MENT	Storm and Si	gnature of PoP		

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Instructions for filling the subscriber registration form

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Gen	eral qui	idelines				instructions for fin	ing the sub	scriber registration		
(a)	Please	e fill in legi							licant. Applications incomplete in any aspec	
(b)	 fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected. (b) Copies of documents submitted by the applicant should be self-attested. 									
(C)	c) Applicant is advised to retain the acknowledgement slip signed / stamped by the PoP/PoP-SP office.									
SI	Item No	Item E	Details	Instructions						
				In	In case a subscriber opts not to have a physical PRAN Card or Welcome Kit, reduced account opening charges of CRA are applicable as under :					
.		Option fo	r PRAN	Account	opening with	n Physical PRAN card in (Rs.)	Account oper Welcome kit in hardo	ning with ePRAN card (in Rs.) opy eWelcome kit (Email)	
1	1	Card and	l kit			₹ 40.00		₹ 35.00	₹ 18.00	
					case, subscriber has not selected any option (for PRAN card & kit) and Email ID is provided, ePRAN & eWelcome kit will be sent. If Email ID is t provided, physical PRAN kit will be sent.					
		Fathers I	Name,	(a) If the	name has m	ore than 30 digits, fill Annexu				
		Mother's Politically		. ,					cument to support the status to be submitted. ninent public functions such as heads of state	or of the government
		Exposed	Person	senior po	oliticians, sen	ior government, judicial or m	ilitary officials,	senior executives of state-	owned corporations, important political party	officials.
2	2	Proof of and Addr		If the app copy.	olicant is sub	mitting Aadhaar as proof of lo	dentity and Add	ress, the first 8 digits of th	e Aadhaar number should be redacted / mas	ked on the submitted
3	3	Current A	ddress	Providing					rrent address as provided in the form.	
4	5	Bank De	tails			count, bank details and docur er from Bank containing appl			mit a cancelled cheque / copy of bank passb t Number and IFS Code.	ook / bank statement
				(a) If a s	ubscriber ha	s family at the time of makin	g a nomination	, the nomination shall be	in favor of one or more persons belonging	
									omination shall be made by the subscriber up ng a nomination the subscriber has no family	
						person or persons but if the ake a fresh nomination in fav			y, such nomination shall forthwith be deemed	to be invalid and the
5	6	Nominati Details	on	(b) Pleas	e Refer nom	ination relationship matrix pro	ovided below.			
					harried Subso other, 2. Fatl			er / Divorcee Subscriber ried) 2 Son 3 Daughte	er, 4. Mother, 5. Father, 6. Mother in Law (Only for Female and
				3. P	lease specify	the relationship Transgend	ler), 7. Father in	Law (Only for Female and	Transgender), 8. Daughter in Law, 9. Grandso	
		Ortestis							n whole numbers and must be equal to 100. he employer or else may be ignored.	
		Selection of Pensio	n i	(2a) Balar	nced Life Cyc				I age 45 and allocation to Equity and Corpora	te Debt automatically
6	7	Fund (PF	nt	(2b) Active	e Choice - Si	ubscriber can actively decide			e Debt / G-Sec / Alternate assets. ressive choice opted by the subscriber and all	location to oquity and
		Choice		corpo	orate debt au	tomatically reduces from age	35 years to 55	years.		
				 Jurisdi 	ction(s) of Ta	nes on filling details if applica ix Residence : Since US taxe			on(s) outside India: IS citizen of whatever nationality, is also a res	sident for tax purpose
		FATOA	0.00	in USA • Tax ide		umber (TIN) : TIN need not I	be reported if if	has not been issued by t	he jurisdiction. However, if the said jurisdiction	on has issued a high
7	9	FATCA & Declarati		integrit	y number wi	ith an equivalent level of ide	entification (a "	Functional equivalent"), th	he same may be reported. Examples of that ces code/number and resident registration nu	t type of number for
				 In case 	e applicant is	declaring US person status	as 'No' but his	her Country of Birth is U	S, document evidencing Relinquishment of C	
				 İn case 	e applicant is		as 'Yes', provid	e PAN and 'father name' ir	addition to details required under section 9	
8	8	Tier-II ac	tivation						Fier-II Account with Same Bank, Nominee are applicant would be required to submit the A	
		Declarati	on /	mentioni	ng the asset	allocations.			d Right Thumb Impression in case of female s	
9	9 & 10	Signature	e by	in case th	here is no ha		plicant to be pr	ovided. The thumb / toe in	npression should be attested by two persons,	
Ann	licable	CRA Ch				Protean CRA				
		pening Ch	• •		tanteej	Please refer sr. no. 1				
		aintenanc r transacti		s (p.a.)		₹ <u>69</u> ₹ 3.75			s on CRA charges, please refer	
	ingo por	tranoaoti			Nom	ination Relationship Matrix	(Please menti		site (www.npstrust.org.in) ails given below)	
			Marital	Status		Male		Female	Transgender	
			Unmai	ried	1. Mother 2. Father		1. Mother 2. Father		1. Mother 2. Father	
			onna	3. Please specify the relationship if any other person		3. Please specify the relationship if any other person		3. Please specify the relationship if any other person		
				1. Spouse 2. Son		1. Spouse 2. Son		1. Spouse 2. Son		
				3. Daughter 4. Mother			3. Daughter 3. Daughter 4. Mother 4. Mother			
			Marrie	5 Eather		5. Father 6. Mother in Law		5. Father 6. Mother in Law		
				7. Grandson 8. Granddaughter		7. Father in Law 8. Daughter in Law		7. Father in Law 8. Daughter in Law		
				o. orandadgrior		9. Grandson 10. Granddaughter		9. Grandson 10. Granddaughter		
					1. Son				1. Son	
				2. Daughter 3. Mother		2. Daughter 3. Mother		2. Daughter 3. Mother		
			Widow Widow	5. Daughter in Law		4. Father 5. Mother in Law		4. Father 5. Mother in Law		
	- Widow		6. Grandson 7. Granddaughter		6. Father in Law 7. Daughter in Law		6. Father in Law 7. Daughter in Law			
							8. Grandso 9. Grandda	on aughter	8. Grandson 9. Granddaughter	
					1. Son 2. Daugh	ter	1. Son 2. Daughte	r	1. Son 2. Daughter	
					 Mother Father 	ŗ	3. Mother 4. Father		3. Mother 4. Father	
			Divorc	cee 5. Daughter in Law 6. Grandson		5. Mother i 6. Father in		5. Mother in Law 6. Father in Law		
				7. Granddaughter			7. Daughter in Law 8. Grandson		7. Daughter in Law 8. Grandson	
							9. Grandda	aughter	9. Granddaughter	
a) TI	he Subs	scriber can	obtain the	status of	his/her annli	General ication from CRA and respect		for Subscribers esence (PoP).		
b) S	ubscribe	ers are adv	ised to ret	ain the ac		nent slip signed/ stamped by			cation.	
		e: https://v								
	Call: 02	22-4090 42	242		ency (CRA)					
	1.00163	Protean	eGov Tec	hnologies	Limited	oturo Limitod				
		1st Floc	r, Times To	ower, Kan	nala Mills Co	<i>cture Limited)</i> mpound, Senapati Bapat Ma	rg,			
II L		Lower F	Parel (W), I	vlumbai -	400013					

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	kures - Subscriber Registration Form for Pr	rivate Sector a	oplicants (fick and f	ili applicable annexures below)		
Annexure I - हिंदी में	में प्रिंट करने हेतु					
आवेदक का नाम						
मध्यनाम						
उपनाम						
पिता / माता का नाम						
मध्यनाम						
उपनाम						
Annexure II - If ch	naracters of name exceeded the space prov	vided on page '	1 of the application	form		
Applicant's First Name						
Middle Name						
Last Name						
Father's First Name						
Middle Name						
Last Name						
Mother's First Name						
Middle Name						
Last Name						
Annexure III - Addi	itional Nomination For Tier - I	For Tier -	II For both	Tier - I & Tier - II		
Percentage Share	Nominee I Nominee II		Nominee III	Total should be equal	to 100%	
- ω Nominee I - Name	F i r s t	M i d d	I e	L a s t		
Nominee I - Name Relationship Name of Guardian	Ag	je D	ate of Birth (in case	of Minor) D D / M M	/ Y Y Y Y	
Name of Guardian	F i r s t	M i d d	I e	L a s t		
= Nominee II - Name	F i r s t	M i d d	I e	L a s t		
Relationship	Ag	je D	ate of Birth (in case	of Minor) D D / M M	/ Y Y Y Y	
Name of Guardian (if nominee is a minor)	F i r s t	M i d d	Ie	Last		
Relationship	F i r s t	M i d d		L a s t		
Relationship	Ag		ate of Birth (in case	of Minor) D D / M M	/ Y Y Y Y	
Name of Guardian (if nominee is a minor)	F i r s t	M i d d	Ie	Last		
			ile tick and fill as a			
Annexure IV - Act	tivate Tier-II (with Different Bank/Nomination/I		ans - tick and fill as ap	oplicable)		
PAN*	copy of PAN to be attached	d				
No change in Banl	k details Bank details for Tier-II	l are as under:				
Account Type	Saving A/c Current A/c					
Bank A/c Number						
Bank Name			IFC Code			
No change in Nom	ninee details Nominee details for Ti	ier-II are as und	der:			
Nominee - Name		Middl	e	Last		
Relationship	Age		e of Birth (in case of		Y Y Y Y	
Name of Guardian F (if nominee is a minor)	i r s t	Middl	e	Last		
	ate more than one person, fill Annexure III above					
No change in Inv	estments details Investments detail	ls for Tier-II are	as under:			
	Pension Fund* (Please Tick ($$) one)		Inves	tment Choice (Please Tick ($$) one)		
			Balanced Life (Cycle Fund (BLC) OR		
Aditya Birla Sunlife P	Pension Mgmt Ltd Axis Pension Fund Mgmt	t Ltd.	Active Choice	mention the % share in applicable a	asset class below	
DSP Pension Fund Managers Pvt. Ltd HDFC Pension Fund Mgmt. Ltd.			E (upto 100%) C (Upto 100%) G (Upto 100%) A (Upto 5%) Total			
ICICI Prudential Pension Funds Mgmt Co. Ltd. Kotak Mahindra Pension Fund Ltd.			% Equity % Corp	Bonds % Govt. Sec. % Alt. Assets OR	5. 100%	
LIC Pension Fund Ltd. Max Life Pension Fund Mgmt Ltd.			Auto Choice Select one life cycle fund below			
SBI Pension Funds F		nt Pvt. Ltd.	Conservative (LC25)	Moderate (LC50) Aggress	ive (LC75)	
UTI Pension Fund Lt						
Name of the Applicant				Signature / Thumb Impression	n* of Applicant	
Date	D / D/ M/ M/ Y/ Y/ Y/ Y			(refer instructions		
L				·		

Annexure NCIS			To be used for subscribing under NPS					
	National Pension System (NPS)							
		NPS Contribution Instruction Slip (NCIS	5) - All fields marked with *	are mandatory.				
Subscriber Details:	Subscriber Details:							
Subscriber's PRAN*:		/ New App	lication					
Name of the Subscriber	*:							
Are you a Govt. Employee covered under NPS - Yes No (please select, if applicable) (See instructions at Sr. No. 1)								
Payment Details*:								
Che	que/DD No.	Bank Name, Branch & City (mandatory in case of cheque/DD)	Amount to be invested in Tier 1	Amount to be invested in Tier 2	Total Amount to be invested			
Cheque/DD Details								
		·						

Total Amount to be invested (in words): ____

"I hereby declare that I am the bona fide subscriber of NPS and the contribution being paid for this transaction for Tier I or Tier II is from my own Bank account and through my legitimate source of funds."

Instructions:

1. Govt. employees who are mandatorily covered under NPS can contribute voluntarily for Tier 1 [under the applicable sections of IT Act, 1961] and for Tier 2 vide this NCIS. Voluntary contributions under Tier-I qualify for deduction under applicable sections of Income Tax Act, 1961 [please refer relevant provisions and rules].

2. Please quote your 12-digit PRAN allotted by Central Recordkeeping Agency (CRA) also on the reverse of the cheque/DD. In case of new application, please mention "New Application" on the reverse of the cheque/DD.

3. Cheque/DD should be drawn in favor of "UTIPFL Collection Account - NPS - NPS Trust" and crossed A/c payee only. Please ensure sufficient balance is available in the bank account, before submitting the Cheque. Also ensure subscribers name should be pre-printed on the cheque.

4. Copy of PAN should be enclosed in case of cash contribution of Rs. 50,000 and above.

5. Each contribution i.e. contribution under Tier I and Tier II will be treated as a separate transaction and will be charged separately. For details of the charge structure, please refer to the PFRDA offer document at www.pfrda.org.in.

6. Visit <u>www.utipension.com</u> to submit your online contribution and to raise/delete a SIP request.

Signature/Left Thumb Impression of Subscriber

(To be filled by POP/POP-SP)					
Received by:	POP-SP Registration Number:				
Received at:		Date:	Time	e Stamp:	
Receipt Number					
(To be provided by POP-SP)					
Perforation) - NCIS Acknowledgement to the S	ubscriber				
(To be filled by POP/POP-SP)					
POP-SP Registration Number:					
PRAN:					
Name of the Subscriber:	Date://			Time Stamp:	
Cheque/DD Number:	Cheque/DD date:			Drawn on:	
Receipt Number					
(To be provided by POP-SP)					
1. Amount received Tier I: Rs.		2. Amount received Tier II: Rs.			
3. POP Registration Charges (one time): Rs.		4. POP Trar	nsaction Charg	es: Rs.	
5. Service tax (as applicable): Rs.					
6. Amount invested: Rs.	Signature/Sta	amp of POP/PC	DP-SP/Place		
[(1+2)-(3+4+5)]					
 Each contribution i.e. contribution under T structure, please refer to the PFRDA offer 			e transaction	and will be charged separately [for details of the charge	

Voluntary contributions under Tier-I qualify for deduction under applicable sections of Income Tax Act, 1961 [please refer relevant provisions and rules].