## **Declaration Form**



(To be retained by the Employer for future reference)

## **Employees' Provident Fund Organization**

THE EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (PARAGRAPH-34 & 57) &

THE EMPLOYEES' PENSION SCHEME, 1995 (PARAGRAPH-24)

DECLARATION BY A PERSON TAKING UP EMPLOYMENT IN AN ESTABLISHMENT ON WHICH EMPLOYEES' PROVIDENT FUND SCHEME,

1952 AND/OR EMPLOYEES' PENSION SCHEME, 1995 IS APPLICABLE.

(PLEASE GO THROUGH THE INSTRUCTIONS)

1)	NAME	(TITL	E)		MR.		P	A	N	K	A	J		8	I	N	G	H								
		MR.	Ms. I	MRS.																						
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A. PREVIOUS EMPLOYS  0) THE DETAILS OF THE U	MENT DETAI	LS	JUMBER	2 (11AN	I) OR B	PENTON	DE M	-MDE	. ID.				
UAN OR			TOMBE	(071)	I) OK F	LV100.	S F F M	EMBE	(ID:				
PREVIOUS PF MEMI	BER ID	REG	REGION CODE		OFFICE CODE		ESTA	BLISH	MENT ID	EXTENSION	ACCOUNT I	NUMBER	
DATE OF EXIT FOR PRI MEMBER ID (DD/MM	EVIOUS /YYYY)	D	D	М	M	Y	,	Y	Y	Y			
(A) IF SCHEME CERT:     (B) IF PENSION PAYM	FICATE ISSUE	D FOR P	REVIOL	JS EMPL	OYMEN	T, THEN	SCHE	ME CE	RTIFICATE	NUMBER:			
B. OTHER DETAILS			SOLD	OK PKE	1005	EMPLOY	MENI,	THEN	PPO NUM	BER:			
3) INTERNATIONAL WORK (PLEASE TICK)	INTERNATIONAL WORKER			5			No						
IF THE REPLY TO (3	L3) ABOVE I	s yes,	THEN E	NTER	THE DE	TAILS I	N 13(	A), 1	З(в) & 1	.3(c):			
INDIA			THER THAN INDIA (IF YES, PLEASE ENTION NAME OF THE COUNTRY)										
13(B) PASSPORT NUI	MBER												
13(c) PASSPORT VAL	13(c) PASSPORT VALID FROM		D	D M	1 M	Y	Υ.	Υ	Υ				
	То		D I	D M	1 M	Y	Y	Y	Y				
14) EDUCATIONAL QUALIFICATION	ILLITERATI	NON- MATRIC		MA	TRIC		NIOR NDARY	Gi	RADUATE	Post Graduati	DOCTOR	TECHNICAL/ PROFESSIONA	
(PLEASE TICK)			A						1				
15) MARITAL STATUS (PLEASE TICK)	MARITAL STATUS MARRI (PLEASE TICK)			ED UNMARRIED			WIDOW/ WIDOWE			ER DIVORCEE			
			v	_									
16) SPECIALLY ABLED (PLEASE TICK)	YES	No					IF	YES, TICK THE CATEGORY					
( 1,00)		1			L	ОСОМС	TIVE		VISUAL	Н	EARING		

17) KYC DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	NUMBER	REMARKS, IF ANY
BANK ACCOUNT-1*			IFSC Cope*
NPR/AADHAAR			
PERMANENT ACCOUNT NUMBER (PAN)			
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD			
ESIC CARD	### ##################################		

<sup>\*</sup> Mandatory Field (Note: Bank Account NUMBER (ALONG WITH IFSC CODE) IS MANDATORY. YOU ARE HOWEVER ADVISED TO PROVIDE ALL KYC DOCUMENTS AVAILABLE WITH YOU IN ADDITION TO MANDATORY KYCS TO AVAIL BETTER SERVICES. SELF-ATTESTED PHOTOCOPIES OF THE DOCUMENTS MUST, BE ATTACHED WITH THIS FORM.

## C. UNDERTAKING:

- A. I CERTIFY THAT ALL THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- B. IN CASE, EARLIER A MEMBER OF EPF SCHEME, 1952 AND/OR EPS, 1995,
  - (I) I HAVE ENSURED THE CORRECTNESS OF MY UAN/ PREVIOUS PF MEMBER ID.
  - (II) THIS MAY ALSO BE TREATED AS MY REQUEST FOR TRANSFER OF FUNDS AND SERVICE DETAILS IF APPLICABLE FROM THE PREVIOUS ACCOUNT AS DECLARED ABOVE TO THE PRESENT P.F. ACCOUNT. (THE TRANSFER WOULD BE POSSIBLE ONLY IF THE IDENTIFIED KYC DETAILS APPROVED BY PREVIOUS EMPLOYER HAS BEEN VERIFIED BY PRESENT EMPLOYER USING HIS DIGITAL SIGNATURE CERTIFICATE).
  - (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

DATE	E: 09/05/2025 CE: GHAZIABAD	Parker
PLAC		SIGNATURE OF MEMBER
	DECLARATION BY PRESENT EMPLOYER	
A	THE MEMBER Mr./Ms./Mrs	SEEN ALLOTTED PF MEMBER ID
B.	IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:	
	• (POST ALLOTMENT OF UAN) THE UAN ALLOTTED FOR THE MEMBER IS	
	PLEASE TICK THE APPROPRIATE OPTION:	
	THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE	
	HAVE NOT BEEN UPLOADED	
	HAVE BEEN UPLOADED BUT NOT APPROVED	
	HAVE BEEN UPLOADED AND APPROVED WITH DSC	
C.	IN CASE THE PERSON WAS EARLIER A MEMBER OF EPF SCHEME, 1952 AND EPS 1995	
	• THE ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A) ABOVE HAS BEEN TACCED IN	WITH HIS/HED LIAN/DREWIOLE
	TO TO TO TO TO THE MEMBER.	THE HIS/HER DAIN/PREVIOUS
	PLEASE TICK THE APPROPRIATE OPTION:-	
	THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE BE SIGNATURE CERTIFICATE AND TRANSFER REQUEST HAS BEEN GENERATED ON PORTAL	
	AS THE DSC OF ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MEMBER	HAS BEEN INFORMED TO FILE

PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT.

DATE: 09 05 2025