## **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 (TITLE)	E D A N T S	A N D E E	P T R I P A	ТНІ							
	Mr. Ms. Mrs.											
	(PLEASE TICK)											
- `	\	D D M M	Y   Y   Y   Y									
2)	) Date of Birth											
	0 2 0 5 2 0 0 3											
3)	3) FATHER'S/ SANDEEPSHRIKANTTRIPATHI											
3)	HUSBAND'S NAME											
4)	) RELATIONSHIP IN RESPECT OF (3) ABO	OVE FATHER	HUSBAND									
')	(PLEASE TICK)	V V	11005/1115									
	(I LEASE TICK)											
5)	) Gender	MALE FE	MALE TRANSGEND	ER								
	(PLEASE TICK) ✓											
6)		2 1	7 4	1 3 2								
	(IF ANY)											
7)	) EMAIL ID (IF ANY)	D A N	Т	Б . Т Б	R I P A							
	ТН	I @ G	M A I	L . (	C O M							
8)	8) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PROVIDENT FUND SCHEME, 1952?											
,	•	SE TICK)	YES	√ NO	]							
9)	9) Whether earlier a member of the Employees' Pension Scheme, 1995?											
,	(PLEAS											
	IF RESPONSE TO ANY OR BOTH O	DF (8) & (9) ABOVE IS	YES S YES, THEN MANDATO	✓ NO  ORILY FILL UP THE PREV	I /TOUS EMPLOYMENT DETAILS							

/	A.	PREVIOUS	S EMPLOY	MENT DET	AILS											
OR PREVIOUS PF MEMBER ID  REGION CODE  OFFICE CODE  ESTABLISHMENT ID  EXTENSION  ACCOUNT NUMBER  11)  DATE OF EXIT FOR PREVIOUS  MEMBER ID (DD/MM/YYYY)  D  D  M  M  Y  Y  Y  Y  Y  Y  Y  Y  12)  (A) IF SCHEME CERTIFICATE ISSUED FOR PREVIOUS EMPLOYMENT, THEN SCHEME CERTIFICATE NUMBER:  (B) IF PENSION PAYMENT ORDER (PPO) ISSUED FOR PREVIOUS EMPLOYMENT, THEN PPO NUMBER:  B. OTHER DETAILS  13)  INTERNATIONAL WORKER  (PLEASE TICK)  IF THE REPLY TO (13) ABOVE IS YES, THEN ENTER THE DETAILS IN 13(A), 13(B) & 13(C):  13(A) COUNTRY OF ORIGIN (PIESSE TICK)  INDIA  OTHER THAN INDIA (IF YES, PLEASE MENTION NAME OF THE COUNTRY)  13(B) PASSPORT NUMBER  13(C) PASSPORT VALID FROM  D  D  D  M  M  Y  Y  Y  Y  TO  D  D  M  M  Y  Y  Y  Y  TO  D  D  D  M  M  TY  Y  Y  TO  D  D  D  D  D  D  D  D  D  D  D  D  D	10)	THE DETAIL	LS OF THE	JNIVERSAL	Acco	unt <b>N</b> ume	BER (UA	N) or pr	EVIOUS	PF MEM	1BER II	D:				
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11) Date of Exit For Previous Member ID (DD/MM/YYYY)  12) (A) If scheme certificate issued for previous employment, then scheme certificate number: (B) If pension payment order (PPO) issued for previous employment, then PPO number:  8. Other Details  13) International Worker (Please Tick)  IF the reply to (13) above is yes, then enter the details in 13(a), 13(b) & 13(c):  13(a) Country of origin (Please Tick)  13(b) Passport number  13(c) Passport valid from  D D M M Y Y Y Y  To  D D M M Y Y Y Y  TO  D D M M Y Y Y Y  TO  D D M M Y Y Y Y  TO  D D M M Y Y Y Y  TO  D D M M								1		ı				1		
MEMBER ID (DD/MM/YYYY)		PREVIOUS PF MEMBER ID			REGION CODE OFF		OFFICE	ICE CODE ESTABLISHMI		MENT ID EXTENSION		ACCOUNT NUMBER		MBER		
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		(PLEASE TICK)				<b>'</b>			LOCOMOTIVE			VISUAL		HEARING		

## 17) KYC DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	Number	REMARKS, IF ANY
BANK ACCOUNT-1*	Vedant Sandeep Tripathi	3410908527	CBIN0283773
NPR/AADHAAR	Vedant Sandeep Tripathi	367760472346	
PERMANENT ACCOUNT NUMBER (PAN)	Vedant Sandeep Tripathi	CBLPT2474F	
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD			
ESIC CARD			

<sup>\*</sup> Mandatory Field (<u>Note</u>: 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).
  - (I) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

DATE: 15/01/2025

PLACE:

SIGNATURE OF MEMBER

DECLARATION BY PRESENT EMPLOYER

DECLARATION BY PRESENT EMPLOYER

- B. IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:

  - 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 TAGGED WITH HIS/HER UAN/PREVIOUS MEMBER ID AS DECLARED BY MEMBER.
  - PLEASE TICK THE APPROPRIATE OPTION:-
    - THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE BEEN APPROVED WITH DIGITAL 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: 15/01/2025 SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT