**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' PRODUCTION OF THE PROPERTY OF THE PROPERT	VIDENT FUND SCHEME,
THE CONTRACTOR OF THE COMMENT IN AN ESTABLISHMENT ON WHICH EMPLOYEES PRO	VIDENT
1952 AND/OR EMPLOYEES' PENSION SCHEME, 1995 IS APPLICABLE.	
(PLEASE GO THROUGH THE INSTRUCTIONS)	
(I LENGE OF	

(PLEASE GO THROUGH THE INSTRUCTIONS)							
1) NAME (TITLE)  MR. MS. MRS.  (PLEASE TICK)  ANIKET VITHOBA PATIL							
2) DATE OF BIRTH  D D M M Y Y Y Y Y Y Y 2 7 7 7 7 7 7 7 7 7 7 7 7							
3) FATHER'S/ HUSBAND'S NAME  WR. VITHOBA MAYA PATIL							
4) RELATIONSHIP IN RESPECT OF (3) ABOVE FATHER HUSBAND  (PLEASE TICK)							
5) GENDER (PLEASE TICK)  MALE FEMALE TRANSGENDER							
6) MOBILE NUMBER 7 0 6 6 7 0 2 6 0 9							
7) EMAIL ID (IF ANY) a n i k e t 2 7 7 1 9 9 7 @ g m a i 1 . ( 0 m )							
8) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PROVIDENT FUND SCHEME, 1952?							
8) WHETHER EARLIER A MEMBER OF THE LIFE COLORS (PLEASE TICK) YES NO							
(PLEASE TICK)							
9) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PENSION SCHEME, 1995?  (DUE SASE TICK)  YES  NO							
(PLEASE TICK)  YES  (PLEASE TICK)  YES  IF RESPONSE TO ANY OR BOTH OF (8) & (9) ABOVE IS YES, THEN MANDATORILY FILL UP THE PREVIOUS EMPLOYMENT DETAILS							
IF RESPONSE TO ANY OR BOTH OF (8) & (9) ABOVE IS 125, 1155  AT (10,11&12):  Page 1 of 3							

A PREV	TOUS EMPLOYM	ENT DETAILS				10000	1000000	100					
	TAILS OF THE UN		UNT NUMB	ER (UAN)	OR PREVIO	ous P	F MEMB	ER ID	:				
UAN		S. (2) (1) (2)	1/68			12011							
OR												OUNT NUMB	ico I
PREV	TOUS PF MEMB	ER ID	REGION	CODE C	OFFICE COL	E	ESTABLE	SHME	NT ID	EXTENSIO	ACC	OUNT NOWE	
						1							
11) DATE	OF EXIT FOR PRE	vious D	D	М	M	Y	Y	100	Y	Y			
MEME	BER ID (DD/MM/	YYYY)					A						
							1	1					
12) (A)	IF SCHEME CERTI	FICATE ISSUED	FOR PREVI	OUS EMPL	OYMENT, T	HEN!	SCHEME	CERT.	IFICATE	NUMBER:_	1		
(B)	IF PENSION PAYM	ENT ORDER (PF	O) ISSUE	D FOR PRE	VIOUS EMP	LOYM	ENI, IF	HEN FI	O NON	DLN.			
В. Отн	ER DETAILS					SILE							
13) INTE	RNATIONAL WORK	ED [		YES A	A STATE OF THE STA	1	No						
	ASE TICK)						4						
Ten	THE REPLY TO (1	3) AROVE IS	VES THE	N FNTER	THE DETA	LSI	13(A	), 13	(B) &	13(c):			
13(	A) COUNTRY OF	ORIGIN (Please	e Tick)	NO BOOK		- 60			400				
	INDIA				IF YES, PLE HE COUNTE								
	A CONTRACTOR	THE PERSON	ILIVITORY	ANE OF T	L COOM								
		439											
13(	B) PASSPORT NUM	ABER		The same		<b>100</b>							
13(	c) PASSPORT VAL	ID FROM	D	DI	1 M	Y	Y	Y	Y				
				4			M						
								V	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
		То	D	DI	M	Y	Y	Y	Y				
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14) EDUC	IFICATION	ILLITERATE	MATR	141	ATRIC	SECO	ONDARY	G	RADUAT	GRAI	DUATE	DUCTOR	PROFESSIONAL
200	SE TICK)				9		-		THE ST			MERCE-N	
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15) MARI	TAL STATUS ASE TICK)	MARRIED		WHANTEL	1111		111001						
(, co							*6						
16) 5050	TALLY ADLED	YES	No			(19	I	YES	TICK T	HE CATEG	ORY	DO VARIO	THE PARTY
100-100-100	IALLY ABLED	113	1,0			1.00						101110	
(PLEA	SE TICK)		MARIE .		L	DCOM	OTIVE		VISU	AL	HE	ARING	
				1112 1112 111	1000					1000			THE RESERVE TO SECOND

17) KYC DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	Number	REMARKS, IF ANY
BANK ACCOUNT-1*	TO THE POCCHIENT	NUMBER	TESCOME
NPR/AADHAAR			
PERMANENT ACCOUNT NUMBER (PAN)			
PASSPORT			EXPLOY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD	100		
RATION CARD	1		
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).

(1	II) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER	FURTHER
DATE:	28/03/2027 : New Mumbeu	SIGNATURE OF MEMBER
PLACE	DECLADATION BY PRESENT EMPLOTES	
A.	THE MEMBER Mr./Ms./Mrs HAS JOINED ON AND HAS BE	EEN ALLOTTED PF MEMBER ID
В.	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 TAGGED MEMBER ID AS DECLARED BY MEMBER.	WITH HIS/HER UAN/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 PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLE.	AL. R HAS BEEN INFORMED TO FILE

DATE:

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT

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