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)

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6)	MOBILE (IF ANY)	Number)	8	4	,	4		5		3		6		7		4		1,20	9						
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8)	WHETI	HER EARLIER	A MEMBER	OF TH	IE EM	IPLOY	EES' P	ROVI	DEN	T Fu	ND S	SCH	EME,	195	52?					wy					
(PLEASE TICK)					YES						NO														
9)	WHETH	HER EARLIER	A MEMBER	OF TH	E EM	IPLOY	EES' P	ENSI	ON S	SCHE	ME,	199	5?		7										
				PLEASE						YE							No					n. ~	v. 4	T D-	
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IF RESPONSE TO ANY OR BOTH OF (8) & (9) ABOVE IS YES, THEN MANDATORILY FILL UP THE PREVIOUS EMPLOYMENT DETAIL AT (10,11&12):

Page 1 of 3

A. PREVIOUS EMPLO	YMENT DETAI	ILS					n politica pres	Carlon Andrews					
10) THE DETAILS OF THE	UNIVERSAL AC	COUNT I	NUMBER	R (UAN	I) OR PI	REVIOU	S PF M	1EMBE	R ID:		MIZ (46) Subject and Mich		
UAN]
OR Previous PF M e	MBER ID	REG	ion Co	DDE	OFFICE	CODE	Est	ABLISH	IMENT ID	Ехте	NSION	Account 1	Number
11) DATE OF EXIT FOR F MEMBER ID (DD/M		D	D	М	М	Y	'	Y	Y	Y			
12) (A) IF SCHEME CEF (B) IF PENSION PA	RTIFICATE ISSUE	ED FOR PI	REVIOU	s empl or pre	OYMEN	T, THEN	SCHE	ME CE	RTIFICATI	E NUMBI] ER:		
B. OTHER DETAILS								n Anne propi					
13) INTERNATIONAL WO (PLEASE TICK)	RKER		YES				No /						The last grant and an artist and a second
IF THE REPLY TO 13(A) COUNTRY OF INDIA	FORIGIN (Plea	S YES, T ase Tick OTHER MENTIO	than II	NDIA (I	F YES,	PLEASE	N 13((A), 1	.13(в) &	13(c):			
13(B) PASSPORT N			D C) M	M	Y	Υ	Υ	Y				ų.
	То		D D	M	M	Y	Y	Υ	Y				
				5. N. W. A.									
14) EDUCATIONAL QUALIFICATION	ILLITERATE	- 1	ON- TRIC	Мат	RIC	SEN SECON		Gi	RADUATE		OST DUATE	DOCTOR	TECHNICA PROFESSIO
(PLEASE TICK)				249	2.	-		L					
15) MARITAL STATUS (PLEASE TICK)	MARRIE		Unmar	RIED	Wit	oow/ W	/IDOW	/ER	Divorc	EE ,	Ten je		a = = = . " = .
16) SPECIALLY ABLED	YES	No)				IF	YES,	TICK THE	CATEGO	DRY	£	
(PLEASE TICK)	y = y	~	^ -[Lo	СОМОТ	TVE		VISUAL		HEA	ARING	

17) KYC DETAILS

DATE:

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	Number	REMARKS, IF ANY
BANK ACCOUNT-1*	Oinesh Karshyap	4073000 3988	SBIN0005556
NPR/AADHAAR	Dinesh kashyalp	9206 9641 2897	
PERMANENT ACCOUNT NUMBER (PAN)	Dinesh kashyap	KXFP K2316P	
PASSPORT			EVERY DATE
DRIVING LICENCE		·	EXPIRADATE
ELECTION CARD	gi		
RATION CARD	100		
ESIC CARD	Harris Control		

^{*} 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).
 - (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

D	re: 09/06/20 25					Bineel						
PLA	ICE: Agga					SIGNATURE OF MEMBE						
	0	DECL	ARATION BY	PRESENT E	MPLOYER							
Α.	THE MEMBER	Mr./Ms./Mrs	НА	S JOINED ON	AND H	HAS BEEN ALLOTTED PF MEMBER I						
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											
		TICK THE APPROPRIAT										
	THE	KYC DETAILS OF THE ABO	OVE MEMBER IN TH	IE UAN DATABASE								
		HAVE NOT BEEN UPLOA	DED									
		HAVE BEEN UPLOADED I	BUT NOT APPROVE	D								
		HAVE BEEN UPLOADED	AND APPROVED W	ITH DSC								
C.	IN CASE THE P	ERSON WAS EARLIER A ME	MBER OF EPF SC	HEME, 1952 AND E	PS, 1995:							
	THE ABO	VE MEMBER ID OF THE M	MEMBER AS MENT.	ioned in (A) abov	/E HAS BEEN TAGO	GED WITH HIS/HER UAN/PREVIOL						
	MEMBER	ID AS DECLARED BY MEM	BER.									
		TICK THE APPROPRIAT										
				MBER IN THE UA	N DATABASE HAV	E BEEN APPROVED WITH DIGITA						
		SIGNATURE CERTIFICAT	TE AND TRANSFER	REQUEST HAS BEEN	GENERATED ON P	ORTAL.						
				_		EMBER HAS BEEN INFORMED TO FIL						
	- 25°	PHYSICAL CLAIM (FORM										
			,									

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMEN