## 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.

CLARATION BY A PERSON IS	1952 A	MU						II Ibert II		11 000 11	TOWN IN THE A TO		<b>31</b>										
		(Pl	LEAS	SE GC	THR	OU		וורו נו	C 7114			25.00					0	$\neg \tau$			T		
NAME (TITLE)	10	las	De l	D K	2	2	U	N	T		C	M	0	C	A	2	2				-		
MR. Ms. MR	0	100	100	671 15		<b>3</b>														1 2 2 2 3	+		
	-	1													12			13.	100				
(PLEASE TICK)		1_											<u> </u>					e A de					
) DATE OF BIRTH			5	D	MI	M	Y	Y	1	Y	Y	1			1947 1947		P S						
) DAIL OF DIRTH		-	2		0 1		2	. 6	0	0	0		TA TO										
			9	•							T		<del> </del>	Te	TA	1 8	6		T	Т			
3) FATHER'S/ [N	IR.	8	0 6	J		0	2 8	an	0	P	+	Ca 8	1 0	10	2 0	1 1	- 1	-		-			n =
HUSBAND'S NAME L														-	+	-							6 (3/19/2)
															1			0	1				3 4 -
												_							1				
	T 05 (3	) ABO	OVE		FATHER	3			Hus	SBAN	ND										1		0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
4) RELATIONSHIP IN RESPE	1 05 (2	1	18.		The Found						A. Carlotte												
4) RELATIONSHIP IN RESPEC	J1 OF (3				~																		
4) RELATIONSHIP IN RESPEC	.1 OF (3																						
	.1 OF (J					F	FΜΔΙ	F	TT	RAN	SGEND												
(PLEASE TICK)  5) GENDER				MALE		F	EMAL	E	T	RAN	SGEND	ER											
(PLEASE TICK)						F	EMAL	E	T	RAN	SGEND	ER ]											
(PLEASE TICK)  5) GENDER						F	EMAL	E	T	RAN	SGEND	ER T											
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER						F		E 3		RAN			3		2		3						
(PLEASE TICK)  5) GENDER (PLEASE TICK)						F							3		2		3						
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)			3			4						ER S	3	<u>e</u>	2	<b>e</b>	3	3					15
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER				MALE 2		4							3		2	0	3					0	\$ \
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)			3	MALE 2		4							3		2	0	3					<u>a</u> 0	\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)  7) EMAIL ID (IF ANY)	9		3	MALE		4		3	9	2	<u>a</u>	1			2	0	3-1-					<u>a</u> o	
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)	9	ER OF	3 THE	MALE S		4		3 NT F	S	2	<u>a</u>	1				0	- 3 - T					<u>a</u> 0	
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)  7) EMAIL ID (IF ANY)  8) WHETHER EARLIER	A MEMBI	ER OF (PLI	3 THE EASE	MALE TICK)	YEES'I	PRO	VIDE	3 	SUND	2 SCH	HEME,	1				0	3						
(PLEASE TICK)  5) GENDER (PLEASE TICK)  6) MOBILE NUMBER (IF ANY)  7) EMAIL ID (IF ANY)	A MEMBI	ER OF	THE EASE	MALE TICK)	OYEES'	PRO	VIDE	3 VT F	SUND	2 SCH	HEME,	1			o o	0	3						

THE DETAILS OF THE UNIV		T	No. of Concession, Name of Street, or other Desires, Name of Street, or other Desires, Name of Street, Oracle of Street,	The same	) OK	I IXLV	1005	L WEW	IRFK I	D:						100	
OR						Planting Address of the Parket		T			T	- T			7		
PREVIOUS PF MEMBER				and a supplemental state of											1		
A ALMOEK TO		R	EGION Co	ODE	OFFICE CODE		DE	ESTABLISHMENT II		ENT ID	EXTENSION		ACCOUNT NUI		Muna	ADED	
									1911101	CIVITO	LAIL	NOION	AC	COONT	ADIA	DEM	
DATE OF EVIT FOR THE	ľ														-		
DATE OF EXIT FOR PREVIOUS MEMBER ID (DD/MM/YYYY)		D	D	M		M	Y	1	1	Y	Υ	7					
												-		and h			
	l											]			er invest Stalle		
(A) IF SCHEME CERTIFICATION (B) IF PENSION PAYMENT	ICATE ISS	SUED FO	R PREVIO	NIS EN	ADL OVE	MENT	THEN	CCLIEM	E CED:	TICICATO		<b></b>					
(B) IF PENSION PAYME	NT ORDER	R (PPO	) ISSUED	FOR F	PREVIO	IIS EM		SCHEM MENT T	E CEK		VDED.	ER.					
			, 133020	TOKT	KLVIO	יטט בוייו	IPLOTI	MEINI, I	HEIN F	PPO NOI	ABEK:						e E
OTHER DETAILS						فيفرن يوسي د سيما م			- municipal				100				
YAITEDALATTOLIC IAL					20	T				7						= F	
(PLEASE TICK)	ER		Υ	ES				No									
(PLEASE TICK)				-		1	b										10年
TETHE PEDITO 11	3) 4600	E IC VE	C TLUCAL				A V I C V	N 15/	Δ <b>\</b> 1	2(2) 0	12(6)						- 70
IF THE REPLY TO (1 13(A) COUNTRY OF O	RIGIN (F	Jease .	is, inicia Tick)	EMIE	EK INK	ב שכוג	AILS I	N T2(	A), 1	2(B) G	13(0	).					
INDIA	ACCOUNT (1										4				00		
		1 OT	HER THAI	INDI	A (IF	YES, PI	LEASE				Table 1						$q_{p}$
		- 1	HER THAI NTION NA														eg.
		- 1															
		- 1															
13(B) PASSPORT NUI	MBER	- 1															
		ME	NTION NA		FTHE	COUNT											
13(B) PASSPORT NUM 13(C) PASSPORT VAL		ME						Y	Y	Y							
		ME	NTION NA		FTHE	COUNT		Y	Y	Y							
		ME	NTION NA		FTHE	COUNT		Y	Y	Y							
	LID FROM	ME	NTION NA		FTHE	COUNT		Y	Y	Y							
	LID FROM	ME	NTION NA		FTHE	M		Y	Y	Y							
	LID FROM	ME	NTION NA		FTHE	M		Y	Y	Y							
13(c) Passport val	LID FROM	ME	D	D D	F THE M	M	TRY)	Y	Y	Y		Post			\ <b>D</b>	TECHI	IICA
13(c) Passport val	ID FROM	ME	NTION NA	AME O	FTHE	M	TRY)	Y Y ENIOR ONDARY	Y	TY THE GRADUAT	E	POST	TE	Docto	DR	TECHN	
13(c) PASSPORT VAL  14) EDUCATIONAL  QUALIFICATION	ID FROM	O	D NON-	AME O	F THE M	M	TRY)	Y	Y	Y  GRADUAT	E		TE	DOCTO	DR		
13(c) Passport val	ID FROM	O	D NON-	AME O	F THE M	M	TRY)	Y	Y	Y GRADUAT	E		TE	DOCTO	DR		
13(c) PASSPORT VAL  14) EDUCATIONAL  QUALIFICATION	ID FROM	O	D NON-	AME O	F THE M	M	TRY)	Y	Y	Y  GRADUAT	E	GRADUAT	TE	DOCTO	DR		
13(c) PASSPORT VAL 14) EDUCATIONAL QUALIFICATION (PLEASE TICK)	ID FROM	OERATE	NON MATR	AME O	MAT!	M	Y	Y Y ONDARY	Y			GRADUAT	TE	DOCTO	DR		
13(c) PASSPORT VAL 14) EDUCATIONAL QUALIFICATION (PLEASE TICK)	ID FROM	O	NON MATR	AME O	MAT!	M	Y	Y	Y		RCEE	GRADUAT	TE -	Docto	DR		
13(c) PASSPORT VAL  14) EDUCATIONAL  QUALIFICATION	ID FROM	OERATE	NON MATR	AME O	MAT!	M	Y	Y Y ONDARY	Y			GRADUAT	TE -	DOCTO	DR		
13(c) PASSPORT VAL 14) EDUCATIONAL QUALIFICATION (PLEASE TICK)	ID FROM	OERATE	NON MATR	AME O	MAT!	M	Y	Y  NIOR ONDAR	WER	DIVO	ORCEE	GRADUAT		Docto	DR .		
13(c) PASSPORT VAL  14) EDUCATIONAL QUALIFICATION (PLEASE TICK)  15) MARITAL STATUS (PLEASE TICK)	ILLITI	OERATE	NON MATR	AME O	MAT!	M	Y	Y  NIOR ONDAR	WER		ORCEE	GRADUAT		Docto	DR .		
13(c) PASSPORT VAL 14) EDUCATIONAL QUALIFICATION (PLEASE TICK)	ILLITI	OERATE	NTION NA D NON- MATR	AME O	MAT!	M	Y SEC	Y  NIOR ONDAR	WER IF YES	DIVO	ORCEE THE CA	GRADUAT		DOCTO	DR .		

171	INIC	DETAILS
7/1	KVI	I IF I ATI C
1/1	NIC	DLIMILO

KYC DOCUMENT TYPE		TRFC: SBINGO	the contract of the contract o
BANK ACCOUNT-1*	NAME AS ON KYC DOCUMENT	NUMBER	REMARKS, IF ANY
NPR/AADHAAR	OMKAR S CHOGARE	62478607827	
	OMBAR SUNDL CHOYAR	9 9 5 4 5 5 4 7 8 8 2 2 6	
PERMANENT ACCOUNT NUMBER (PAN)	OMEAR SUNTL	CNCPGH236X	
PASSPORT	aconto can rac		
DRIVING LICENCE			
ELECTION CARD			
RATION 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:

DATE:

ESIC CARD

- 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: PLACE:	121	5125 12 MUMBAI	SIGNATURE OF MEMBER
		DECLARATION BY PRESENT EMPLOYER	
Α.	THE ME	MBER Mr./Ms./Mrs AND I	HAS BEEN ALLUTTED PF MEMBER ID
В.	· (F	THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995: OST ALLOTMENT OF UAN) THE UAN ALLOTTED FOR THE MEMBER IS	
		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.		THE PERSON WAS EARLIER A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:	
		E ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A) ABOVE HAS BEEN TAGE	GED WITH HIS/HER UAN/PREVIOUS
		EMBER ID AS DECLARED BY MEMBER.	
Services	o PL	EASE TICK THE APPROPRIATE OPTION:-	
		THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE SIGNATURE CERTIFICATE AND TRANSFER REQUEST HAS BEEN GENERATED ON P	ORTAL.
		AS THE DSC OF ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MIT PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT ARE NOT REGISTERED WITH EPFO.	

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT