



Employees' Provident Fund Organization

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

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

DECLARAT	TION BY A PE	RSON TAN	52 AN	D/OR E	MPLOY	EES' PE	NSI	ON SC	HEME	, 1995	IS APPL	PLOYEE ICABLE	s' PR	OVIDE	NT FUND	SCHEME	4
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0) THE DETAILS OF THE	0	1	8	0	0	1.	1		7	1	8	1	0
OR PREVIOUS PF MEMBER ID					OFFICE C	FFICE CODE ESTABLIS			ENT ID	EXTEN	SION	Acco	UNT NU
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1) DATE OF EXIT FOR PREVIOUS MEMBER ID (DD/MM/YYYY)			D	М	М	Y	Y	10	Y	Y			
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(A) IF SCHEME CER (B) IF PENSION PAY	TIFICATE ISS	SUED FO	R PREVIO	OUS EMP	PLOYMENT EVIOUS EI	THEN S	CHEME	CERT	TIFICATE PPO NUM	NUMBE	R:	1	Z
OTHER DETAILS						25500			10000	12.50		100	DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME
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IF THE REPLY TO (13) ABOVE	E IS YES	, THEN	ENTER	THE DET	AILS IN	13(4	1), 13	3(B) &	13(c):			
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INDIA					(IF YES, F								
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17) KYC DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	Number	REMARKS, IF ANY
BANK ACCOUNT-1*		922010024591980	UTTB0000724
NPR/AADHAAR		773457889413	
PERMANENT ACCOUNT NUMBER (PAN)		CJUPB 7780 D	
PASSPORT		W1587875	24-04-2032
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD	A		
ESIC CARD			

^{*} 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.

DATE:	20.06.2025 Gopalnagah		Monor Bhuiza SIGNATURE OF MEMBER
PLACE	DECLARATIO	ON BY PRESENT EMPLOYE	R
Α.	THE MEMBER Mr./Ms./Mrs	HAS JOINED ON	. AND HAS BEEN ALLOTTED PF MEMBER ID
В.	IN CASE THE PERSON WAS EARLIER NOT A MEMBER (POST ALLOTMENT OF UAN) THE UAN AL PLEASE TICK THE APPROPRIATE OPTION THE KYC DETAILS OF THE ABOVE MEMBE HAVE NOT BEEN UPLOADED BUT NOT A HAVE BEEN UPLOADED AND APPRO	N: ER IN THE UAN DATABASE APPROVED OVED WITH DSC	•
C.	SIGNATURE CERTIFICATE AND TR	N:- OVE MEMBER IN THE UAN DATAB	ASE HAVE BEEN APPROVED WITH DIGITAL TED ON PORTAL. THE MEMBER HAS BEEN INFORMED TO FILE

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT

DATE:

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