

## NOMINATION AND DECLARATION FORM FOR UNEXEMPTED/EXEMPTED ESTABLISHMENTS

1. Name (IN BLOCK LETTERS): UMAPATHI KUMAR

Name	Father's / Husband's Name	Surname
UMAPATHI	KUMAR	

4. \*Sex : MALE/FEMALE: MALE 5. Marital Status UNMARRIED

**PART – A (EPF)**

Name of the Nominee (s)	Address	Nominee's relationship with the member	Date of Birth	Total amount or share of accumulations in Provident Funds to be paid to each nominee	If the nominee is minor name and address of the guardian who may receive the amount during the minority of the nominee
1	2	3	4	5	6
Kulmar	Same as parent	Father	10/6/1973	100%	

- Strike out whichever is not applicable

PART – (EPS)

Para 18

[illegible]

Certified that I have no family as defined in para 2 (vii) of the Employees's Family Pension Scheme 1995 and should I acquire a family hereafter I shall furnish Particulars there on in the above form.

I hereby nominate the following person for receiving the monthly widow pension (admissible under para 16 2 (a) (i) & (ii) in the event of my death without leaving any eligible family member for receiving pension.

Name and Address of the nominee	Date of Birth	Relationship with member
Kumar, Address is Same As Permanent Address	10/6/1973	Father

Date 31/10/2025

  
Signature or thumb impression  
of the subscriber

#### CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed / thumb impressed before me by Shri / Smt./ Miss \_\_\_\_\_ employed in my establishment after he/she has read the entries / the entries have been read over to him/her by me and got confirmed by him/her.

Date : \_\_\_\_\_

Signature of the employer or other authorised officer of the establishment

Name & address of the Factory /Establishment

Place :

Date :