	NA		NAL	PE	NS	ION	SY	STE	M	(NP	s) - s	U	BSC	RIE	BER I	REG	GISTE	RAT	ION	I FO	RM	- P	rivat	te S	Sec	to	ſ							
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PRAN Card & Kit*	_	i.	PRA	N C	Caro	d (pl	eas	e tic	:k(√)))		T			ii. Ao	ccol	unt C	Dper	ning	Kit	(plea	ase 1	ick(v))										
(refer sl no.1 of instructions)		ePR	RAN	Car	d		Phy	sica	al Pl	RAN	Card			-	Throu	ugh	Ema	il		Ph	ysica	al Ki	t (Co	uri	er)						aste			
Print my PRAN in Hindi		-				,	YES			NO	lf	Ye	s, ple	ease	e subr	nit d	detail	s as	per	Anne	xure	e I					1				cent			
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То																_											1	(3.	-		-	-	size))
National Pension System Tr	ust																											-					-	
Dear Sir/Madam,																															ign a			
I hereby request that an NP * indicates mandatory fields. Ple																0				26.02	(on							0)o n	ot si	арр	e / 0	lip	
CKYC Identifier	ase					giisii	and		JCK	lette			gene	-1 - 1	guiue	me	sati	15110			Coc	le					-		Ι					7
1. PERSONAL DETAILS: (F	lefe	r Sr.	No.	10	of th	ne in	stri	ucti	ons	;)							U.	se A	Anne	xure	e II if	^r naı	ne e	хсе	ed	s th	e sr	aci	e pr	ovia	led I	belo	w	
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Either Father's or Mother's nar	ne is	mar								مامک	ct th		nam	o t <i>i</i>	o app	1021				ard			Fath	or'	c N		-			oth	er's	Nan		
Date of Birth*	d			m	y	у	y	у		Jere					o upr	<i>i</i> cui				ara			i uti		514	um	C			oth	.15	Vull		
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Spouse Name* (if married)	F	i	r	S	t		_							л				e		_	1				L	a	S	t						
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Annual Income Range* Occupation Details*			ow 1			_		c to				=			10 la	_		_) lac			c		_			to 1	-		Ĺ			1 Cr	
Please Tick If Applicable			olic S itical							ctor	P				ional Politi	_			mplo ad p				Hon (Plea				<u> </u>					•••••		•••
2. PROOF OF IDENTITY A										ofth		_				can	y cył	1036	eu p	2130			(FIC	350	Ter	ei	1150	ruc	lion	i iio	. 1)			
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Driving License			+	+											Licer	•			ate			d	d	-		_	_	1	1	1				
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NREGA Job Card																												Pc	PC	erti	ficat	e		
National Population Registe																												(re	fer	sect	ion 1	2)		_
3. CURRENT ADDRESS DE	TA	LS*	(Pr	oof	to	be s	ubr	nitt	ed)																									
Line 1																																		
Line 2															_				_	V	i			a	g	e	/	С	i	t	У			
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Mobile*	9	1	_	_								7		т	elep	hon	e wi	th S	TD	ode)								1	1		_		
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(if nominee is a minor)	·							CTR	45							_	_	_							_		/ S	-						
7. SELECTION OF PENSIO	N F	UNI) (P	F) /	١N								.* (R	lefe	er Sr	no.	5 of	the	inst			;)		Aut	L	а		t).					
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7. SELECTION OF PENSIO 1. All Citizen: Selection of one Pf 2. Corporate Model: The PF / Inv	NF is n vestr	UNI nand nent	D (P l atory	F) / / els ce n	ANI e fo nay	rm w be ex	/ill k kerc	oe re cised	eject I in d	ed. If	no in	ve	* (R stmer	lefe nt c	er Sr hoice	no. is se	5 of	the	inst	will b	e inv	;) veste			L o Cl	a	e (L	t 50) on	e)			
7. SELECTION OF PENSIO 1. All Citizen: Selection of one PI 2. Corporate Model: The PF / Inv	N F is n vestr Per	UNI nand nent sior	D (Pl atory Choi n Fur	F) / / els ce n	ANI e fo nay	rm w be ex	vill k kerc Tic	be re cised k (√)	eject l in c l on	ed. If consu e)	no in Itatior	ve:	∷* (R stmer vith y	tefe nt c our	er Sr hoice Empl	no. is se	5 of	the	inst	will k	oe inv	;) veste	ed in .	:ho	c Cl ice	a noic (Pl	e (L	t 50) on	e)			
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7. SELECTION OF PENSIO 1. All Citizen: Selection of one Pf 2. Corporate Model: The PF / Im Aditya Birla Sunlife Pensio DSP Pension Fund Manag	N F is n vestr Per	UNI nand nent sior gmt Pvt L	D (Pl atory Choi h Fur Ltd	F) A v els ce n nd*	e fo nay (Pl	rm w be ex	vill b kerc Tic	be re cised k (V) Axis HDF	in c on Per	ed. If consu e) nsion ensio	no in Itation Fund n Mg	ve: n w	* (R stmer vith y lgmt t Co L	ttd	er Sr hoice Empl	no. is se loye	5 of electe r.	the ed, fu	Bal	will t li lance tive (nves nves ed Lif	s) vesto stmo fe Cy	ed in . ent C /cle F ment	ion	L o Cl ice d (B 0 the	a noic (Pli LC) R % si	e (Lo ease	t 50 Tic	k (√ ach a	asse	t clas			
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8. Activate my Tier- II account	t (Please	tick (v) to	activat	te) - re	fer Sr no 🕻	7 of i	nstructi	ons				Prov	iding I	PAN i	s mandat	ory
with the same bank, no	ominee &	invetsment	t details				with dif	ferent b	ank,	/nomi	nee/in	vestme	ent det	ails as	per Anne	kure IV
9. FATCA* (Foreign Account T	ax Comp	oliance Act) & CRS	DECLA	RATION	(Refe	r Sr no. 6	of the i	instr	uctior	ns):					
I am a tax resident of Ir	ndia and i	not resident	ofany	other co	untry		l am a ta	ax resid	ent o	of the	count	ry/ies n	nentior	ned be	elow	
US Person	/es	No														
	Particu	lars					Сс	ountry (2	1)				Count	ry (2)		Country (3)
Country/co	ountries o	of Tax Resid	ency													
		Address Li														
Address in the jurisdiction for Tail Residence	x	City/Town State	/Village								_					
		ZIP/Post C	ode													
Tax Identification Number (TIN)/	Functiona			er												
TIN/ Functional equivalent Numb	per Issuin	g Country														
Validity of documentary evidence	e provide	d (Whereve	r applic	able)			do	dmmyyy	/У				ddmm	туууу		ddmmyyyy
I have understood the informatic hereby confirm that the information	tion provi	ided by me/	'us on tł	nis Form	is true, coi) and		ure / Thumb Impression* of Applicant (refer instructions)
10. DECLARATION BY APPLICA	ANT* (R	efer Sr no. 7	7 of the	instructi	ons)									_		
I have read and understood the time are true and correct, to the bin NPS Trust. I do not hold any preincorrect information or docume Declaration under the Preventio I hereby declare that the contril income. I understand that NPS Tauthorities. I further agree that relating to prevention of money	est of m -existing nts. n of Mon bution pa Trust has NPS Trus	y knowledg account un ey Launderi id by me/o the right to it has the ri	e. Any c der NPS ing Act, n my be peruse	hanges i 5. I under 2002 ehalf has my fina	n the info rstand that s been der ncial profil	rmatio t I sha rived t le or s	on furnis all be full from lega share the	hed by y liable ally dec e inform	me s for lared	shall b submi d and n, wit	e info ssion assess h othe	rmed to of any f sed sou er gove	o CRA / false of irces of	/ r f t /	•	Thumb Impression* of Applicant
Date: d d m m y	y y	VF	Place:											(*I		f males and RTI in case of females to be I. Toe impression in case no hands)
11. DECLARATION BY EMPLO		,		orv)											provided	
Date of Retirement	d		m y		y											
Employee Code/ID					7						No	n-mano	latory i	if not	available	
CHO Registration Number							istration	Numbo								
It is certified that				is omnl		-				 t n t	hic cul	hscribe	r rogist	ration	form inclu	uding the address and employment
		vice record o	of the ei		-			-					-			have been read over to him/her by
Name of the Authorised Person									Γ							
Designation of the Authorised Pe	erson															
Date																
Place										Sigr	nature	of Autl	horised	pers	on	Rubber Stamp of the Employer
12. TO BE FILLED BY POP										0					I	,
Receipt No. (17 digits)												7				
POP Registration Number							Registrati	on Num	hor		_					
Documents Received:						51 1	(CEISTI UT	on Num	iber							
Existing Customer: I/we hereby operative Bank/ Demat/ Folio/ .	bran We furthe	nch/office. 1	accoun The KYC	t (specif docume	y nature c ents availa	of the ble w	e account vith us fo) having or this o	g ac custo	count omer/	numb client	oer /clie matche	ent ID es the	requi	rement fo	r. The above applicant is having an maintained at r opening NPS account and are in s not a 'Basic Savings Bank Deposit
Name of the Authorised Perso	on															
Designation of the Authorised Pe																
Date		L														
Place										C:~		of Acres	horica	lnorr	00	Pubbar Stamp of the Dep
			••••	••••			•••••			~		of Aut	iorisec			Rubber Stamp of the PoP
						АСКІ	NOWLED	DGEME	NT							
Name of the Subscriber:																
Application Receipt Date:	d d	m m	у у	у у	,											
Initial contribution amount	₹			<u> </u>												
Mode of payment	Che	eque / DD		Debit i	nstruction	ı	Ca	sh					S	stamp	and Signa	ture of PoP

General Guidelines

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

(a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected. (b) Copies of documents submitted by the applicant should be self-attested.

(c) Applicant is advised to retain the acknowledgement slip signed/ stamped by the PoP/PoP-SP office.

SI	ltem No	Item Details						Instructi	ons	
			In	case a sul	bscribe	r opts not to hav	ve a physical PRAN C	ard or Welcome K	it, reduced account opening charges	s of CRA are applicable as under:
		Option for PRAN		A	-		cical DDAN cand (in)		Account opening w	ith ePRAN card (in Rs.)
		Card and Kit		ACC	ounto	pening with Phys	sical PRAN card (in I	KS.)	Welcome kit sent in hardcopy	Welcome kit sent vide email only
						₹			₹	₹
1	1	Father's Name, Mother's Name	1			•	ll Annexure II for the may leave the fields		n official document to support the s	tatus to be submitted.
		Politically Exposed Person		•		. ,				ions such as heads of state or of the corporations, important political party
2	2	Proof of Idenity and Address	If the ap submitte		submi	tting Aadhaar as	proof of Identity a	nd Address, the fi	rst 8 digits of the Aadhaar number	should be redacted / masked on the
3	3	Current Address	Providing	current	addres	s is mandatory. T	The submitted addre	ess proof should co	ontain the current address as provid	ed in the form.
4	5	Bank Details							ory. Please submit a cancelled che nk Name, Bank Account Number an	que / copy of bank passbook / bank d IFS Code.
5	6	Nomination Details	Any nom and any nominati to be inv	ination m nominati on may b alid and t	nade in on mae be in fa the sub	favour of a pers de before such r vor of any perso scriber shall mak	son not belonging to marriage shall deem on or persons but if	o family shall be in ned to be invalid; the subscriber sub n in favour of one	valid; A fresh nomination shall be n If at the time of making a nominat sequently acquires a family, such n or more persons belonging to his fa	e persons belonging to his/her family. nade by the subscriber upon marriage ion the subscriber has no family, the omination shall forthwith be deemed mily.
			Unmarrie	ed Subscr	iber		Married / Widow/	Widower / Divorce	ee Subscriber	
			1. Mother 3. Please s			nship			aughter, 4. Mother, 5. Father, 6. Mothe emale and Transgender), 8. Daughter ir	
			(c) In cas	e of more	e than o	one nominee, the	e percentage share f	for each nominee s	should be in whole numbers and mu	ist be equal to 100.
6	7	Selection of Pension Fund (PF) & Investment Choice	(2a) Bala automati (2b) Activ (2c) Auto	nced Life cally redu ve Choice Choice -	Cycle F uces fro - Subs Equity	und : Equity, Co om 45 years to 5 criber can active allocation is 75%	rporate Debt and G- 5 years of age. ly decide his / her al	Sec allocation is 50 location into Equit Conservative / Mo	them by the employer or else may 0:30:20 until age 45 and allocation to try / Corporate Debt / G-Sec / Alterna oderate / Aggressive choice opted by	o Equity and Corporate Debt Ite assets.
7	9	FATCA & CRS Declaration	 Jurisdic purpose Tax ide high inte for indivi In case provided 	ction(s) o in USA. ntificatio grity num dual inclu applicant or reaso	f Tax F on Num ober wi ude, a s t is dec ns for r	esidence: Since ber (TIN): TIN ne th an equivalent ocial security/in: laring US person not having relinq	US taxes the globa eed not be reported level of identification surance number, cit status as 'No' but h uishment certificate	l income of its cit l if it has not been on (a "Functional e izen/personal ider is/her Country of l is to be provided.	n issued by the jurisdiction. Howeve equivalent"), the same may be repor ntification/services code/number an Birth is US, document evidencing Re	linquishment of Citizenship should be
8	8	Tier-II activation	that of T	ier-I whe	reas he					ank, Nominee and Investment details quired to submit the Annexure IV for
9	9 & 10	Declaration / Signature by Applicant	In case th and in ca	ne applica ise there	ant is u is no h	nable to affix sig ands, toe impre	ssion of the applica	nt to be provided.	•	on in case of female should be afffixed d be attested by two persons, one of
				145						
		RA charges:		. Kfintech						
				₹						
Αссоι	int Main	ing charges tenance Charges (p.a nsaction	.) ₹	₹ ₹ ₹	₹ ₹ ₹					

	Annexur				_		-	_	tio	n Fo	orm	fo	r Priv	ate	Sec	tor	арр	olica	nts	(Ti	ick a	nd	fill ap	plic	able	anr	nexi	lre	s be	low)				
	Annexure I - PRAN (Card	हिंदी	। में	प्रिंत	ट क	रने	हेतु																											
आ	वेदक का नाम	-																																	_
मध	यनाम	-																																	_
उप	नाम	-																																	
पित	ना / माता का नाम	-																																	
1	यनाम	-		—																															—
		-																																	
34	नाम		_	_																															_
Ŀ	Annexure II - If char	acter	'S O	f na	am	e ex	kcee	ede	d t	hes	spa	ce p	orovi	ded	on	pag	ge 1	of t	he a	app	lica	tio	n for	m										_	
Ap	plicant's First Name																																		
Mi	ddle Name																																		
La	st Name																																		
Fa	ther's First Name																																		
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																	-		T			.	hatk	Tio	~ 1 0	Tio	~ II								
	Annexure III - Addite						F0	or Ti	er-i			For		r-II		For both Tier-I & Tier-II Total should be equal to 100%																			
Pe	rcentage Share	Nor							No	min	ee l	I		_				iee I	L				1	otal	_	-	1	· ·	al to	o 10	0%				_
–	Nominee I - Name	F	i	r	S	t									i	d	_		е						<u> </u> L	-	+	t	-						
Nominee I	Relationship			_							_		Age			_	-	te of	Bir	th (ln ca	se	of Mi	inor)		D	+	÷		M	/	Y	Y	Y	Y
۱P	Name of Guardian (if nominee is a minor)	F	i	r	S	t								M	i	d	d		е						L	а	S	t							
H	Nominee II - Name	F	i	r	s	t			р					M	i	d	d		e						L	a	s	t							
Nominee II	Relationship	H	<u> </u>		5	L			P				Age		<u> </u>		_			th (ln ca	50	of Mi	inor)	-	D	+	+-		M	/	Y	Y	Y	Y
ll i	Name of Guardian	F	i	r		t							Age	M	:	d	d					30			+	-	+	/ t	+				1	-	-
۱ž	(if nominee is a minor)	F	1	1	S	ι										la	u	1	е						L	a	S	L							_
	Nominee III - Name	F	i	r	S	t								M	i	d	d	1	е						L	a	S	t							
Nominee III	Relationship			_									Age			1	Da	te of	Bir	th (ln ca	se	of Mi	inor)		D	D	/	M	M	/	Y	Y	Y	Y
ju i	Name of Guardian							M	i	d	d		e						L	a	s	t	T						_						
z	(if nominee is a minor)														_												_	_	_						
	Annexure IV - Activa	ate Ti	ier-	·II ('	witl	h Di	ffer	ent	Bar	nk/N	lom	ina	tion/l	nves	tme	ent l	Deta	ils -	tick	and	d fill :	as a	applio	cable	e)										
PA	N*						Сор	y of	PAI	N to	be a	atta	ched																						
	No change in Bank de	tails				Bar	nk d	leta	ils f	or 1	Tier-	-II a	re as	und	er:																				
Ac	count Type		Savi	ing	A/c	:		Cur	ren	t A/	/c																								
Ba	nk A/c Number																																		
Ba	nk Name																			IFS	6 Coc	le													
	No change in Nomine	e det	ails			No	min	ee (deta	ails	for	Tie	r-II are	e as	unc	ler:	-		_																
Nc	minee Name	F	i	r	S	t								M	i	d	d		е						L	a	S	t							
Re	lationship			_									Age				Da	te of	Bir	th (ln ca	se	of Mi	inor)		D	D	/	M	M	/	Y	Y	Y	Y
11	me of Guardian	F	i	r	S	t								M	i	d	d	Ι	е						L	a	S	t							
	iominee is a minor) case you desire to nomina	to mo	ro ti	han	ond		con	fill	Anr		ro II	Lab	0.1/0																						
	No change in Investm				One	<u> </u>							ove or Tie	r-II a	ire a	as u	nde	r:																	
l –		Pens			nd*	_															1	nve	estme	ent (Choi	ce (Plea	se T	ick	(v) o	ne)				٦
																				Bala	ance	d Lii	ie Cyc	le Fu	ınd (BLC)								
	Aditya Birla Sunlife Pensi	ion M	gmt	Ltd					Axis	s Pe	nsio	n Fu	nd Mg	mt L	td											OR									
	DSP Pension Fund Manag	gers P	vt Lt	td					HDI	C P	ensi	on N	/Igmt (Co Lt	d					Acti	ve C	hoid	e n	nentic	on th	e % s	hare	in e	ach	asset	clas	s bel	ow		
	ICICI Prudential Pension	Funds	Mg	;mt (Co L	td			Kot	ak N	/lahi	ndra	a Pens	ion F	und	Ltd					00%)			(Upto						1009	6)		То		
	LIC Pension Fund Ltd												n Fun			Ltd			%	Equi	ty		%	Corp	Bond			%	Gov	t Sec			10	0%	
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																		C	onse	ervat	ive (LC25	5)		Nod	erat	e (LC	:50)		A	gre	ssive	e (LC	75)	
Na	me of the Applicant	Ĺ																																	
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