Annexure S1 Page 1

Application for Allotment of Permanent Retirement Account Number (PRAN)					
(To avoid mistake(s), please follow the	companying instructions and examples caref	ully before filling up the form)	To affix recent		
Acknowledgement No. (To be filled by FC)			Coloured photograph (3.5 cm × 2.5 cm)		
Permanent Retirement Account Number (To be filled by FC after PRAN genera	on )				
Sir/Madam,			_		
I hereby request that a permanent retirem	at account number be allotted to me.				
I give below necessary particulars:					
Section A - Subscribers Personal Details (* Indicates Mandatory Field)  Signature/Left Thumb Impression of Subscriber in black ink					
1. Full Name (Full expanded name: in Please Tick as applicable, Sh	ials are not permitted) Smt. Kumari				
First Name *					
Middle Name					
Last Name					
2. Gender * Please Tick as applicable	Male Female				
3. Date of Birth *	4. PAN				
D D	M M Y Y Y Y (Date of Birt	h to be Certified by DDO)			
5. Fatherøs Full Name: First Name *					
Middle Name					
Last Name					
6. Present Address:					
Flat/Unit No, Block no. *					
Name of Premise/Building/Village					
Area/Locality/Taluka					
District/Town/City *					
State / Union Territory *					
Country *					
Pin Code *					
7. Permanent Address: If same as ab	ve, Please Tick else,				
Flat/Unit No, Block no. *					
Name of Premise/Building/Village					
Area/Locality/Taluka					
District/Town/City *					
State / Union Territory *					
Country *					
Pin Code *					
8. Phone No.					
STD Code Phone No.					
9. Mobile No.					

Annexure S1 Page 2						
10. Email ID						
11. Subscribers Bank Details: Please refer instruction no. f (4)  Savings A/c  Current A/c						
Bank A/c Number						
Bank Name						
Bank Branch						
Bank Address						
Bank Address						
Pin Code						
Bank MICR Code (Wherever applicable)						
12. Value Added Services:  i) SMS Alert  Yes  No						
ii) Email Alert: Yes No						
I, the applicant, do hereby declare that						
what is stated above is true to the best of my information & belief.						
Date:						
D D M M Y Y Y Y Signature/Left Thumb						
Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory)						
1. Date of Joining 2. Date of Retirement						
D D M M Y Y Y Y D D M M Y Y Y Y						
3. PPAN (Please refer to instructions No.5.)						
4. Group of the Employee (Please Tick) Group A Group B Group C Group D						
5. Office						
6. Department						
7. Ministry						
8. DDO Registration Number 9. DTO Registration Number						
(Please refer to instructions No.6.)						
10. Basic Salary						
11. Pay Scale						
Certified that the above declaration has been signed / thumb impressed before me by after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of birth and employment						
details is as per employee records available with the <b>Department</b> .						
Signature of the Authorised Person  Rubber Stamp of the DDO  Rubber Stamp of the DDO						
Designation of the Authorised Person: Name of the DDO						
Date:						
D D M M Y Y Y Y Department / Ministry						

Annexure S1		Page 3					
Section C - Subscriber's Nomination I	Details (* Indicates Mandatory Field for nominee)						
1. Name of the Nominee *:  1st Nominee 2nd Nominee 3rd Nominee							
First Name *	First Name *	First Name *					
Middle Name	Middle Name	Middle Name					
Lat Name	Let News	Last Name					
Last Name	Last Name	Last Name					
2. Date of Birth (In case of a minor)*:  1st Nominee	2nd Nominee	3rd Nominee					
3. Relationship with the Nominee*:	2nd Nominee	3rd Nominee					
		Stationimice					
4. Percentage Share *:  1st Nominee 9	% 2nd Nominee %	3rd Nominee %					
5. Nominee@ Guardian Details (in case of a minor)*:  1st Nominee@ Guardian Details		Nomineeøs Guardian Details					
First Name *	First Name *	First Name *					
	<del></del>	<del>                                     </del>					
Middle News	Middle Neme	Middle Name					
Middle Name	Middle Name	Middle Name					
	<del>-                                     </del>						
Last Name	Last Name	Last Name					
Bust rune	Lust rune	Lust Nume					
6. Conditions rendering nomination invalid:							
1st Nominee	2nd Nominee	3rd Nominee					
Section D - Subscriber Scheme Details	s						
1st Scheme	2nd Scheme	3rd Scheme					
Pension Fund Managers Name/Code	Pension Fund Managers Name/Code	Pension Fund Managers Name/Code					
	<u> </u>						
Scheme ID No./Name	Scheme ID No./Name	Scheme ID No./Name					
	<del></del>						
Description Chair	Percentage Share	Demonstrate Change					
Percentage Share	Fercentage Share	Percentage Share					
Section E - Declaration  I understand that there would be PFRDA approved <i>Terms and Conditions</i> for Subscribers on the CRA website <i>governing I-Pin (to access CRA / NPSCAN and view details) &amp; T-pin</i> . I agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed.							
I, the applicant, do hereby declare that							
what is stated above is true to the best of my information & belief.							
Data							
Date:  D D M M Y Y Y	<u></u>						
	-	Signature/Left Thumb					
		Impression of Subscriber					

Annexure S1 Page 4

## INSTRUCTIONS FOR FILLING PRAN FORM

- a) This form is to be used by State Governments and Union Territories employees.
- b) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- c) Details Marked with (\*) are the mandatory fields.
- d) Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- Individual' Subscriber should affix a recent colour photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)
- f) Signature /Left thumb impression should only be within the box provided in the form. The signature should not be on the photograph. If there is any mark on the photograph such that it hinders the clear visibility of the face of the Subscriber, the application will not be accepted.
- g) Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer under official seal and stamp.

Sr. No.	Item No	Item Details	Guidelines for Filling the Form					
Section A - Subscribers Personal Details								
1	3.	Date of Birth	All Dates Should be in õDDMMYYYYö Format					
2	6.	Present Address	All future communications will be sent to present address.					
3	8, 9, 10	Phone No., Mobile No, & Email ID	It is advisable to mention either õTelephone numberö or õMobile numberö or õEmail idö so that Subscriber can be contacted in future for any discrepancy.					
4	11	Subscriberøs Bank Details	If Subscribers mentions any of the bank details, except MICR Code all the bank details will be mandatory.					
	Section B - Subscribers Employment Details							
Subsci	It is mandatory to fill the Subscriberøs Employment details in the application. The employment details should be filled by the respective DDO of the Subscriber and should be verified by the Authorised Signatory.  DDO should ratify Overwriting / Striking off of any of the employment details.							
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number) or equivalent number, if it has been allotted to the subscriber by the respective state government / Union Territory.					
6	8 & 9	DTO Reg. No. & DDO Reg. No.	DTO Reg. No. and DDO Reg. No. is the unique Registration number allotted by Central Recordkeeping Agency.					
		Section (	C - Subscriber's Nomination Details					
7	4.	Percentage Share	Subscriber can nominate maximum of three nominees.  Subscriber can not fill the same nominee details more than once.  Percentage share value for all the nominees must be integer. Fractional value will not be accepted.  Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected.					
8	5.	Nomineeøs Guardian Details	If a nominee is a minor, then nominee guardian details will be mandatory.					
		Section	on D - Subscriber scheme details					
If the Subscriber is unable to mention the Scheme details i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest Facilitation Centre (FC) for information or the Subscriber can also search for the scheme details on http://www.npscra.nsdl.co.in								
9	Scheme	Subscriber can select maximum three schemes. Details of the schemes are available on http://www.npscra.nsdl.co.in Subscriber can not fill the same scheme details more than once. If a scheme name is filled in the form for scheme setup there must be a PFM name and percentage contribution filled for that scheme.  If the Scheme details are not filled, default scheme as approved by PFRDA will be applicable.						
10	Percentage Share	Scheme Contribution Value will be in terms of percentage. It cannot be in terms of amount.  Percentage contribution value for all the schemes must be integer. Fractional value will not be accepted.  If the sum of contributions (in percentage) across all the schemes is not equal to 100, the balance will be allotted to the default scheme approved by PFRDA.						

## GENERAL INFORMATION FOR PRAN SUBSCRIBERS

- a) Subscribers can obtain the application form for PRAN in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) from DDO or can freely download from the CRA website (http://www.npscra.nsdl.co.in).
- b) The request for a reprint of PRAN card with the same PRAN details or/and changes or correction in PRAN data can be made by filling up 'Request for change/correction in subscriber master details and/or re-issue of I-Pin/T-Pin/PRAN card' or/and 'Request For change in signature and/or change in photograph'. The form is available from the sources mentioned in (a) above.
- c) The Subscriber can obtain the status of his/her application from the CRA website or through the respective DTO.
- d) For more information

Visit us at http://www.npscra.nsdl.co.in

Call us at 022-24994200

e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, :AøWing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.