Annexure S1 Page 1

Application for Allotm	Application for Allotment of Permanent Retirement Account Number (PRAN)				
(To avoid mistake(s), please follow the accompanying instructions and examples carefully 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 Nur (To be filled by FC after PRAN ge					
(10 be fined by 12 after 172 five	inclution)				
Sir/Madam,					
I hereby request that a permanent reti	irement account number	be allotted to me.			
I give below necessary particulars:				Signature/Left Thumb Impression	
Section A - Subscribers Per	sonal Details (* In	dicates Mandatory F	ield)	of Subscriber in black ink	
Full Name (Full expanded nam Please Tick as applicable, First Name *	e: initials are not permit Shri Sm		mari 🔲		
Middle Name					
Last Name					
2. Gender * Please Tick as appli	icable, Male	Female			
3. Date of Birth *		4. PA	AN TITLE		
D	D M M Y Y	Y Y (Date	of Birth to be Certified by DDO)		
5. Father's Full Name: First Name *		·			
Middle Name					
Last Name					
6. Present Address: Flat/Unit No, Block no. *					
Name of Premise/Building/Vil	laga				
	lage				
Area/Locality/Taluka					
District/Town/City *					
State / Union Territory *					
Country *					
Country					
Pin Code *					
7. Permanent Address: If same a	as above, Please Tick	else,			
Name of Premise/Building/Vil	lage				
Area/Locality/Taluka					
District/Town/City *					
State / Union Territory *					
Country *					
Pin Code *	Pin Code *				
8. Phone No.					
	STD Code	Phone No.			
9 Mobile No					

11. Subscribers Beak Details: Pleas refer instruction no. f (4) 12. Value Added Services: 13. Subscribers Beak Details: Pleas refer instruction no. f (4) 14. Subscribers Beak Details: Pleas refer instruction no. f (4) 15. Subscribers Beak Details: Pleas refer instruction no. f (4) 16. Subscribers Beak Details: Pleas refer instruction no. f (4) 17. Value Added Services: 18. Subscribers 18. Subscribers 19. Subscribers 10. Dut M M Y Y Y Y 10. Dut M M M Y Y Y 10. Dut M M Y Y Y 10. Dut M M Y Y Y 10. Dut M M M Y Y Y 10. Dut M M M M M M M M M M M M M M M M M M M	Annexure S1	Page 2					
Bank Ac Number Bank Name Bank Name Bank Name Bank Address Bank MiCR Code Bank MiCR Code Bank MiCR Code Date Address Bank MiCR Code Date Address Bank MiCR Code Down M Y Y Y Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mundialismy) 1. Date of Joning D M M Y Y Y Y 3. PPAN 4. Group of the Employee (Please Tick) Group A Group B Group C Group D 5. Office Details Subscribers Bank Date Subscribers Ban	10. Email ID						
Brack Act Number Brack Actives Brack Address Bra							
Bank Name Bank Branch Bank MiCR Code Bank	11. Subscribers Bank Details: Please refer instruction no. f (4) Savings A/c Current A/c						
Panck Branch Pank Aldress Panch Aldress Pank Aldress Pan							
Pin Code Bank MCR Code 12 Value Added Services: i) SNS Alert Vest No Siperatory of the Stated above is true to the best of my information. & belief. Date: Signature of Thumb Impression of Subscriber Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory) 1. Date of Joining D N M Y Y Y Y Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory) 1. Date of Joining D N M Y Y Y Y 3. PPAN 4. Group of the Employee (Please Tick) Group A Group B Group C Group D South Structions No.5.) 5. Office 5. Office 6. Department (Please refer to instructions No.6.) 10. Basic Solary 11. Pay Scoke Cettified that the above declaration has been signed / thumb impressed before one by adar he / she has road the entries / entries have been read over to him / her hy me and got confirmed by him / her. Also certified that the date of birth and employment details is as per employer records available with the Department. Name of the DDO	Bank Name	 T					
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Bank MICR Code							
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Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory) 1. Date of Joining	what is stated above is true to the best of my information & belief.						
Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory) 1. Date of Joining	Date:						
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Date : Name of the DDO	Signature of the Fathorised Ferson						
	Name of the DDO						

Annexure S1 Page 3 Section C - Subscriber's Nomination Details (* Indicates Mandatory Field for nominee) 1. Name of the Nominee *: 3rd Nominee 1st Nominee 2nd Nominee First Name * First Name * First Name * Middle Name Middle Name Middle Name Last Name Last Name Last Name 2. Date of Birth (In case of a minor)*: 2nd Nominee 1st Nominee 3rd Nominee 3. Relationship with the Nominee*: 1st Nominee 2nd Nominee 3rd Nominee 4. Percentage Share *: 2nd Nominee 1st Nominee 3rd Nominee 5. Nominee's Guardian Details (in case of a minor)*: 1st Nominee's Guardian Details 2nd Nominee's Guardian Details 3rd Nominee's Guardian Details First Name * First Name * First Name * Middle Name Middle Name Middle Name Last Name Last Name Last Name 6. Conditions rendering nomination invalid: 3rd Nominee 1st Nominee 2nd Nominee Section D - Subscriber Scheme Details 2nd Scheme 1st Scheme 3rd Scheme Pension Fund Managers Name/Code Pension Fund Managers Name/Code Pension Fund Managers Name/Code Scheme ID No./Name Scheme ID No./Name Scheme ID No./Name Percentage Share Percentage Share Percentage Share % % % Section E - Declaration I understand that there would be PFRDA approved Terms and Conditions for Subscribers on the CRA website governing I-Pin (to access CRA / NPSCAN and view details) & T-pin. 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. , the applicant, do hereby declare that what is stated above is true to the best of my information & belief. Date: $D\quad D\quad M\quad M\quad Y\quad Y\quad Y\quad Y$ 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.
- e) '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 "DDMMYYYY" 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 "Telephone number" or "Mobile number" or "Email id" so that Subscriber can be contacted in future for any discrepancy.			
4	11	Subscriber's Bank Details	If Subscribers mentions any of the bank details, except MICR Code all the bank details will be mandatory.			
	L	Section I	3 - Subscribers Employment Details			
Subsci	It is mandatory to fill the Subscriber's 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.	Nominee's Guardian Details	If a nominee is a minor, then nominee's 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 Subscriber can select maximum three schemes. Details of the schemes are available on						
9	Scheme	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, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.