CSRF-P

NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM - Private Sector Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.)																						
	riend / family		Social				-		agazine			/ / Ra		ciure	7	.) ancia	l advi	isor /	apps	s	Е	mploy
	i. PRAN Car	d (ple				-	- 1 1		ccount					 ck (√)					- 1- 1-			1 2
PRAN Card & Kit* (refer sl no. 1 of instructions)	RAN Card		Physica		Card			1	gh Emai	<u>.</u> Г					-	/ post)					
Print my PRAN in Hindi		Ē	Yes	No	lf	ves.	pleas	se subr	nit detai	ls as p	ber An	nexu	re I							Past rece		
Please select your category*			L Corpora	ite				_	Citizen											sspor	rt siz	
To,																	_	(3.		hotog 1 × 2.{) size)
National Pension System Trust																				ot sigi t stap		
Dear Sir/Madam, I hereby request that an NPS account b	e opened in m	v nam	ne as pe	r the pa	articular	s aiv	en b	elow:										_				
* indicates mandatory fields. Please fill	· ·	-		<u> </u>					elines a	at instru	uction	s pag	ge.)									
CKYC Identifier										R	RA Co	de										
1. PERSONAL DETAILS: (Refer		e instr	_			14					l	Use A	Annex	kure I	l if na	ame e	xcee	ds the	e spa	ice pr	rovide	ed bel
Salutation* Applicant Name*	Shri	s t	_ Smt			Kun	M	i d	dI	е						La	a s	t				
Father's Name		s t					M	i d	d I	e						La		t		+	1	
Mother's Name		s t					M	i d	d I	e						La		t		+	<u> </u>	
Either Father's or Mother's na				ـــــــــــــــــــــــــــــــــــــ	elect t	ho n			pear or			ard			athe	er's na			N	/lothe	ur'e N	lame
Date of Birth*	d d m	m	VV			ine n	ame	5 to ap	pearo		11 00	iiu			auro	.1 3 110	anne		IV	iouric	.1 3 1	anic
Place of Birth*			<u>y</u> y	<u>y</u> y																		
Country of Birth*																				+		
Gender*	Male			Fema	ale			Trans	gender			Na	ationa	alitv*	· []							
Marital Status*	Unmar	ried		Marrie		Ē	_		/Widov		[orcee								
Spouse Name* (if married)		s t					M	i d		е						La	a s	t				
PAN*							(or Fo	rm 60 1	furnis	hed			Subn	nissi	on of	PAN	or F	orm (60 is	man	dator
Annual Income Range*	Below	1 lac		1 lac t	to 5 la	c [Į	5 lac te	o 10 lao	c 🗌	10	ac to	o 25	lac		25	lac t	o 1 (Cr 🛛	Ą	bov	e 1 C
Occupation Details*	Public S	Sector	· 🗍 Pi	rivate S	Sector	Ē	Profe	essiona	IS	elf Err	nploye	ed	Нс	omen	nakei	 r	Othe	rs				
Please Tick if Applicable	Politica	ally ex	kposed	perso	n [Rela	ated to	Politic	ally e	xpose	ed p	ersor	n								no. 1
2. PROOF OF IDENTITY AND A		Defer	Or No. () of the	instrus	tiono	\ \															
	IDDRESS (F	veler (51. INU. 2		Instruc	lions)	Dor	oport [Typip	(Dot			d	d	m		V.				
Passport Driving License									sport E				ato	d	1	m	m m	У	y j	y y v v		
Voter ID Card									of of po		· ·							Prov	vide l	last fo	 our d	inits
NREGA Job Card															 					-		rtifica
National Population Register																						ction '
					1 1								_	_								
3. CURRENT ADDRESS DETA	ILS* (Proof to	be su	ubmitted	1)	1			1	1	1 1		1 1		1	1 1			1 1			1	1 1
Line 1																				<u> </u>		
Line 2									1		V	i		a	g	e	C		t	у		
District									State/l	J.T												
Country																PIN	Code	e				
4. CONTACT DETAILS*																						
Mobile*	9 1							Те	ephon	e with	STD	cod	le									
Email ID*																						
5. BANK DETAILS* (Proof to be su	Ibmitted - Refe	r Sr N	No 3 of	the inst	ructions	s)																
Account Type	Saving			Curre																		
Bank A/c Number																						
Bank Name												S Co					1					
6. NOMINATION DETAILS* (Ref						4a h:	a //a a		be East										A			
A. The nomination shall be in fav B. A fresh nomination shall be ma								a rami	ıy. ⊢Oľ	nomir	iating	y 1110	ne m	an 0	ne p	erso	n, su	timu	. Ann	iexuľ	e III	
C. Before filling-up the details, pl	•					-		vided	on instr	uctior	ns pa	ge.										
Nominee Name	Fir	S	t					Mi	d	d I	е						L	а	S	t		
Relationship						A	ge		Date o	of Birth	(In ca	ase o	of Min	or)	d	d /	m	m	/	у	у	у у
Name of Guardian	F i r	S	t					Mi	d	d I	е						L	а	S	t		
(if nominee is a minor)																						

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7. SELECTION OF PENSIO 1. The maximum permitted Equit	•		,	no. 5 of the	instruction	ns)				
2. All Citizen : Selection of one P 3. Corporate Model : The PF / In	F is manda	tory else form will be rejecte	d. If no investment cho		ted, funds	will be inve	sted in Auto (Choice (LC 50).		
		(Please Tick ($$) one)	,		In	vestment C	hoice (Plea	se Tick (√) one)		
Aditya Birla Sunlife Pensior	n Mgmt Ltd	Axis Pension Fund	Management Limited		Balanced	Life Cycle	Fund (BLC)			
DSP Pension Fund Manage	DSP Pension Fund Managers Private Ltd HDFC Pension Fund Mgmt Ltd						OR			
ICICI Prudential Pension Funds Mgmt Co Ltd Kotak Mahindra Pension Fund Ltd				Active Choice mention the % share in applicable asset class below						
LIC Pension Fund Limited	E (upto 75%) C (Upto 100%) G (Upto 100%) A (Upto 5%) Total % Equity % Corp Bonds % Govt. Sec. % Alt. Assets 100%									
SBI Pension Funds Private	TATA Pension Mana	OR								
UTI Pension Fund Limited			Auto Choi			rcle fund below				
				Conservat	tive (LC25)	INIOD	erate (LC50)	Aggressive (LC75)		
8. Activate my Tier-II accou		., , .	<i>Refer Sr. no.</i> 7 of instruction With different bank/n	,	estment de	tails as per		Providing PAN is mandatory		
9. FATCA* (Foreign Accour	nt Tax Cor	npliance Act) & CRS D	ECLARATION (Refe	r Sr no. 6 o	of the instru	ctions):				
I am a tax resident of India US Person Yes	and not res No.	sident of any other country	I am a tax resident	of the cour	ntry/ies mei	ntioned belo	w			
Particulars			Country (1)		Country (2	2)	Country (3)		
Country/countries of Tax Residency		Address Line 1								
Address in the jurisdiction for Tax		City/Town/Village								
Residence		State ZIP/Post Code								
Tax Identification Number (TIN)/Function		nt Number								
TIN/ Functional equivalent Number Iss Validity of documentary evidence provi		er applicable)	ddmmyyyy	/		ddmmvvv	/V	ddmmyyyy		
I have understood the information rec	quirement of	the Form (read along with the			s & Conditio		5			
10. DECLARATION BY APP			•	ereby accep	t the same.		Signature	/ Thumb Impression* of Applican (refer instructions)		
I here by declare that the contributio of income. I understand that NPS government authorities. I further ag provisions of any law relating to pre- Date:	n paid by me Trust has th gree that NF vention of m	e/on my behalf has been derive he right to peruse my financi 2S Trust has the right to clos oney laundering. Place:	ed from legally declared a al profile or share the i e my PRAN in case I a	and assesse nformation, am found vic	ed sources with other plating the	(*LTI in	case of males	nb Impression* of Applicant s and RTI in case of females to be mpression in case no hands)		
11. DECLARATION BY EMP		All Details are Mandaton	()							
Date of Retirement			,							
Employee Code/ID					Non-mand	latory if not	available			
CHO Registration Number				CBO Registration Number						
It is certified that		is employed with us	and the details provide	d in this sut	-		I	the address and employment deta		
provided above are as per the serv us and got confirmed by him/her. Name of the Authorised Person	vice record o									
Designation of the Authorised Pers	son [
Date		d d m m y y	уу		Signature	e of Authori	ead nerson	Rubber stamp of the Employer		
Place					Signatur	e of Authon	seu person	Rubbel stamp of the Employer		
12. TO BE FILLED BY POP										
Receipt No. (17 digits)										
POP Registration Number		POP-	SP Registration Number	er						
Documents Received										
Existing Customer: I/ we hereby c an operative Bank/Demat/Folio/										
compliance with PMLA Rules. I/We Account (applicable in case of Bar Name of the Authorised Perso	e further cor nk PoP)	fice. The KYC documents a firm that the Savings Bank a	available with us for th a/c of Sh/Smt/Kum	is custome	r/client ma	tches the re	equirement fo	or opening NPS account and are is not a 'Basic Savings Bank Depo		
	l									
Designation of the Authorised	ศษารังกา									
Date		d d m m	у у у	У	Signatur	e of Authori	sed person	Rubber stamp of the Pop		
Place					L			1		
			ACKNOWLEDGE	MENT						
Name of the Subscriber	[
Application Receipt Date:	[d d m m	у у у	У						
Initial contribution amount	[₹								
Mode of payment	[Check/ DD	Debit Instruction	Cash		S	tamp and Sig	gnature of PoP		

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Instructions for filling the subscriber registration form

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Gen	eral gu	idelines				ing the su	oscriber registration	IOIII			
(a)	Please fields a	e fill in legi are left bla	nk (or) wit	th unclea	ar photograph (or) not accompanied by re			icant. Applications incomplete in any aspe ed by PoP/PoP-SP are liable to be rejected			
(b) (c)					/ the applicant should be self-attested. icknowledgement slip signed / stamped b	by the PoP/Po	P-SP office.				
SI	Item No	Item D	Details				Instructions				
				In	case a subscriber opts not to have a phys	sical PRAN Ca		account opening charges of CRA are applied	cable as under :		
1	1	Option fo Card and		Account	t opening with Physical PRAN card in (Rs. ₹ 40.00	.)	Account oper Welcome kit in hardco ₹ 35.00	ning with ePRAN card (in Rs.) ppy eWelcome kit (Email) ₹ 18.00			
				not provi	ided, physical PRAN kit will be sent.		,	provided, ePRAN & eWelcome kit will b	e sent. If Email ID is		
		Fathers Mother's	Name (b) If the applicant is an Orphan, he/she may leave the fields blank. However, an official document to support the status to be submitted.								
	Politically Exposed Person's (PEPs) are individuals who are or have been entrusted with prominent public functions such as heads of state or of the government, senior political or military officials, senior executives of state-owned corporations, important political party officials.										
2	2 2 Proof of Identity and Address If the applicant is submitting Aadhaar as proof of Identity and Address, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.										
3	3	Current A			ng current address is mandatory. The subm I & Tier II account, bank details and docur			rrent address as provided in the form. mit a cancelled cheque / copy of bank passb	oook / bank statement		
4	5	Bank Det		(a) If a s nomin nomin be in subse	ination made in favour of a person not belo ination made before such marriage shall de	ng a nominatio onging to famil eemed to be ir subscriber sul vour on one or	n, the nomination shall be y shall be invalid; A fresh no ivalid; If at the time of maki osequently acquires a famil	in favor of one or more persons belonging mination shall be made by the subscriber up ng a nomination the subscriber has no family y, such nomination shall forthwith be deemed	oon marriage and any y, the nomination may		
		Details		-			ver / Divorcee Subscriber	. 4. Mathew F. Fathan C. Mathewin Law	(Only for Formula and		
								r, 4. Mother, 5. Father, 6. Mother in Law Transgender), 8. Daughter in Law, 9. Grands			
		Selection		(1) Corp	porate applicants may exercise these choic	ces if the optio	n is extended to them by th	n whole numbers and must be equal to 100. e employer or else may be ignored.			
6	7	of Pensic Fund (PF	on ⁻) &	redu	anced Life Cycle Fund : Equity, Corporate D uces from 45 years to 55 years of age. ve Choice - Subscriber can actively decide			l age 45 and allocation to Equity and Corpora e Debt / G-Sec / Alternate assets.	ate Debt automatically		
		Investme Choice	111	corpo	orate debt automatically reduces from age	35 years to 5	5 years.	ressive choice opted by the subscriber and a	llocation to equity and		
								S citizen of whatever nationality, is also a re-	sident for tax purpose		
7	9	FATCA & Declarati		 Tax ide integrif individ In case 	lentification Number (TIN) : TIN need not l ity number with an equivalent level of idd dual include, a social security/insurance nu se applicant is declaring US person status	entification (a mber, citizen/p as 'No' but hi	'Functional equivalent"), the personal identification/services/her Country of Birth is US	he jurisdiction. However, if the said jurisdicti he same may be reported. Examples of that ces code/number and resident registration no S, document evidencing Relinquishment of d	at type of number for umber).		
				 İn case 		as 'Yes', provid	le PAN and 'father name' in	addition to details required under section 9 ier-II Account with Same Bank, Nominee a			
8	8	Tier-II ac	tivation	that of Ti				applicant would be required to submit the A			
9	9 & 10	Declarati Signature Applicant	e by	In case t in case t	the applicant is unable to affix signature, Le	plicant to be p	rovided. The thumb / toe in	d Right Thumb Impression in case of female apression should be attested by two persons			
		CRA Ch		cluding]				
		pening Ch aintenanc		s (p.a.)	Please refer sr. no. 1 ₹ 69	1 above	For more details	s on CRA charges, please refer			
Cha	irge per	r transacti	on		₹ 3.75 Nomination Relationship Matrix	(Please men		site (<u>www.npstrust.org.in</u>)			
			Marital	Status	Male	1. Mother	Female	Transgender			
			Unmar	ried	 Mother Father Please specify the relationship if any other person 	2. Father 3. Please	specify the relationship her person	 Mother Father Please specify the relationship if any other person 			
					1. Spouse 2. Son 3. Daughter	1. Spouse 2. Son 3. Daught		1. Spouse 2. Son 3. Daughter			
			Marrie	a	4. Mother 5. Father	4. Mother 5. Father		4. Mother 5. Father			
			Warne	u	6. Daughter in Law 7. Grandson	6. Mother 7. Father	n Law	6. Mother in Law 7. Father in Law			
					8. Granddaughter	8. Daught 9. Grands 10. Grand	on	8. Daughter in Law 9. Grandson 10. Granddaughter			
			Widow	./	1. Son 2. Daughter 3. Mother 4. Father	1. Son 2. Daught 3. Mother 4. Father	er	1. Son 2. Daughter 3. Mother 4. Father			
			Widow		5. Daughter in Law 6. Grandson 7. Granddaughter	5. Mother 6. Father 7. Daught 8. Grands 9. Grandd	n Law er in Law on	5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter			
					1. Son 2. Daughter 3. Mother	1. Son 2. Daught 3. Mother		1. Son 2. Daughter 3. Mother			
			Divorc	ee	4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	4. Father 5. Mother 6. Father 7. Daught 8. Grands	n Law er in Law	4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson			
					Ganaral	9. Grandd		9. Granddaughter			
b) S	ubscribe	ers are adv	ised to ret	ain the ad	of his/her application from CRA and respect	tive Point of Pi	esence (PoP).	cation.			
C) F		informatio			ontact CRA:]					
	Call: 02	22-4090 42	242		ency (CRA)						
		Protean (former	eGov Tec y NSDL e-	hnologies Governal	s Limited ance Infrastructure Limited)						
		1st Floo		ower, Kar	mala Mills Compound, Senapati Bapat Ma	rg,					

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		gistration Form for Private Sector	applicants (Tick and fill applicable annexures below)
Annexure I - हिंदी में	प्रिंट करने हेतु		
आवेदक का नाम			
मध्यनाम			
उपनाम			
पिता / माता का नाम			
मध्यनाम			
उपनाम			
Annexure II - If ch	aracters of name exc	eeded the space provided on page	1 of the application form
Applicant's First Name			
Middle Name			
Last Name			
Father's First Name			
Middle Name			
Last Name			
Mother's First Name			
Middle Name			
Last Name			
Annexure III - Addit	tional Nomination	For Tier - I For Tier	- II For both Tier - I & Tier - II
	Nominee I	Nominee II	
Percentage Share			
Relationship	F i r s t	M i d	d I e L a s t
Relationship			Date of Birth (in case of Minor) D D / M / Y Y
OName of Guardian (if nominee is a minor)	F i r s t	M i d	d I e L a s t
Nominee II - Name	F i r s t	M i d	d I e L a s t
Relationship			Date of Birth (in case of Minor)
Name of Guardian	F i r s t		
(if nominee is a minor)			
■ Nominee III - Name	F i r s t	M i d	d I e Last
Relationship			Date of Birth (in case of Minor)
Name of Guardian	F i r s t		d l e L a s t
Z (if nominee is a minor)			
Annexure IV - Act	ivate Tier-II (with Differ	ent Bank/Nomination/Investment De	ails - tick and fill as applicable)
PAN*	copy	of PAN to be attached	
No change in Bank	details	ank details for Tier-II are as under	:
Account Type	Saving A/c	Current A/c	
Bank A/c Number			
Bank Name			IFS Code
No change in Nom		lominee details for Tier-II are as u	nder:
Nominee - Name	i r s t	M i d d	I e L a s t I I I I I I
Relationship		Age D	ate of Birth (in case of Minor)
Name of Guardian F	i r s t	M i d d	I e L a s t
(if nominee is a minor)			
In case you desire to nomina			
No change in Inve	estments details	Investments details for Tier-II a	
	Pension Fund* (Please	Tick (√) one)	Investment Choice (Please Tick (√) one) Balanced Life Cycle Fund (BLC)
			OR
Aditya Birla Sunlife Pe	-	Axis Pension Fund Mgmt Ltd.	Active Choice mention the % share in applicable asset class below E (upto 100%) C (Upto 100%) G (Upto 100%) Total
DSP Pension Fund M	-	HDFC Pension Fund Mgmt. Ltd.	% Equity % Corp Bonds % Govt. Sec. 100%
ICICI Prudential Pension	-	Kotak Mahindra Pension Fund Ltd.	
SBI Pension Fund Ltd		TATA Pension Management Pvt. Ltd.	Auto Choice Select one life cycle fund below Conservative (LC25) Moderate (LC50) Aggressive (LC75)
UTI Pension Fund Ltd			
Name of the Applicant			
Place			Signature / Thumb Impression* of Applicant
Date	D / D/ M/ M/ Y/ Y/ Y/	Υ	(refer instructions)
L	L		