



# Declaration Form

(To be retained by the Employer for future reference)

## Employees' Provident Fund Organization

THE EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (PARAGRAPH-34 & 57)

&

THE EMPLOYEES' PENSION SCHEME, 1995 (PARAGRAPH-24)

**DECLARATION BY A PERSON TAKING UP EMPLOYMENT IN AN ESTABLISHMENT ON WHICH EMPLOYEES' PROVIDENT FUND SCHEME, 1952 AND/OR EMPLOYEES' PENSION SCHEME, 1995 IS APPLICABLE, (PLEASE GO THROUGH THE INSTRUCTIONS)**

1) NAME (TITLE)

MR.	MS.	MRS.	V	I	S	H	A	L	S	R	I	V	A	S	T	A	V	A
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(PLEASE TICK)

2) DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
1	4	0	1	2	0	0	0

3) FATHER'S/ HUSBAND'S NAME

MR.	L	O	K	E	S	H	L	A	L	S	R	I	V	A	S	T	A	V	A
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4) RELATIONSHIP IN RESPECT OF (3) ABOVE (PLEASE TICK)

FATHER	HUSBAND
<input checked="" type="checkbox"/>	<input type="checkbox"/>

5) GENDER (PLEASE TICK)

MALE	FEMALE	TRANSGENDER
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6) MOBILE NUMBER (IF ANY)

8	4	0	0	2	2	2	2	6	8
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7) EMAIL ID (IF ANY)

v	i	s	h	a	l	8	4	0	0	2	2	2	2
6	8	@	g	m	a	i	l	.	c	o	m	.	

8) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PROVIDENT FUND SCHEME, 1952? (PLEASE TICK)

YES	NO <input checked="" type="checkbox"/>
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9) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PENSION SCHEME, 1995? (PLEASE TICK)

YES	NO <input checked="" type="checkbox"/>
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**IF RESPONSE TO ANY OR BOTH OF (8) & (9) ABOVE IS YES, THEN MANDATORILY FILL UP THE PREVIOUS EMPLOYMENT DETAILS AT (10,11&12):**



## 17) KYC DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	NUMBER	REMARKS, IF ANY
BANK ACCOUNT-1*	VISHAL SHRIVASTAVA	31182749256	SBI No000102
NPR/AADHAAR	VISHAL SRIVASTAVA	656053643421	
PERMANENT ACCOUNT NUMBER (PAN)	VISHALSRIVASTAVA	JRTPS4160N	
PASSPORT	VISHAL SRIVASTAVA	V0418836	03/01/2031
DRIVING LICENCE	VISHAL SRIVASTAVA	UP9320210002999	13/01/2040
ELECTION CARD			
RATION CARD			
ESIC CARD			

\* Mandatory Field (NOTE: BANK ACCOUNT NUMBER (ALONG WITH IFSC CODE) IS MANDATORY. YOU ARE HOWEVER ADVISED TO PROVIDE ALL KYC DOCUMENTS AVAILABLE WITH YOU IN ADDITION TO MANDATORY KYCS TO AVAIL BETTER SERVICES. SELF-ATTESTED PHOTOCOPIES OF THE DOCUMENTS MUST BE ATTACHED WITH THIS FORM.

## C. UNDERTAKING:

- A. I CERTIFY THAT ALL THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- B. IN CASE, EARLIER A MEMBER OF EPF SCHEME, 1952 AND/OR EPS, 1995,
- (I) I HAVE ENSURED THE CORRECTNESS OF MY UAN/ PREVIOUS PF MEMBER ID.
- (II) THIS MAY ALSO BE TREATED AS MY REQUEST FOR TRANSFER OF FUNDS AND SERVICE DETAILS IF APPLICABLE FROM THE PREVIOUS ACCOUNT AS DECLARED ABOVE TO THE PRESENT P.F. ACCOUNT. (THE TRANSFER WOULD BE POSSIBLE ONLY IF THE IDENTIFIED KYC DETAILS APPROVED BY PREVIOUS EMPLOYER HAS BEEN VERIFIED BY PRESENT EMPLOYER USING HIS DIGITAL SIGNATURE CERTIFICATE).
- (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

DATE: 12-11-2021

PLACE: JHANSI

SIGNATURE OF MEMBER

## DECLARATION BY PRESENT EMPLOYER

- A. THE MEMBER Mr./Ms./Mrs. .... HAS JOINED ON ..... AND HAS BEEN ALLOTTED PF MEMBER ID .....
- B. IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
- (POST ALLOTMENT OF UAN) THE UAN ALLOTTED FOR THE MEMBER IS .....
  - PLEASE TICK THE APPROPRIATE OPTION:  
THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE
    - HAVE NOT BEEN UPLOADED
    - HAVE BEEN UPLOADED BUT NOT APPROVED
    - HAVE BEEN UPLOADED AND APPROVED WITH DSC
- C. IN CASE THE PERSON WAS EARLIER A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
- THE ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A) ABOVE HAS BEEN TAGGED WITH HIS/HER UAN/PREVIOUS MEMBER ID AS DECLARED BY MEMBER.
  - PLEASE TICK THE APPROPRIATE OPTION:-
    - THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE BEEN APPROVED WITH DIGITAL SIGNATURE CERTIFICATE AND TRANSFER REQUEST HAS BEEN GENERATED ON PORTAL.
    - AS THE DSC OF ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MEMBER HAS BEEN INFORMED TO FILE PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT.

DATE:

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT