NOMINATION AND DECLARATION FORM FOR UNEXEMPTED/EXEMPTED ESTABLISHMENTS

Declaration and Nomination Form under the Employees Provident Funds and Employees Pension Schemes (Paragraph 33 and 61 (1) of the Employees Provident Fund Scheme 1952 and Paragraph 18 of the Employees Pension Scheme 1995)

1. Name (IN BLOCK LETTERS): BIPUL PANDIT	
Name Father's / Husband's Name	Surname
2. Date of Birth: 31/07/1996 3. Account No. 3697035 7074	
4. *Sex : MALE/FEMALE: MALE 5. Marital Status SINGLE	
6. Address Permanent / Temporary: Village - Kelahi, P.O Kelahi, P.S Markhand,	Nihijam,
Dist: - Jamtova, State- Thankhand,	Pin- 815354
PART - A (EPF)	

I hereby nominate the person(s)/eancel the nomination made by me previously and nominate the person(s) mentioned below to receive the amount standing to my credit in the Employees Provident Fund, in the en

Name of the Nominee (s)	Address	Nominee's relationship with the member	Date of Birth	Total amount or share of accumulations in Provident Funds to be paid to each nominee	If the nominee is minor name and address of the guardian who may receive the amount during the minority of the nominee
1	2	3	4	5	6
BIDYUT	Village +	FATHER	20/07/197	4	
PANDIT	P.O Kelahi, P.SMihijam,		1722		
	Dist: - Jamtara				
	State: - Than-				
	Pin-815354				

- *Certified that I have no family as defined in para 2 (g) of the Employees Provident Fund Scheme 1952 and should I acquire a family hereafter the above nomination should be deemed as cancelled.
- 2. * Certified that my father/mother is/are dependent upon me.

Bi and Pandit

Strike out whichever is not applicable

Signature/or thumb impression of the subscriber

PART - (EPS)

Para 18

I hereby furnish below particulars of the members of my family who would be eligible to receive Widow/Children Pension in the event of my premature death in service.

Sr. No	Name & Address of the Family Member	Age	Relationship with the member
(1)	(2)	(3)	(4)
			- 25

Certified that I have no family as defined in para 2 (vii) of the Employees's Family Pension Scheme 1995 and should I acquire a family hereafter I shall furnish Particulars there on in the above form.

I hereby nominate the following person for receiving the monthly widow pension (admissible under para 16.2 (a) (i) & (ii) in the event of my death without leaving any eligible family member for receiving pension.

Name and Address of the nominee	Date of Birth	Relationship with member

Date _				
				Signature or thumb impression of the subscriber
	CER	TIFICATE BY EM	IPLOYER	
Miss	Certified that the above declaration and	nomination has be-	en signed / thumb im	pressed before me by Shri / Smt./ I in my establishment after he/she has
	entries / the entries have been read over to his	m/her by me and got	confirmed by him/her.	
		¥.		

Date: 01/02/2021

Signature of the employer or other authorised officer of the establishment

Marquistech Prt. Hd. 6/8 Kalikapun road, near young hosizon school, Kolkala - 700099 Name & address of the Factory /Establishment

Place: Kolkota Date: 01/02/2021