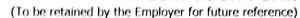
## **Declaration Form**





## **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)

(PLEASE GO THROUGH THE INSTRUCTIONS)																
1)	NAME (TITLE)  MB MS. MRS.  (PLEASE TICK)	SI	DI	HY	7	7	M	E	N	> 1	) É					
2)	DATE OF BIRTH	de constitue	D D	M 0	M 2	Υ 2	Y	Y 0	Y O							
3)	FATHER'S/ HUSBAND'S NAME  MR.	S	Ip	DH A	P	TH		m	EN		H	E				
4)	RELATIONSHIP IN RESPECT OF (PLEASE TICK)	(3) ABOV	E	FATHER	3/		HUSB	BAND								
5)	GENDER (PLEASE TICK)		MALE	-	FEMA	LE	TRA	NSGE	NDER							
,	MOBILE NUMBER (IF ANY)	3	S	9		3	2		0	(	0	5	3			
	EMAIL ID (IF ANY)	'n	d	d	h 1		ф.	n	4	)	m	5	0	0	2	<u>@</u>
	8) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PROVIDENT FUND SCHEME, 1952?  (PLEASE TICK)  YES  NO															
9)	(PLEASE TICK)  YES  NO  IF RESPONSE TO ANY OR BOTH OF (8) & (9) ABOVE IS YES, THEN MANDATORILY FILL UP THE PREVIOUS EMPLOYMENT DETAILS AT (10,11&12):															
	Page 1 of 3															

D) THE DETAILS OF THE UNIVERSAL ACCOUNT NUMBER (UAN) OR PREVIOUS PF MEMBER ID:  UAN  OR  PREVIOUS PF MEMBER ID  REGION CODE OFFICE CODE ESTABLISHMENT ID EXTENSION ACCOUNT NUMBER  11) DATE OF EXIT FOR PREVIOUS  MEMBER ID (DD/MM/YYYY)  D D M M Y Y Y Y  Y  12) (A) IF SCHEME CERTIFICATE ISSUED FOR PREVIOUS EMPLOYMENT, THEN SCHEME CERTIFICATE NUMBER:  (B) IF PENSION PAYMENT ORDER (PPO) ISSUED FOR PREVIOUS EMPLOYMENT, THEN PPO NUMBER:  B. OTHER DETAILS  13) INTERNATIONAL WORKER (PLEASE TICK)  INDIA  OTHER THAN INDIA (IF YES, PLEASE MENTION NAME OF THE COUNTRY)  13(G) PASSPORT NUMBER  13(C) PASSPORT VALID FROM  D D M M Y Y Y Y  TO  D D M M Y Y Y Y  TO  D D M M Y Y Y Y  ATTERNATIONAL QUIALIFICATION (PLEASE TICK)  MARRIED  UNIMARRIED  UNIMARRIED  WIDOW/ WIDOWER  DIVORCEE						Sterna to the second of the second	ineli cog hish-seller top on	error throplands(a) for	a ciscondodo avantos sea	The Author Commission	OMER A COMPANY OF THE PARK OF	NA WEST TO SEE	M. V. COLOR DE CONTROL DE			
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15	WYO	D
1/1	KYC	DETAILS

KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	Number	REMARKS, IF ANY
BANK ACCOUNT-1*			IFSC CODE*
NPR/AADHAAR			
PERMANENT ACCOUNT NUMBER (PAN)			
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD	distribution of the second	1200000	appellation -
ESIC CARD	,		

<sup>\*</sup> 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:	: 11/08/25.	
DIACE	E. Our O.	SIGNATURE OF MEMBER
	DECLARATION BY PRESENT	EMPLOYER
Α.	THE MEMBER Mr./Ms./Mrs HAS JOINED ON	AND HAS BEEN ALLOTTED PF MEMBER ID
В.	IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 195  (POST ALLOTMENT OF UAN) THE UAN ALLOTTED FOR THE MEMI PLEASE TICK THE APPROPRIATE OPTION:	BER IS
	THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABA  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 AN THE ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A)	ID EPS, 1995: ABOVE HAS BEEN TAGGED WITH HIS/HER UAN/PREVIOUS

PLEASE TICK THE APPROPRIATE OPTION:-

MEMBER ID AS DECLARED BY MEMBER.

- 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: 11 08 75

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT