# New Form No. 11 – Declaration form

## (To be retained by the employer for future reference)

***EMPLOYEES PROVIDENT FUND ORGANISATION***

*Employees Provident Funds Scheme, 1952 (Paragraph 34 & 57) & Employees’ Pension Scheme, 1995 (Paragraph 24)*

# (Declaration by a person taking by employment in any establishment on which EPF Scheme, 1952 and /or EPS 1995 is applicable)

|  |  |  |
| --- | --- | --- |
| 1 | Name of the member (Employee) (Aadhaar Name) |  |
| 2 | Father’s Name : Spouse’s Name: |  |
| 3 | Date of Birth: (**DD/MM/YYYY**) |  |
| 4 | Gender: (Male/Female/Transgender) |  |
| 5 | Marital Status: (Single/Married/Widow/Widower/Divorcee |  |
| 6 | 1. Email ID: 2. Mobile Number: (Aadhaar Registered) |  |
| 7 | Whether Earlier a member of Employees’ Provident Fund Scheme, 1952 | **YES / NO** |
| 8 | Whether Earlier a member of Employees’ Pension Scheme, 1995 | **YES / NO** |
| 9 | Previous Employment Details:[if Yes to 7 AND OR 8 above]  (a) Universal Account Number: |  |
| (b) Previous PF account number: |  |
| (c) Date of Exit from previous employment: (DD/MM/YYYY) |  |
| (d) Scheme Certificate No. (if Issued) |  |
| (e) Pension Payment Order (PPO) No. (if Issued) |  |
| 10 | (a) International Worker : | **YES / NO** |
| (b) If Yes, State Country of Origin(India/Name of the Country) |  |
| (c) Passport No. |  |
| (d) Validity of Passport [(DD/MM/YYYY) to (DD/MM/YYYY)] |  |
| 11 | KYC Details: (attach self-attested copies of following KYC’s) |  |
| (a) Bank account No. & IFSC Code |  |
| (b) AADHAR Number |  |
| (c) Permanent Account Number (PAN), |  |

**UNDERTAKING**

1. Certified that the particulars are true to the best of my knowledge.
2. I authorize EPFO to use AADHAAR for verification/authentication/eKYC purpose for service delivery
3. Kindly transfer the funds and services details, if applicable, from the previous PF account as declared above to present PF account. (The transfer would be possible if the identified KYC detail approved by previous employer hasbeen verified by present employer using Digital Signature Certificate)
4. In case of changes in above details, the same will be intimated to employer at the earliest.

# (TICKONTHEBELOWOPTIONWHICHEVERIS APPLICABLE)

I HAVE NOT WITHDRAWN THE EPF & EPS ACCUMULATED AMOUNT FROM MY PREVIOUS EMPLOYER(S) EPF ACCOUNT, HENCE WOULDLIKE TO TRANSFER THE SAME TO MY CURRENT EPF ACCOUNT.

I HAVE ALREADY WITHDRAWN THE EPF & EPS ACCUMULATIONS FROM MY PREVIOUS EMPLOYER(S) EPF ACCOUNT NUMBER(S). I HERE BY DECLARE THAT THE ABOVE MENTIONED DETAILS ARE TRUE TO THE BEST OF MY KNOWLEDGE.

NEVER CONTRIBUTED TOWARDS PROVIDENT FUND

I HAVE ALREADY APPROCHED TOMY PREVIOUS EMPLOYER FOR PROVIDENT FUND WITHDRAWAL

*Date:*

*Place: Signature of Member*

## DECLARATION BY PRESENT EMPLOYER

1. *The Member Mr. /Ms. / Mrs. …………………………….. has joined on and has been allotted PF account*

*number ………………………………*

1. *In case the person was earlier not a member of EPF Scheme, 1952 and EPS Scheme, 1995:*

***(Post allotment of UAN)*** *The UAN for the member is …………………………………..*



## Please Tick the Appropriate Option

*The KYC details of the member in the UAN database*

HAVE NOTBEEN UPLOADED

HAVEBEEN UPLOADED NOT APPROVED

HAVEBEEN UPLOADED AND APPROVED WITH DSC

1. *In Case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:*

*The above PF account number /UAN of the member as mentioned in (A) above has been tagged with his/herUAN/previous Member ID as declared by member.*

## Please Tick the Appropriate Option

*The above member in the UAN database have been approved with Digital Signature Certificate and transferrequest has been generated on portal*

*As the DSC of establishment are not registered with EPFO, the member has been informed to file physicalclaim (Form 13) for transfer of funds from his previous establishment.*

*Date: Signature of Employer with Seal of Establishment*

*EMPLOYEE’S SELF-DECLARATION*

*(Please ignore, if this is your first-time employment)*

1. Employee’s declaration about his / her / their previous employment

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYEES PREVIOUS EMPLOYMENT DETAILS** | | | | | | | |
| Present Emp. ID: | |  | | | | | |
| Name of the Employee: | |  | | | | | |
| Date of Joining: | |  | | | | | |
|  | | | | | | | |
| **Sl.**  **No.** | **Name of the Previous Establishments** | | **EPF A/c #** | **UAN # (12 digits)** | **Date of Joining (DD/MM/YY)** | **Date of Exit (DD/MM/YY)** | **PF account status (withdrawn or transferred)** |
| 1 |  | |  |  |  |  |  |
| 2 |  | |  |  |  |  |  |
| 3 |  | |  |  |  |  |  |
| 4 |  | |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |

1. Employee’s declaration about pension membership / contribution
   1. I, S/o (or) D/o (or) W/o hereby declare that I have verified my Pension Scheme membership / contribution based on my previous establishment’s e-Passbook towards my EPF account and I declare that the details provided in Sl. No. 7 and 8 in the Declaration Form (Form 11) is correct to the best of my knowledge.
   2. I, hereby give my consent to (Establishment name) to proceed with the contributions towards Employees’ Provident Fund & Employee’s Pension Scheme.
   3. I understand and declare that I am solely responsible for any mistakes caused by me due to my wrong declarations and I will rectify on my own with the EPF department.

Name of the Employee : Date :

Signature of the Employee : Place :