The Employees' Pension Scheme, 1995



FORM 2 EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952

[Paragraphs 33 AND 61(1)] EMPLOYEES' PENSION SCHEME, 1995 [Paragraphs 18]

DECLARATION AND NOMINATION FORM UNDER THE EMPLOYEES' PROVIDENT FUNDS SCHEME AND EMPLOYEES' PENSION SCHEME

1. UAN : 102206224694

2. Name (in block letters) : THAMEEM SHAHITH3. Father's / Husband's Name : UDUMAN MYDEEN

4. Date of Birth : 02/10/2002

5. Gender : MALE

6. Marital Status : UN-MARRIED

7. Address (Permanent) : Kadayanallur, 6, Peer Mohamed Thaika Street, Tirunelveli, TENKASI, TAMIL

NADU, 627751

8. Address (Temporary) : Kadayanallur, 6, Peer Mohamed Thaika Street, Tirunelveli, TENKASI, TAMIL

NADU, 627751

9. (A) Date of Joining of EPF : 10/05/2025

(B) Date of Joining of FPS : --

(C) Date of Joining of EPS : 10/05/2025

PART A (EPF)

I hereby nominate person(s) / cancel the nomination made by me previously and nominate the person(s) mentioned below to receive the amount standing to my credit in the

Name of the Nominee / Nominees	Address	Nominees's relationship with the Member	Date of Birth	Total amount or share of accumulations in Provident Fund to be paid to each nominee	If the Nominee is minor, name and relationship and address of the guardian who may receive the amont during the minority of
(1)	(2)	(3)	(4)	(5)	(6)
FATHIMA AADHAAR: XXXX XXXX 6244 Bank A/c: NOT AVAILABLE	Kadayanallur, 6, Peer Mohamed Thaika Street, Tirunelveli, TENKASI, TAMIL NADU, 627751	Dependent Mother	05/01/1980	100%	

- 1. *Certified that I have no family as defined in Para 2(g) of the Employees' Provident Funds Scheme, 1952 and should I acquire a family hereafter the above nomination should be
- 2. *Certified that my father/mother is/are dependant upon me.

(Signature is not required as the document is to be digitally signed)



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PART B (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 death:

SI. No.	Name of the Family members	Address	Date of Birth	Relationship with the
(1)	(2)	(3)	(4)	(5)
1				

*Certified that I have no family as defined in Para 2(vii) of the Employees' Pension Scheme, 1995 and should I acquire a family hereafter I shall furnish particulars thereon in

I hereby nominate the following person for receiving the monthly widow pension admissible under para 16(2)(a)(i) and (ii) in the event of my death without leaving any

Name and Address of the Nominee	Date of Birth	Relationship with the member
FATHIMA AADHAAR: XXXX XXXX 6244 Bank A/c: NOT AVAILABLE	05/01/1980	MOTHER

Date 24-Sep-2025

(Signature is not required as the document is to be digitally signed)