

(On letter Head of the Establishment)

Joint Declaration Form

I _____ having UAN _____,

PF account _____ and Aadhaar _____

is/was the employee of establishment M/S. _____.

The personal details furnished to EPFO earlier were found to be incorrect /blank, and therefore request for change/updation in the member profile as follows.

S. No.	Details/particulars	Incorrect details	Correct details
1	Aadhaar		
2	Name		
3	DOB		
4	Gender		
5	Father's/Mother's Name		
6	Relationship		
7	DOJ		
8	DOL		
9	Reason of leaving		
10	Marital Status		
11	Nationality		

I _____ S/o _____ authorized signatory of the establishment, have verified the request, document attached and the records of the establishment and certify that the facts mentioned above are correct. I am also enclosing _____, _____ and _____ (documents of Establishment) in support of the request of the employee mentioned above.

We _____ (Employee) and _____ (Authorized Signatory) hereby declare we have not concealed any facts and the above-mentioned facts are correct. We also indemnify that in case of wrong payment/over payment/under payment because of the above furnished information shall be jointly held responsible.

Authorized signatory

Name & Signature of the member

APPLICABLE ONLY FOR CLOSED ESTABLISHMENTS

In case of closed/non-traceable establishment where authorized signatory is not available.

I _____ (mention the authority/post) _____
residing at _____,
official_email _____, certify that
at _____ (name of PF member) is known to me and I have
verified all the documents with originals attached with his request for change.

Name & Signature of the authority

Seal of the authority

List of Authorities to attest the claims/JD in case of closed establishment:

1. Magistrate,
2. A Gazetted Officer,
3. Post/Sub postmaster,
4. Member of Parliament (MP)
5. Member of Legislative Assembly (MLA)
6. Member of Municipalities and Municipal Corporations,
7. Member of Central Board of Trustees, Regional Committee, Employee's Provident Fund,
8. Manager of the Bank where the Bank Account of the claimant is maintained,
9. Head of any recognized educational institution,
10. Village Panchayat Head or Mukhiya or its equivalent authority (for rural areas),
11. Village Panchayat Secretary or VRO or equivalent (for rural areas),
12. Tehsildar,
13. Any authorized official as may be approved by the Commissioner.