

Composite Declaration Form-11

(To be retained by the employer for future reference)

EMPLOYEES' PROVIDENT FUND ORGANIZATION

Employees' Provident Funds Scheme, 1952 (Paragraph-34 & 57) & Employees' Pension Scheme, 1995 (Paragraph-24)

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

Name of the member															
2 Spouse's Name	1	Name of the member							Mr. PRASHANT RAWAT						
4 Gender: (Male/Female/Transgender) M Marital Status: (Married/Unmarried/Widow/ Widower/Divorcee) (a) Email ID: (b) Mobile No.: 7 Present employment details: (b) Mobile No.: 7 Present employment details: Date of joining in the current establishment (DD/MM/YYYY) AVEAULT STATES S	2	1						Mr. YOGENDRA KUMAR SHARMA							
Marital Status: (Married/Unmarried/Widow/ Widower/Divorcee) (a) Email ID:	3	Date of Birth: (05/01/2001											
(a) Email ID: (b) Mobile No.: Present employment details: Date of joining in the current establishment (DD/MM/YYYY) (b) Mobile No.: Present employment details: Date of joining in the current establishment (DD/MM/YYYY) (c) Passport No. (d) Mobile No.: Present employment details: Date of joining in the current establishment (DD/MM/YYYY) (d) Mobile No.: (d) Mobile No.: Present employment details: (stach self attested copies of following KYCs) a) Bank Account No.: b) IFS Code of the branch: (c) AADHAR Number d) Permanent Account Number (PAN), if available d) Permanent Account Number (PAN), if available DDMPR4499J Nether earlier a member of Employees' Provident Fund Scheme, 1952 Nether earlier a member of Employees' Pension Scheme, 1995 Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Universal PF Account Number (DDMM/YYYY) Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts None Contributory Pendod (NCP) Days Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts None Contributory Pendod (NCP) Days Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts None Contributory Pendod (NCP) Days Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts None Contributory Pendod (NCP) Days Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts None Contributory Yyyyy None (if issued) None Contributory Yyyy None (if issued) None Contributory Yyyyy None (if issued) None Contributory None (if issued) None Contributory None	4	, ,							M						
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Date of joining in the current establishment (DD/MM/YYYY)	6							prash9650@gmail.com							
a) Bank Account No. : b) IFS Code of the branch: c) AADHAR Number d) Permanent Account Number (PAN), if available DDMPR4499J Whether earlier a member of Employees' Provident Fund Scheme, 1952 Whether earlier a member of Employees' Pension Scheme, 1995 Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Name & Account Number Number PFAccount Number Number Date of joining (DD/MM/ YYYYY) Period (NCP) Days Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Name & Address Number Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Name & Address of the Trust Name & Address of	7				DD/MM	/YYYY)		04/08/2023							
b) IFS Code of the branch: c) AADHAR Number d) Permanent Account Number (PAN), if available Whether earlier a member of Employees' Provident Fund Scheme, 1952 Whether earlier a member of Employees' Pension Scheme, 1995 N Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Universal PF Account Number (DD/MM/ YYYYY) Scheme (Ipsisued) Address O Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Name & Address of UAN Member Date of Joining (DD/MM/ YYYYY) Subject Ordinary Period (NCP) Days Date of exit Scheme Contributory Period (NCP) Days		KYC Details: (a	attach self att	ested copies o	f follow	ing KYC	s)								
d) Permanent Account Number (PAN), if available Whether earlier a member of Employees' Provident Fund Scheme, 1952 Whether earlier a member of Employees' Pension Scheme, 1995 Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Number Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Number Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts O Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Name & Address of UAN Member EPS Ale Joining VYYYY) No. (if Issued) Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts Name & Address of UAN Member EPS Ale Joining VYYYY) No. (if No. (if No. (if ISSUED)) No. (if No. (if ISSUED) No. (if ISSUED) No. (if ISSUED) No. (if No. (if ISSUED) No. (if I	8	, ,													
Whether earlier a member of Employees' Provident Fund Scheme, 1952 Whether earlier a member of Employees' Pension Scheme, 1995 N		c) AADHAR Nu	mber					355675473795							
Fund Scheme, 1952 Whether earlier a member of Employees' Pension Scheme, 1995 N								DDMPR4499J							
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Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted Establishment Name & Account Number PF Account Number Date of joining (DD/MW) (DD/MW) (YYYY) Period (NCP) Days	10			N											
Establishment Name & Account Number PF Account Number Date of joining (DD/MM/ YYYY) No. (if issued) Contributory Period (NCP) Days	11	<u> </u>	oyment de	tails: (if Yes	to 9 Al	ND/OR	10 a	bove) -	Un-exe	mpted					
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Name & Address of the Trust	12	Previous empl	ovment de	tails: (if Yes	to 9 Al	ND/OR	10 a	hove) -	For Exe	mnte	d Truete				
b) If yes, state country of origin (India/Name of other country) c) Passport No.	12	Name & Address		Memi EPS	Member EPS Ale		of ng IM/	Date (DD	of exit /MM/	Scheme Certificate No. (if		Non Contributory Period (NCP)			
b) If yes, state country of origin (India/Name of other country) c) Passport No.	40		I Washington												
c) Passport No.	13		•								N				
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UNDERTAKING

- 1. Certified that the particulars are true to the best of my knowledge.
- 2. I authorize EPFO to use my Aadhar for verification/authentication/e-KYC purpose for service delivery.
- 3. Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.*
- 4. In case of changes in above details, the same will be intimated to employer at the earliest.

Da Pla		alore, Karnataka	Signature of Member					
		DECLARATION BY PRES	SENT EMPLOYER					
A.	The mer	mber Mr/Ms/Mrs <u>Mr. PRASHANT RAWAT</u> has joine	ed on <u>04/08/2023</u> and has been	allotted PF No				
50	7 <u>225</u> and l	UAN Ō						
B.	In case t	the person was earlier not a member of EPF Sche	ne,1952 and EPS,1995:					
	• Ple	ase Tick the Appropriate Option:						
		The KYC details of the above member in the UAN	√ database					
		Have not been uploaded						
		Have been uploaded but not approved						
		Have been uploaded and approved with DSC/e-s	ign.					
C.		the person was earlier a member of EPF Scheme, ase Tick the Appropriate Option: The KYC details of the above member in the UAN Signature Certificate and transfer request has be The previous Account of the member is not Aadh initiated.	N database have been approved with en generated on portal.					
	Date:		Signature of Employ Establishn					

^{*} Auto transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.