



507225

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.)

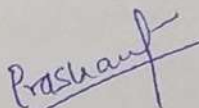
1	Name of the member	Mr. PRASHANT RAWAT						
2	Father's Name <input checked="" type="checkbox"/> Spouse's Name <input type="checkbox"/>	Mr. YOGENDRA KUMAR SHARMA						
3	Date of Birth: (DD/MM/YYYY)	05/01/2001						
4	Gender: (Male/Female/Transgender)	M						
5	Marital Status: (Married/Unmarried/Widow/ Widower/Divorcee)	UNMARRIED						
6	(a) Email ID: (b) Mobile No.:	prashant.rawat@mercedes-benz.com prash9650@gmail.com +919650252091						
7	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	04/08/2023						
8	KYC Details: (attach 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	50100650796521 HDFC0003962 355675473795 DDMPR4499J						
9	Whether earlier a member of Employees' Provident Fund Scheme, 1952	N						
10	Whether earlier a member of Employees' Pension Scheme, 1995	N						
11	Previous employment details: (if Yes to 9 AND/OR 10 above) - Un-exempted							
	Establishment Name & Address	Universal Account Number	PF Account Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPONumber (if issued)	Non Contributory Period (NCP) Days
		0						
12	Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
	Name & Address of the Trust	UAN	Member EPS Ale Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non Contributory Period (NCP) Days	
13	a) International Worker:							
	b) If yes, state country of origin (India/Name of other country)						N	
	c) Passport No.							
	d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						to	

Prashant

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.

Date: 19/08/2023
Place: Bangalore, Karnataka


Signature of Member

DECLARATION BY PRESENT EMPLOYER

A. The member Mr/Ms/Mrs Mr. PRASHANT RAWAT has joined on 04/08/2023 and has been allotted PF No 507225 and UAN 0

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

• **Please 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-sign.

C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

• **Please Tick the Appropriate Option:**

- ☐ The KYC details of the above member in the UAN database have been approved with E-sign/Digital Signature Certificate and transfer request has been generated on portal.
☐ The previous Account of the member is not Aadhar verified and hence physical transfer form shall be initiated.

Date:

Signature of Employer with Seal of
Establishment

* 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.