

**EPF & ESI Details Required Form**

1	NAME AS PER AADHAR				
2	NAME OF THE FATHER OR HUS BAND				
3	DATE OF BIRTH AS PER AADHAR				
3	MARITAL STATUS				
4	PHONE NO				
5	E MAIL ADDRESS				
6	QUALIFICATION				
7	DATE OF JOINING				
8	SALARY FIXED				
9	PAN NO				
10	AADHAR NO				
11	NAME AS ON BANK ACCOUNT				
	BANK ACCOUNT NO. (PERSONAL)				
	BRANCH NAME				
	IFSC CODE				
	BANK NAME				
12	ADDRESS				
13	NEAREST ESI HOSPITAL				
14	NAME OF NOMINEE				
15	NOMINEE DATE OF BIRTH				
16	NOMINEE AADHAR NO				
17	FAMILI MEMBERS DETAILS DOB SHOULD BE ENTERED AS DATE MONTH YEAR BETWEEN DDMMYY AS DOT MARK				
	NAME OF FAMILY MEMBER	AADHAR NO	DOB	RELATION	
1					
2					
3					
4					
5					
6					
NOTE: ALL AADHAR AND BANK COPY XEROX SHOULD BE ENCLOSED					