

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	QULIFICATION						
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						