



The Employees' Pension Scheme, 1995

FORM 2

EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952

[Paragraphs 33 AND 61(1)]

EMPLOYEES' PENSION SCHEME, 1995



[Paragraphs 18]

DECLARATION AND NOMINATION FORM UNDER THE EMPLOYEES' PROVIDENT FUNDS
SCHEME AND EMPLOYEES' PENSION SCHEME

1. UAN	: 102227486810	
2. Name (in block letters)	: VISHAL CHANDRAVANSI	
3. Father's / Husband's Name	: THAKUR PRASAD CHANDRAVANSI	
4. Date of Birth	: 20/01/2003	
5. Gender	: MALE	
6. Marital Status	: UN-MARRIED	
7. Address (Permanent)	: 300, shivpuri, ranayal, Ranayal, kalapipal, Shajapur, SHAJAPUR, MADHYA PRADESH, 465337	
8. Address (Temporary)	: 5, Kailash Hostel, Mahalakshmi illam, Keeranatham, Coimbatore, COIMBATORE, TAMIL NADU, 641035	
9. (A) Date of Joining of EPF	: 31/07/2025	
(B) Date of Joining of FPS	: --	
(C) Date of Joining of EPS	: 31/07/2025	

PART A (EPF)

I hereby nominate person(s) / cancel the nomination made by me previously and
nominate the person(s) mentioned below to receive the amount standing to my credit in the


Name of the Nominee / Nominees	Address	Nominees's relationship with the Member	Date of Birth	Total amount or share of accumulations in Provident Fund to be paid to each nominee	If the Nominee is minor, name and relationship and address of the guardian who may receive the amount during the minority of
(1)	(2)	(3)	(4)	(5)	(6)
 THAKUR PRASAD AADHAAR: XXXX XXXX 1554 Bank A/c: NOT AVAILABLE	300, shivpuri, ranayal, Ranayal, kalapipal, Shajapur, SHAJAPUR, MADHYA PRADESH, 465337	Dependent Father	07/04/1979	50%	--
 SANGITA BAI AADHAAR: XXXX XXXX 9015 Bank A/c: NOT AVAILABLE	300, shivpuri, ranayal, Ranayal, kalapipal, Shajapur, SHAJAPUR, MADHYA PRADESH, 465337	Dependent Mother	01/01/1983	50%	--

1. *Certified that I have no family as defined in Para 2(g) of the Employees' Provident Funds Scheme, 1952 and should I acquire a family hereafter the above nomination should be
2. *Certified that my father/mother is/are dependant upon me.

(Signature is not required as the document is to be digitally signed)


PART B (EPS)
(Para 18)

I hereby furnish below particulars of the members of my family who would be eligible to receive widow / children pension in the event of my death:

Sl. No.	Name of the Family members	Address	Date of Birth	Relationship with the
(1)	(2)	(3)	(4)	(5)
1	 --	--	--	--

*Certified that I have no family as defined in Para 2(vii) of the Employees' Pension Scheme, 1995 and should I acquire a family hereafter I shall furnish particulars thereon in

I hereby nominate the following person for receiving the monthly widow pension admissible under para 16(2)(a)(i) and (ii) in the event of my death without leaving any

Name and Address of the Nominee	Date of Birth	Relationship with the member
 <p>THAKUR PRASAD AADHAAR: XXXX XXXX 1554 Bank A/c: NOT AVAILABLE</p>	07/04/1979	FATHER

Date 15-Aug-2025

(Signature is not required as the document is to be digitally signed)