EMPLOYEES' PROVIDENT FUND ORGANISATION

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

New Form No.-11 - Declaration Form

*(To be retained by the employer for future reference)*

# (Declaration by a person taking up employment in any establishment on whici EPF Scheme, 1952 and/or EPS, 1995 is applicable)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1 | Name of the member | POLINENI TEJASWI | | | |
| 2 | Father's Name | POLINENI ANJANEYULU | | | |
| 3 | Date of Birth:(DD/MM/YYYY) | 09/04/1992 | | | |
| 4 | Gender: | FEMALE | | | |
| 5 | Marital Status : (Married/Unmarried/Widow/Divorcee) | UNMARRIED | | | |
| 6 | 1. Email ID: 2. Mobile No: | [TEJASWI.SURYA229@GMAIL.COM](mailto:TEJASWI.SURYA229@GMAIL.COM) 9441290679 | | | |
| 7 | Whether earlier a member of Emploees' Provident Fund Scheme, 1952 |  |  | Yes |  |
| 8 | Whether earlier a member of Employees Pension Scheme, 1995 |  |  |  | Yes |
| 9 | **Previous employment details: [if Yes to 7 AND/OR 8 above]**  a) Universal Account Number: | 101258174480 | | | |
| b) Previous PF Account Number: |  | | | |
| c) Date of exit from previous employment (DD/MM/YYYY) | 03/12/2021 | | | |
| d) Scheme Certiﬁcate No. (if issued) |  | | | |
| e) Pension Payment Order (PPO) No. (if issued) |  | | | |
| 10 | a) International Worker: |  |  |  | No |
| b) If yes, state country of origin:(India/Name of other country) |  | | | |
| c) Passport No. |  | | | |
| d) Validity of passport[(DD/MM/YYYY) to (DD/MM/YYYY)] | From: | To: |  |  |
| 11 | **KYC Details:**(attach self attested copies of following KYCs) |  | | | |
| a) Bank Account No. & IFS Code: |  | | | |
| b) AADHAR Number | 246368148457 | | | |
| c) Permanent Accout Number (PAN), if available | DLTPP9044N | | | |

## Certiﬁed that the particulars are true to the best of my knowledge.

**U NDERTAKING**

Date: 06/12/2021  
Place: hyderabad

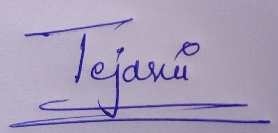
1. I authorize EPFO to use my Aadhar for veriﬁcation/authentication/eKYC purpose for service delivery.
2. Kindly transfer the funds and service details, if applicable from the previous PF account as declared above to the present P.F. Account.

(The transfer would be possible only if the identied KYC detail approved by previous employer has been veriﬁed by present employer using his Digital Signature Certiﬁed)

1. In case of changes in above details, the same will be intimated to employer at the earliest.

Signature of Member:

**D ECLARATION BY PRESENT EMPLOYER**



* 1. The member has joined on and has been allotted PF Number
  2. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

**(Post allotment of UAN)** UAN allotted for the member is

### Please Tick the Appropriate Option:

  The KYC details of the aboce member in the UAN database

    Have not been uploaded

    Have been uploaded but not approved

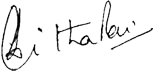
    Have been uploaded and approved with DSC

* 1. In case the person was earlier a member of EPF Scheme, 1952 and EPSm 1995:

The above PF Account number/UAN of the member as mentioned in (A) above has been tagged with his/her UAN/Previous Member ID as declared by member.

### Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database have been approved with Digital Signature Certiﬁcate and transfer request has been generated on portal.

 As the DSC of establishment are not registered with EPFO, the member has been informed to ﬁle physical claim (Form-13) for transfer of funds from his previous establishment.

Date   
06/12/2021

### Lalitha M She†y

**ASSOCIATE VICE PRESIDENT - HUMAN RESOURCES**

Signature of Employer with Seal of Establishment: