KN/120X/

New Form No.11- Declaration Form
(To be retained by the employer for future reference)

EMPLOYEES PROVIDENT FUND ORGANIZATION
Employees Provident Fund Scheme, 1952 (paragraph 34 & 57) &
Employees Pension Scheme, 1995 (paragraph 24)

Emp Code: _____

Company: _____

(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				
2	Father's Name ( ) Husband's Name ( ) (Please tick whichever is applicable)				
3	Date of Birth (DD/MM/YYYY)				
4	Gender: (Male / Female / Transgender)				
5	Marital Status (Married / Unmarried / Widow / Divorce)				
6	a) Email ID: b) Mobile No.				
7*	Whether earlier a member of Employees Provident Fund Scheme 1952	Yes ☐		No ☐	
8*	Whether earlier a member of Employees Pension Scheme 1995	Yes ☐		No ☐	
9	**If response to any or both of (7) & (8) above is yes. MANDATORY FILL UP THE (COLUMN 9)**				
	a) Universal Account Number (UAN)				
	b) Previous PF A/C. No.				
	c) Date of exit from previous employment (DD/MM/YYY)				
	d) Scheme Certificate No (if Issued)				
	e) Pension Payment Order (PPO) No (if Issued)				
10	a) International Worker:	Yes ☐		No ☐	
	b) If Yes, State Country of Origin (India /Name of Other Country)				
	c) Passport No				
	d) Validity of Passport (DD/MM/YYY) to (DD/MM/YYY)				
11	**KYC Details: (attach Self attested copies of following KYCs) ****				
	a) Bank Account No. & IFS code				
	b) AADHAR Number (12 Digit)				
	c) Permanent Account Number (PAN), If available				

UNDERTAKING

1) Certified that the Particulars are true to the best of my Knowledge.
2) I authorize EPFO to use my Aadhar for verification / 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 PF Account. The Transfer Would be possible only if the identified KYC details approved by previous employer has been verified by present employer.
4) In case of changes in above details the same will be intimate to employer at the earliest.

Date:

Place: Signature of Member

DECLARATION BY PRESENT EMPLOYER

A) The member Mr./Ms./Mrs. …………………………………………... has joined on ………………….and has been allotted PF Number……………………………….

B) In case person was earlier not a member of EPF Scheme, 1952 and EPS, 1995.
- **(Post allotment of UAN)** The UAN Allotted for the member is…………………………...
- **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

C) In case the person was earlier a member of EPF Scheme ,1952 and EPS, 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 asdeclared 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 (Form13) for transferof funds from his previous establishment.

Date: Signature of Employer With seal of Establishment

NOMINATION AND DECLARATION FORM
FOR EXEMPTED/UNEXEMPTED ESTABLISHMENTS

Declaration and Nomination Form under the Employees' Provident Funds & Employees' Pension Scheme (Paragraph 33 and 61 (1) of the Employees' Provident Fund Scheme, 1952 & Paragraph 18 of the Employees' Pension Scheme, 1995)

1. Name (In BLOCK LETTERS) …………………...……………………………………………..

2. Father's / Husband's Name ………………………………………………………………....

3. Date of Birth ……………………..……... 4. Sex ……………………….…………….…..

5. Employee No………………………….... 6. P.F. Account No…..……………………….…

7. Marital Status ……………………….….. 8. Mobile No……………………………..……..

9. Address Permanent / Temporary ………………………………………………….………..

………………………………………………………………......

……………………………………………………………………..

PART – A (EPF)

I hereby nominate the 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 Employees' Provident Fund, in the event of my death:

Name & Address of the Nominee/s	Nominee'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, relationship & address of the guardian who may receive the amount during the minority of the nominee
1	2	3	4	5

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

*Strike out whichever is not applicable   **Signature / Thumb impression of the Subscriber**

PART – B (EPS)
Para 18

I hereby furnish below particulars of the members of my family who would be eligible to receive Widow/Widower/ Children Pension in the event of my death.

Sl. No.	Name of the Family Member	Address	Date of Birth	Relationship with the member
1	2	3	4	5

*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 shall furnish particulars thereon in the above form.

*I hereby nominate the following person for receiving the monthly widow pension admissible under para 16.2 (g) (i) & (ii) in the event of my death without leaving any eligible family member for receiving pension.

Name & Address of the Nominee	Date of Birth	Relationship with the member

Date:
Place:
Signature / Thumb impression of the Subscriber

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed/thumb impressed before me by
Shri/Smt/Kum ……………………………………………………….. employed in the establishment after he/she
has read the entries/entries have been read over to him/her by me and got confirmed by him/her.

Signature of the Employer or other
Authorized officer of the Establishment

Date:

Name & address of the Establishment