Declaration Form

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(To be retained by the Employer for future reference)

Employees' Provident Fund Organization

THE EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (PARAGRAPH-34 & 57)

THE EMPLOYEES' PENSION SCHEME, 1995 (PARAGRAPH-24)

DECLARATION BY A PERSON TAKING UP EMPLOYMENT IN AN ESTABLISHMENT ON WHICH EMPLOYEES' PROVIDENT FUND SCHEME,

1952 AND/OR EMPLOYEES' PENSION SCHEME, 1995 IS APPLICABLE.

(PLEASE GO THROUGH THE INSTRUCTIONS)

1) NAME (M) (TITLE) MR. MS. MRS. (PLEASE TICK)			
2) DATE OF BIRTH(M) D D	M M Y Y Y		
3) FATHER'S/HUSBA MR. ND'S NAME (M)			
4) (M)RELATIONSHIP IN RESPECT OF (3) ABOVE FA	ATHER HUSBAND		
5) GENDER(M) (PLEASE TICK) MALE	FEMALE TRANSGENDER	R	
6) MOBILE NUMBER (IF ANY) (M)			
7) (M)EMAIL ID (IF ANY)			
8) (M)WHETHER EARLIER A MEMBER OF THE EMPLOY (PLEASE TICK)	YES' PROVIDENT FUND SCHEME, I	NO]
9) (M)WHETHER EARLIER A MEMBER OF THE EMPLOY 1995? (PLEASE TIC		NO]

If response to any or both of (8) & (9) above is yes, then <u>mandatorily</u> fill up the previous employment details at (10,11&12):

10) (M)THE DETAILS OF THE UNIVERSAL ACCOUNT NUMBER (UAN) OR PREVIOUS PF MEMBERID: UAN OR PREVIOUS PF MEMBERID REGION CODE OFFICE CODE ESTABLISHMENT ID EXTENSION ACCOUNT NUMBER (A) IF SCHEME CERTIFICATE ISSUED FOR PREVIOUS EMPLOYMENT, THEN SCHEME CERTIFICATE NUMBER: (B) IF PENSION PAYMENT ORDER (PPO) ISSUED FOR PREVIOUS EMPLOYMENT, THEN PPO NUMBER: B. OTHER DETAILS 13) (M) INTERNATIONAL WORKER (PLEASE TICK) INDIA OTHER THAN INDIA (IF YES, PLEASE MENTION NAME OF THE COUNTRY) 13(a) PASSPORT VALID FROM D D M M Y Y Y Y TO	Α.	PREVIOUS	EMPLOYM	IENT DET	TAILS												
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17) (M)KYC DETAILS

KYC DOCUMENT TYPE	Name as on KYC Document	Number	REMARKS, IF ANY
BANK ACCOUNT-1*(M)			IFSC CODE*
NPR/AADHAAR(M)			
PERMANENT ACCOUNT NUMBER (PAN) (M)			
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD			
ESIC CARD			

^{*} Mandatory Field (<u>Note</u>: Bank Account NUMBER (along with IFSC code) is mandatory. You are however advised to provide all KYC documents available with you in addition to mandatory KYCs to avail better services. Self-Attested photocopies of the documents must be attached with this form.

C. UNDERTAKING:

- A. I CERTIFY THAT ALL THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- B. IN CASE, EARLIER A MEMBER OF EPF SCHEME, 1952 AND/OR EPS, 1995,
 - (I) I HAVE ENSURED THE CORRECTNESS OF MY UAN/ PREVIOUS PF MEMBER ID.
 - (II) THIS MAY ALSO BE TREATED AS MY REQUEST FOR TRANSFER OF FUNDS AND SERVICE DETAILS IF APPLICABLE FROM THE PREVIOUS ACCOUNT AS DECLARED ABOVE TO THE PRESENT P.F. ACCOUNT. (THE TRANSFER WOULD BE POSSIBLE ONLY IF THE IDENTIFIED KYC DETAILS APPROVED BY PREVIOUS EMPLOYER HAS BEEN VERIFIED BY PRESENT EMPLOYER USING HIS DIGITAL SIGNATURE CERTIFICATE).
 - (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

(M) DA			(M) SIGNATURE OF MEMBER
	DECLARATIO	ON BY PRESENT EMPLO	YER
A.	THE MEMBER Mr./Ms./Mrs	HAS JOINED ON	AND HAS BEEN ALLOTTED PF MEMBER I
B.	IN CASE THE PERSON WAS EARLIER NOT A MEMBER		
	(Post allotment of UAN) THE UAN A		
	PLEASE TICK THE APPROPRIATE OPTION	V:	
	THE KYC DETAILS OF THE ABOVE MEMBE	ER IN THE UAN DATABASE	
	☐ HAVE NOT BEEN UPLOADED		

HAVE BEEN UPLOADED AND APPROVED WITH DSC
 In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

HAVE BEEN UPLOADED BUT NOT APPROVED

- THE ABOVE MEMBER ID 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: SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT