NAT	IONAL PENSIC	N SYSTEM (NPS) -	- SUBSCRIBER	REGISTRATION FORM - Private Sector
PRAN Card & Kit*	PRAN Card & Kit*	•	<del></del>	nt Opening Kit (please tick())
(refer sl no.1 of instructions)	ePRAN Card	Physical PRAN Ca	ard Throu	igh Email V Physical Kit (Courier)
Print my PRAN in Hindi		YES 🗸	NO If Yes,	submit details as per Annexure I
Select your category		Corporate	V	All Citizen
To,				
National Pension System Trust Dear Sir/Madam,	i.			
I hereby request that an NPS a	account be opened	d in my name as per the	e particulars given b	elow:
* indicates mandatory fields. Pl	ease fill the form i	n English and BLOCK I	etters (Refer gener	al guidelines at instructions page).
CKYC Identifier			RA Code	
1. PERSONAL DETAILS:	(Refer SI no. 1 o	f instructions)		Use Annexure II if name exceeds the space provided below
Salutation*	√ Shri	Smt.	Kumari	
Applicant Name*	NITISH KUMAF	₹		
Father's Name	SUNIL KUMAR	2		
Mother's Name	CHANCHALA	DEVI		
Either Father's or Mother's nan	ne is mandatory*	Select the na	ame to appear on P	RAN Card
Date of Birth*	28/07/1993			
Place of Birth*	JHUMRI TELAI	YA		
Country of Birth*	INDIA			
Gender*	✓ Male	Female	Transgender	Nationality* INDIAN
Marital Status*	✓ Unmarried	Married	Wid	low/Widower Divorcee
Spouse Name (if married)*				
PAN Card*	CTSPK8642P		or Form 60	Submission of PAN or Form 60 is mandatory
Income Range (per annum)	Below 1 lac	t lac to 5 la	c 5 lac to	10 lac
Occupation Details*	Public Sect	or	or Profession	al Self Employed Homemaker Others
Please Tick If Applicable	Politically e	xposed person	Related to Politica	Ily exposed person (Refer instruction no. 1)
2. PROOF OF IDENTITY(I	Pol)*	(If PAN is not provided	, any one of the foll	owing documents to be submitted)
Passport			Passport Expiry	Date
Driving License			Driving License E	Expiry Date
Voter ID Card			Proof of possess	ion of Aadhaar 8242 Provide last four digits
NREGA Job Card			National Populat	on Register
3. ADDRESS DETAILS*		(To be attested by the	Nodal Office)	
Line 1	HOLDING NUM	IBER-289		
Line 2	NEAR GANDHI	SCHOOL ROAD		
Village / City	WARD NUMBE	R-22 THANA-TELAIYA		
District	JHUMRI TELAI	YA,,KODERMA		State/U.T. JHARKHAND
Country	INDIA			PIN Code 825409
4. CONTACT DETAILS				
Mobile*	+919731559540	)		Telephone with STD code)
Email ID*	NITISH.KR1993	B@GMAIL.COM		
5. BANK DETAILS*		(Proof to be submitted.	Refer SI no. 3 of in	structions)
Account Type	✓ Saving A/c	Current	: A/c	
Bank A/c Number	39972488209			
Bank Name	STATE BANK C	OF INDIA		IFS Code SBIN0000118
6. NOMINATION DETAILS	S* (Refer SI no	o. 4 of instruction)		
				r nominating more than one person, submit Annexure III
B. A fresh nomination shall be			ge.	Form submitted using OTP
Nominee Name	SUNIL KUMAR			Authentication (through Email and Mobile)
Relationship	FATHER	I	Date of Birth (In cas	
Name of Guardian (if nominee is a minor)				Age 59
7. SELECTION OF PENSI	ON FUND (PF)	AND INVESTMEN	T CHOICE* (Ref	er SI no. 5 of instruction)
	PF is mandatory e	else form will be rejecte	d. If no investment	nstructions carefully before allocating percentage share in equity. choice is selected, funds will be invested in Auto Choice (LC 50). r Employer.
	Pension Fund* (P	lease Tick () one)		Investment Choice (Please Tick () one)
Aditya Birla Sunlife Pens	_		_	Active Choice mention the % share in each asset
ICICI Prudential Pension	J	<del></del>	Pension Fund Ltd	E(Upto75%) C (Upto 100%) G (Upto 100%) A (Upto 5%) Total  75 10 15 100%
SBI Pension Funds Priva		LIC Pension Fu	nd Limited se write and tick)	✓ Auto Choice select one life cycle fund below
		L / any other (pied	mile and lick)	Conservative (LC25) Moderate (LC50) Aggressive (LC75) V

8. Activate my Tier- II accou	nt (Pleas	e tick () to activ	ate)			
	minee & invetsment details		vith different bank/nom	inee/investment d	etails as ner Anı	nexure IV
					·	TOXATO TV
9. FATCA* (Foreign Accoun	t Tax Compliance Act) &	CRS DECLA		•	of instructions)	
	dia and not resident of any otl	her country	I am	a tax resident of t	the country/ies n	nentioned below
	es V No					
Partice Country/countries		INDIA	Country (1)	Country	<i>'</i> (2)	Country (3)
Country/Countries (	or rax residency		O:289 MASTER			
	Address Line 1	MOHALA ROAD	GANDHI SCHOOL			
Address in the jurisdiction for	City/Town/Village	JHUMRI T	FI AIYA			
Tax Residence						
	State ZIP/Post Code	JHARKHA 825400	AND			
Tax Identification Number (TIN)/		825409 r CTSPK86	 42P			
TIN/ Functional equivalent Number	•	INDIA				
Validity of documentary evidence	e provided (Wherever applica	ble)				
I have understood the information and Terms & Conditions) and here correct, and complete and hereby	eby confirm that the information accept the same.	on provided by I		rue,		npression* of Applicant (refer structions)
10. DECLARATION BY APF			_			
I have read and understood the to documents furnished by me are information furnished by me shat under NPS. I understand that I is Declaration under the Prevention I hereby declare that the contribution assessed sources of income. It is share the information, with other my PRAN in case I am found violate:  11/03/2022	e true and correct, to the ball be informed to CRA / NPS shall be fully liable for subminate of Money Laundering Act, 20 ution paid by me/on my behalunderstand that NPS Trust has government authorities. I furth	nest of my known Trust. I do not ssion of any factor of any factor of the ssion of any factor of the ssion of the right to ner agree that N	owledge. Any change hold any pre-existing lse or incorrect inform lived from legally declar peruse my financial purest has the right	s in the account nation or ared and profile or to close dering.	in case of males	o Impression* of Applicant s and RTI in case of females to npression in case no hands)
11.DECLARATION BY EMP	PLOYER (All Details	s are Mandatory	/)			
11.DECLARATION BY EMP	PLOYER (All Details	s are Mandatory	/) of Retirement			
	PLOYER (All Details		,	Non-mandatory if	not available	
Date of Joining	PLOYER (All Details	Date	,	Non-mandatory if	not available	
Date of Joining Employee Code/ID CHO Registration Number	PLOYER (All Details	Date	of Retirement			d the details provided in this
Date of Joining  Employee Code/ID  CHO Registration Number  It is certified that in this subscriber registration form The given address and the docur	n including the address and e	Date CBO	of Retirement  Registration Number  ails provided above are	is emple as per the service	oyed with us and	
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## INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

## General Guidelines

(a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected. (b) Copies of documents submitted by the applicant should be self-attested. (c) Applicant is advised to retain the acknowledgement slip signed/ stamped by the PoP/PoP-SP office.

SI	Item No	Item Details			lı	nstruct	ions							
			In case a subscriber opt CRA are applicable as ur	- ·	ysical PR	AN Car	d or V	Welcome K	(it, red	luced	accou	ınt open	ing ch	narges of
		Option for PRAN Card	A convert on a given with Disvoiced DD AN count (in Do )			Account opening with ePRAN card (in Rs.)								
		and Kit	Account opening with Physical PRAN card (in Rs.)		,	Welco	me kit	sent in hai	dcopy	/ We	Icome	kit sent	vide e	email only
1	1													
'	'	Father's Name, Mother's Name	(a) If the name has more than 30 digits, fill Annexure II for the same. (b) If the applicant is an orphan, he/sh leave the fields blank. However, an official document to support the status to be submitted					/she may						
		Politically Exposed Person	such as heads of state o	Politically Exposed Persons"(PEPs) are individuals who are or have been entrusted with prominent public functions such as heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.										
2	2	Proof of Identity and Address		If the applicant is submitting Aadhaar as proof of Identity and Address, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy										
3	5	Bank Details	For Tier I & Tier II accou copy of bank passbook / Bank Account Number ar	bank statement / b					•					•
4	6	Nomination Details	(a) If a subscriber has far persons belonging to his/ A fresh nomination shall shall deemed to be invalid in favor of any person or be deemed to be invalid to his family. (b) In case numbers and must be eq	ther family. Any nome be made by the subdet; If at the time of a persons but if the sand the subscriber of more than one	nination ma ubscriber u making a r subscriber shall make	ade in to a point of the second in the secon	favour arriag tion th quentl sh non	of a personge and any ne subscrib y acquires on and and and and and and and and and an	n not nomirer has a fam	belonnations no fa ily, sure of or	ging to made amily, uch no ne or n	o family so before the nomination mination	shall be such ination shall shall sons be the shall sons be the sons between the sons be the sons between the sons be the sons between	ne invalid; marriage n may be forthwith pelonging
			In active choice, until ag equity allocation will be r up to the permissible limit	educed as per the										
5	7	Selection of Pension Fund (PF) & Investment	Equity Matrix - Active Choice	Age (years)	Upto 50		52	53 54	55	56	57	58 59	_	60 &
		Choice	Corporate applicants r	Max. Limit (%)	choices if	72.5		<b>!</b>	62.5		the e	55   52	<u> </u>	50 se may be
			2. Corporate applicants i	Tidy exercise these				- CATOTIACA		, iii by	110 0			- may be
6	9	FATCA & CRS Declaration	Clarification / Guidelines  Jurisdiction(s) of Tax nationality, is also a resid  Tax identification Num the said jurisdiction has equivalent"), the same security/insurance numbe In case applicant is de Relinquishment of Citiz provided.  In case applicant is de required under section 9	Residence: Since lent for tax purpose ber (TIN): TIN nees issued a high into may be reported er, citizen/personal eclaring US personenship should be leclaring US personel form	US taxes in USA. d not be regrity nur d. Examp identification status as provided an status as an status as an status as	eported mber voles of on/servor kor reas	obal in the difficient of the	nas not been equivale type of nucode/numbs/her Counfor not havide PAN	en issum issumber and try of wing reand	zen, e ued by el of for i l resid Birth elinqu ather	y the j identi- ndivident re is US, uishme	urisdictic fication dual incl gistration docume ent certi	en of word of the control of the con	whatever owever, if unctional a social aber) videncing is to be to details
7	9 & 10	Declaration / Signature by Applicant	In case the applicant is u in case of female should thumb / toe impression attesting the same under	be affixed and in c should be attested	ase there it	is no h	ands,	toe impres	sion o	f the	applica	ant to be	provi	ided. The

Applicable CRA charges:	NSDL	Kfintech	CAMS
Account Opening charges			
Account Maintenance Charges			
Charge per transaction			

Annexures - Su	Libscriber Registration	Form for Private Sector applicants (Tick and fill applicable annexures be	
Annexure I - P	rint PRAN Card in Hin	ndi (Fill the details in Devnagri script)	
Applicant's First Name			
Middle Name			
Last Name			
Father/Mother's First Na	ıme		
Middle Name			
Last Name			
Annexure II - If	alphabets of name e	xceeded the space provided on page 1 of the application form	
Applicant's First Name			
Middle Name			
Last Name			
Father's First Name			
Middle Name			
Last Name			
Mother's First Name			
Middle Name			
Last Name			
Annexure III - A	Additonal Nomination	For Tier-I For Tier-II For Tier-II Tax Saver	
Percentage Share	Nominee I 1	00 Nominee II Nominee III Total should be equal	to 100%
Nominee I - Name	SUNIL KUMAR		
1 <del>-</del> 1	FATHER	Age 59 Date of Birth (In case of Minor) 15/01/	1963
Relationship  Name of Guardian		7 igo Oo Daar (iir cacc or miner) 1670 ii	
(if nominee is a mi			
Nominee II - Name	e		
= Relationship		Age Date of Birth (In case of Minor)	
Relationship  Name of Guardian  (if nomines is a mi			
(if nominee is a mi			
Nominee III - Nam	e		
≡     ⊕   Relationship		Age Date of Birth (In case of Minor)	
		Age Date of Billi (in eace of winer)	
.≒   Name of Guardian			
Relationship Name of Guardian (if nominee is a mi			
(ii floriiilee is a fili	nor)	- tick and fill as applicable	
Annexure IV - Activate	nor)	- tick and fill as applicable	
Annexure IV - Activat	e Tier-II		
Annexure IV - Activate	e Tier-II	- tick and fill as applicable  Bank details for Tier-II are as under:	
Annexure IV - Activat	e Tier-II	Bank details for Tier-II are as under:	
Annexure IV - Activate PAN*  No change in Ba	e Tier-II	Bank details for Tier-II are as under:	
Annexure IV - Activate PAN*  No change in Ba Account Type	e Tier-II	Bank details for Tier-II are as under:	
Annexure IV - Activate PAN*  No change in Bate Account Type Bank A/c Number	e Tier-II  Ink details  Saving A/o	Bank details for Tier-II are as under:  Current A/c	
Annexure IV - Activate PAN*  No change in Bate Account Type Bank A/c Number Bank Name	e Tier-II  Ink details  Saving A/o	Bank details for Tier-II are as under:  Current A/c  IFS Code	
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Annexure IV - Activate PAN*  No change in Bate Account Type Bank A/c Number Bank Name  No change in No Nominee Name Relationship	e Tier-II  Ink details  Saving A/o	Bank details for Tier-II are as under:  Current A/c  IFS Code  Nominee details for Tier-II are as under:	
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Annexure IV - Activate PAN*  No change in Bate Account Type Bank A/c Number Bank Name  No change in No Nominee Name Relationship Name of Guardian (if nominee is a minor)  In case you desire to no Investment detail	minee details  minate more than one per ls for Tier-II are as under Pension Fund* (Please	Bank details for Tier-II are as under:  Current A/c  IFS Code  Nominee details for Tier-II are as under:  Age  Date of Birth (In case of Minor)  Person, fill Annexure III above  #only selection of PF is required  se Tick () one)  Investment Choice (Please Tick () of Active Choice mention the % share in each	•
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NITISH KUMAR SUNIL KUMAR

28/07/1993

Permanent Account Number

CTSPK8642P

Nitish kumat

Signature



