

नवीन सेवानिवृत्तीवेतन योजना (NPS)  
लागू असलेल्या महाराष्ट्र संवर्गातील  
अखिल भारतीय सेवेतील अधिकाऱ्यांनी  
Unified Pension Scheme (UPS)  
करिता विकल्प सादर करण्याबाबत.

**महाराष्ट्र शासन**

**सामान्य प्रशासन विभाग**

शासन परिपत्रक क्रमांक : भाप्रसे-१५२५/प्र.क्र.१४५/२०२५/भाप्रसे-३

मंत्रालय, मादाम कामा रोड, हुतात्मा राजगुरु चौक, मुंबई - ४०० ०३२

दिनांक : २५ ऑगस्ट, २०२५

**वाचा :-** १) केंद्र शासनाच्या वित्त मंत्रालयाची अधिसूचना क्र.F/No.FX१/३/२०२४-PR, दि.२४.०१.२०२५

२) पेन्शन निधी विनियामक आणि विकास प्राधिकरण (PFRDA), नवी दिल्ली यांची अधिसूचना

क्र.PFRDA-१२/०१/०००१/२०२३-LEGAL, दि.१९.०३.२०२५

३) पेन्शन निधी विनियामक आणि विकास प्राधिकरण (PFRDA), नवी दिल्ली यांची अधिसूचना

क्र.PFRDA-२०२५/०४/SUP-CG-SG/०१, दि.२६.०६.२०२५

**शासन परिपत्रक -** केंद्र शासनाच्या वित्त मंत्रालयाने NPS (National Pension Scheme) लागू असणाऱ्या केंद्र शासकीय कर्मचाऱ्यांना UPS (Unified Pension Scheme) चा विकल्प निवडण्याचा पर्याय उपलब्ध करून देण्यासदर्भात दि.२०.०१.२०२५ ची अधिसूचना निर्गमित केलेली आहे. तसेच पेन्शन निधी विनियामक आणि विकास प्राधिकरण (PFRDA), नवी दिल्ली यांनी दि.१९.०३.२०२५ व २६.०६.२०२५ च्या अधिसूचनेद्वारे “पेन्शन निधी विनियामक आणि विकास प्राधिकरण, (NPS अंतर्गत UPS योजनेचे परिचालन) नियम, २०२५” जारी केले आहेत. त्यानुसार UPS योजना दि.०१.०४.२०२५ पासून अंमलात आली असून दि.३०.०९.२०२५ पर्यंत केंद्र शासकीय अधिकाऱ्यांना UPS निवडण्याबाबतचे विकल्प सादर करावयाचे आहेत.

२. या अनुषंगाने महाराष्ट्र संवर्गातील अखिल भारतीय सेवेतील (IAS/ IPS/ IFoS) ज्या अधिकाऱ्यांना NPS लागू आहे त्यांना Unified Pension Scheme (UPS) मध्ये सहभागी व्हावयाचे असल्यास, त्यांचे विकल्प खालील पद्धतीने सादर करावेत:-

(अ) विकल्प सादर करण्याबाबतचे नमुने :

(१) दि.०१.०४.२०२५ रोजी शासन सेवेत असलेल्या अखिल भारतीय सेवेतील (अ.भा.से.) अधिकाऱ्यांनी “पेन्शन निधी विनियामक आणि विकास प्राधिकरण, (NPS अंतर्गत UPS योजनेचे परिचालन) नियम, २०२५” च्या परिशिष्ट-१ मधील नमुना A२ मध्ये (प्रत सोबत) विकल्प सादर करावा.

(२) नवीन राष्ट्रीय निवृत्तीवेतन योजना लागू असलेल्या व दि.३१ मार्च, २०२५ पर्यंत सेवानिवृत्त झालेल्या अखिल भारतीय सेवेतील (अ.भा.से.) अधिकाऱ्यांनी वर नमूद केलेल्या नियमाच्या परिशिष्ट-१ मधील नमुना B2 मध्ये (प्रत सोबत) विकल्प सादर करावा.

(३) उपरोक्त (१) किंवा (२) प्रमाणे विकल्प देण्यापूर्वी मृत्यू झालेल्या नवीन राष्ट्रीय निवृत्तीवेतन योजना लागू असलेल्या पात्र अखिल भारतीय सेवेतील (अ.भा.से.) अधिकाऱ्यांच्या वैवाहिक जोडीदाराने वर नमूद केलेल्या नियमाच्या परिशिष्ट-१ मधील नमुना B6 मध्ये (प्रत सोबत) विकल्प सादर करावा.

(ब) विकल्प सादर करण्याची कार्यपद्धती:

अखिल भारतीय सेवेतील अधिकाऱ्यांनी त्यांचे विकल्प खालील कार्यपद्धतीनुसार संबंधित प्राधिकाऱ्यांकडे दि.२९.०९.२०२५ पर्यंत सादर करावेत.

(१) भा.प्र.से. अधिकारी यांनी विकल्प नमुना A2/ B2/ B6 व्यवस्थितरित्या भरून त्यावर स्वाक्षरी करून “सहायक संचालक (लेखा), भाप्रसे-३, सामान्य प्रशासन विभाग, मंत्रालय, मुंबई ४०० ०३२” यांच्याकडे विशेष दूताकरवी अथवा पोस्टाने पाठवावेत.

(२) भा.पो.से. अधिकारी यांनी विकल्प नमुना A2/ B2/ B6 व्यवस्थितरित्या भरून त्यावर स्वाक्षरी करून “सहायक संचालक, भापोसे कक्ष, गृह विभाग, मंत्रालय, मुंबई ३२” यांच्याकडे विशेष दूताकरवी अथवा पोस्टाने पाठवावेत. सहायक संचालक, भापोसे यांनी त्यांच्याकडे प्राप्त झालेले विकल्पाचे नमुने त्यावरील तपशील योग्य असल्याचे अग्रेषित पत्राद्वारे प्रमाणित करून “सहायक संचालक (लेखा), भाप्रसे-३, सामान्य प्रशासन विभाग, मंत्रालय, मुंबई ४०० ०३२” यांच्याकडे एकत्रितपणे दि.३०.०९.२०२५ पर्यंत सादर करावेत व त्याची एक प्रत स्वतःच्या अभिलेख्यात जतन करावी.

(३) भा.व.से. अधिकारी यांनी विकल्प नमुना A2/ B2/ B6 व्यवस्थितरित्या भरून त्यावर स्वाक्षरी करून “सहायक संचालक, भावसे कक्ष, महसूल व वन विभाग, मंत्रालय, मुंबई ३२” यांच्याकडे विशेष दूताकरवी अथवा पोस्टाने पाठवावेत. सहायक संचालक, भावसे यांनी त्यांच्याकडे प्राप्त झालेले विकल्पाचे नमुने त्यावरील तपशील योग्य असल्याचे अग्रेषित पत्राद्वारे प्रमाणित करून “सहायक संचालक (लेखा), भाप्रसे-३, सामान्य प्रशासन विभाग, मंत्रालय, मुंबई ४०० ०३२” यांच्याकडे एकत्रितपणे दि.३०.०९.२०२५ पर्यंत सादर करावेत व त्याची एक प्रत स्वतःच्या अभिलेख्यात जतन करावी.

३. वरीलप्रमाणे प्राप्त झालेले अखिल भारतीय सेवेतील अधिकाऱ्यांचे UPS चे विकल्प सहायक संचालक (लेखा), भाप्रसे-३, सामान्य प्रशासन विभाग, मंत्रालय, मुंबई ४०० ०३२ यांनी स्कॅन करून Protean CRA (NSDL) यांचेकडे ई-मेलद्वारे दि.३०.९.२०२५ पर्यंत सादर करावेत.
४. दि.०१.०८.२०२५ किंवा त्यानंतर अखिल भारतीय सेवेमध्ये (अ.भा.से.) रुजू झालेल्या किंवा होणाऱ्या अधिकाऱ्यांनी, त्यांना Unified Pension Scheme मध्ये सहभागी व्हावयाचे असल्यास, त्यांनी नमुना A1 मध्ये (प्रत सोबत) सद्यःस्थितीत NPS च्या नोंदणीसाठी अस्तित्वात असलेल्या कार्यपद्धतीनुसार कार्यवाही करावी.
५. उपरोक्तप्रमाणे ज्या पात्र अ.भा.से. अधिकाऱ्यांचे Unified Pension Scheme मध्ये सहभागी होण्यासाठीचे विकल्प विहित मुदतीत प्राप्त होणार नाहीत, त्यांना पूर्वीप्रमाणेच NPS (National Pension System) लागू राहील.
६. यासंदर्भात PFRDA यांचेकडून पुढील कार्यवाहीबाबतच्या सूचना प्राप्त झाल्यानंतर यथावकाश निर्गमित करण्यात येतील.
७. सदर परिपत्रक हे महाराष्ट्र शासनाच्या [www.maharashtra.gov.in](http://www.maharashtra.gov.in) या संकेतस्थळावर उपलब्ध करण्यात आले असून त्याचा संकेतांक क्रमांक २०२५०८२५११२७१२०२०७ असा आहे. सदर परिपत्रक डिजिटल स्वाक्षरीने साक्षांकित करून काढण्यात येत आहे.

( सु. ह. उमराणीकर )

सह सचिव, महाराष्ट्र शासन

प्रति,

- १) महाराष्ट्र संवर्गातील अखिल भारतीय सेवेतील सर्व अधिकारी (शासनाच्या वेबसाईटवर) (NPS लागू असणाऱ्या अधिकाऱ्यांना सा.प्र.वि./गृह / म.व व.विभागामार्फत ईमेलद्वारे)
- २) अपर मुख्य सचिव (गृह), गृह विभाग, मंत्रालय, मुंबई ३२.
- ३) अपर मुख्य सचिव (वित्त), वित्त विभाग, मंत्रालय, मुंबई ३२.
- ४) अपर मुख्य सचिव (वने), महसूल व वन विभाग, मंत्रालय, मुंबई ३२
- ५) संचालक, लेखा व कोषागारे संचालनालय, महाराष्ट्र राज्य, मुंबई.
- ६) उप संचालक, राज्य देखभाल अभिलेख अभिकरण, मुंबई
- ७) श्री.मधुसूदन दास, AVP, Protean eGov Technologies Ltd. (ईमेलद्वारे)
- ८) सहसचिव (भापोसे कक्ष)/सहसचिव (भावसे कक्ष), गृह विभाग/ महसूल व वन विभाग, मंत्रालय, मुंबई
- ९) सहायक संचालक (लेखा) भाप्रसे-४, सामान्य प्रशासन विभाग, मंत्रालय, मुंबई
- १०) निवडनस्ती (भाप्रसे-३)

## Form AT

UNIFIED PENSION SCHEME (UPS) - SUBSCRIBER REGISTRATION FORM - Government Sector													
Exercise of Option to be covered under Unified Pension Scheme (UPS) and to avail its Benefits													
Name of CRA										Paste recent photograph of 3.5 cm x 2.5 cm size / passport size (Do not sign across staple clip)			
Print my PRAN in Hindi		Yes		No		If yes, please submit details as per Annexure I							
Select your category [Please tick (✓)]				Central Government									
To, National Pension System Trust Dear Sir/Madam,													
<p>I, ..... Son/Daughter of Mr/Mrs. .... having joined Central Government service on ..... and having read and fully understood the provisions of the Unified Pension Scheme (UPS) as notified by the Central Government vide notification F.No. FX-1/3/2024-PR, dated 24/01/2025 and PFRDA (Operationalisation of Unified Pension Scheme under National Pension System) Regulations, 2025, as amended from time to time, and being eligible to opt for Unified Pension Scheme, do hereby exercise the option to be covered under Unified Pension Scheme (UPS). Further, I hereby acknowledge that this option exercised by me shall be final and irrevocable. I hereby request that an UPS account be opened in my name as per the particulars given below:</p> <p>* indicates mandatory fields. Please fill the form in English and BLOCK letters (Refer general guidelines at instructions page.)</p>													
<p><b>1. PERSONAL DETAILS:</b> (Refer Sr. No. 1 of the instructions). Use Annexure II if name exceeds the space provided below</p>													
Salutation*		Shri		Smt		Kumari							
Applicant Name*													
Father's Name													
Mother's Name													
Orphan Status*		Yes		No									
Either Father's or Mother's name is mandatory* on PRAN Card*				Select the name to appear				Father's Name		Mother's Name			
Date of Birth*													
Place of Birth*													
Country of Birth*													
PAN*		Nationality*											
Applicant Gender*		Male		Female		Transgender Status*		Marital		Unmarried		Married	
Legally wedded Spouse Gender (if married) *		Male		Female		Transgender		Legally wedded Spouse DOB (if married) *					
Legally wedded Spouse Name (if married)*													
Income Range (per annum) *		Below 1 lac		1 lac to 5 lac		5 lac to 10 lac		10 lac to 25 lac		25 lac to 1 Cr		Above 1 Cr	
Please Tick if Applicable		Politically exposed person				Related to Politically exposed person				(Refer instruction no. 1)			
<p><b>2. PROOF OF IDENTITY and ADDRESS (POI / POA)* (Any one of the following to be submitted).</b></p>													
Passport						Passport Expiry Date							
Driving License						Driving License Expiry Date							
Government ID Card						Voter ID Card							
CKYC Number													
National Population Register													
Proof of possession of Aadhaar				Provide last Four Digits. Redact or black-out first 8 digits of the Aadhaar number on submitted copy (Refer Sr. No. 2 of the instruction)									
<p><b>3. ADDRESS DETAILS*</b></p>													
Line 1													
Line 2		V I L L A G E / C I T Y											

District										State/U.T.														
Country										PIN Code														
<b>4. CONTACT DETAILS*</b>																								
Mobile*										Telephone with : TD code														
Email ID*																								
<b>5. BANK DETAILS* (Proof to be submitted - Refer Sr. No. 3 of the instructions)</b>																								
Account Type										Saving A/c														
Bank A/c Number										Current A/c														
Bank Name										IFS Code														
I hereby declare that, the bank account detail provided are salary bank account.																								
<b>6. SELECTION OF PENSION FUND (PF) AND INVESTMENT CHOICE* (Refer Sr no. 4 of the instructions)</b>																								
Please Tick (✓) one		Default Pattern (pension funds and investment Pattern as determined by the Authority) I would like to choose my Pension Fund and investment choice (Please select below)																						
Pension Fund (Please Tick (✓) one)										Investment Choice (Please Tick (✓) one)														
Aditya Birla Sunlife Pension Mgmt Ltd										Axis Pension Fund Mgmt Limited														
DSP Pension Fund Managers Pvt Ltd										HDFC Pension Fund Mgmt Ltd														
ICICI Prudential Pension Funds Mgmt Co Ltd										Kotak Mahindra Pension Fund Ltd														
LIC Pension Fund Limited										Max Life Pension Fund Mgmt Ltd														
SBI Pension Funds Private Limited										TATA Pension Management Private Ltd														
UTI Pension Fund Limited																								
If no Pattern is chosen, the contributions will be invested as per default pattern																								
<b>7. FATCA* (Foreign Account Tax Compliance Act) &amp; CRS DECLARATION (Refer Sr no. 5 of the instruction):</b>																								
I am a tax resident of India and not resident of any other country										I am a tax resident of the country/ies mentioned below														
US Person										Yes No														
Particulars										Country (1)					Country (2)					Country (3)				
Country/countries of Tax Residency																								
Address in the jurisdiction for Tax Residence										Address Line 1														
										City/Town/Village														
										State														
										ZIP/Post Code														
Tax Identification Number (TIN)/Functional equivalent Number																								
TIN/ Functional equivalent Number Issuing Country																								
Validity of documentary evidence provided (Wherever applicable)										ddmmmyyy					ddmmmyyy					ddmmmyyy				



It is certified that Shri./Smt./Kumari..... is employed in this office and the details provided in this subscriber registration form have been verified as per service record. The given address and officially valid documents (OVDs) of KYC are verified by this office. Also, it is further certified that he/she has read entries/entries have been read over him/her by us and got confirmed by him/her.

Name of DDO		Name of PAO	
Signature of DDO		Signature of PAO	
DDO Code No. (As per record in CRA System)		PAO Code No. (As per record in CRA System)	
Seal of DDO		Seal of PAO	
Date		Date	
Place		Place	

[illegible]

(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 the Nodal Office 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 designated nodal officer where they submit the application.

SI	Item No	Item Details	Instructions
1	1	Fathers 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/she may leave the fields blank. However, an official document to support the status to be submitted.
		Politically Exposed Person	Politically Exposed Person's (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	If the applicant is submitting Aadhaar as proof of Identity, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
3	5	Bank Details	For UPS account opening through physical form (FORM A1) bank details and documentary proof are mandatory. Please submit a cancelled cheque / copy of bank passbook / bank statement / bank certificate / letter from Bank containing applicant's Name, Bank Name, Bank Account Number and IFS Code.
4	6	Selection of Pension Fund (PF) & Investment Choice	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' or in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. If no choice is provided, the contributions will be distributed among the default Pension Funds and investment pattern selected by the Government.

5	7&8	FATCA & CRS Declaration / Signature by Applicant	<p>Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India:</p> <ul style="list-style-type: none"> <li>• Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.</li> <li>• Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number).</li> <li>• In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided.</li> <li>• In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form.</li> <li>• In case the applicant is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the designated nodal officer attesting the same under his/her official seal and stamp.</li> </ul>
<p align="center"><b>General Information for Subscribers</b></p> <p>a) The Subscriber can obtain the status of his/her application from CRA and respective Nodal Office.</p> <p>b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated respective nodal office where they submit the application.</p> <p>c) For more information / clarifications, contact CRA:          Website:          Call:          Address of CRA.</p>			

<p align="center"><b>Annexures - Subscriber Registration Form for Government Sector applicants (Tick and fill applicable annexures below)</b></p>	
<p><b>Annexure I - Print PRAN Card in Hindi (Fill the details in Devanagari script)</b></p>	
Applicant's First Name	
Middle Name	
Last Name	
Father / Mother's First Name	
Middle Name	
Last Name	
<p><b>Annexure II - If Alphabets of name exceeded the space provided on page 1 of the application form</b></p>	
Applicant's First Name	
Middle Name	
Last Name	
Father's First Name	
Middle Name	
Last Name	
Mother's First Name	
Middle Name	
Last Name	





## Form A2

[See Regulation 4]

**Exercise of Option by an eligible Central Government employee presently subscribed to National Pension System (NPS) for being covered under Unified Pension Scheme (UPS)**

I,.....Son / Daughter of Mr. / Mrs. .... being a subscriber of NPS as on 01/04/2025 with permanent retirement account number (PRAN)....., having read and fully understood the provisions of Unified Pension Scheme (UPS) as notified by Central Government vide notification F. No. FX-1/3/2024-PR, dated 24/01/2025 and PFRDA (Operationalisation of Unified Pension Scheme under National Pension System) Regulations, 2025 as amended from time to time, and being eligible to opt for Unified Pension Scheme, do hereby exercise the option to be covered under Unified Pension Scheme (UPS).

Further, I hereby acknowledge that this option exercised by me shall be final and irrevocable.

I authorize the CRA, NPS Trust or any other entity connected with UPS to collect and share data / details of my necessary personal information for the purpose of the said scheme regulated under the PFRDA Act, 2013 and the relevant regulations notified thereunder

Date: -----  
Place: -----

Signature of Subscriber  
Name-----

(To be filled and certified by the DDO based on Service records)

Employment Details (At the time of exercise of UPS option)	
Employee Code/ID	
Date of commencement of qualifying service (Qualifying Service as defined in Regulation 2(k) read with Regulation 13)	
Current month Basic Pay	
Non-Practicing Allowance (NPA), if applicable	
Schedule date for next increment	

Signature & Name of DDO	Signature & Name of PAO
DDO Reg. No.	PAO Reg. No.
Date: _____ Place: _____	Date: _____ Place: _____

**Note/Instruction:**

- The duly signed copy of this Form shall be kept by DDO in employee's service record and a copy of the same shall be provided to the employee for his record.
- DDO shall input the Head of Office verified data in the Central Record Keeping System and in case of physical submission of form by the subscriber, the DDO shall upload a copy of this duly signed option form. PAO shall authorise and approve the option exercised by the subscriber in the CRA system through their login.



**FORM B2**

[See Regulation 4,19 and 20]

**Claim and Payout Form: Unified Pension Scheme (UPS) subscriber who  
superannuated/retired on or before 31/03/2025**

**Before filling the form, please read the INSTRUCTIONS carefully given at the end of the form**

Joint Photograph of  
Subscriber & spouse

**PART -A (to be filled by the subscriber)**

**1.Detail of Subscriber:**

Name		Employee Code/ID		PRAN	
Date of birth		Date of Superannuation/ Retirement under FR 56(j)		Date of joining service	
Gender		PAO (office name)		DDO (office name)	
PAN		Ministry/Department (from where retired)			

**2. KYC details:**

Document (one of the documents)	Document Type	Identification number	Validity (in case of Passport and Driving License)
Aadhaar*/ Driving License / Passport/Voter ID/CKYC/ Letter issued by NPR			

**3. Current Address:**

Flat/House No./Bldg. Name		Street/Locality	
Village & Post Office/Block		City/District	
State		Pin Code	
Country			

**4.Contact Details:**

Telephone No. (If any)		Mobile No.	
E-mail ID			

**5. Details of legally wedded spouse as on date of superannuation:**

Name		PAN*	
DOB		Aadhaar No.*	
Gender			
Mobile No.		E-mail Id	

**6. Details of Bank account:**

Type of Bank A/c	Joint with legally wedded Spouse as on date of superannuation Single (only in the absence of legally wedded Spouse as on date of superannuation)	Bank A/c No.	
Bank Name		IFSC	

**Note:** Please ensure that the Government servant is the Primary Account holder in the Joint Account.

**Declaration:**

I \_\_\_\_\_ Son/Daughter of Mr./Mrs. \_\_\_\_\_ a subscriber of National Pension System with PRAN----- and have fully read and understood the provisions of Unified Pension Scheme (UPS) as notified by GoI vide notification F. No. FX-1/3/2024-PR, dated 24/01/2025 and PFRDA (Operationalisation of Unified Pension Scheme under National Pension System) Regulations, 2025 as amended from time to time. I hereby declare that I am eligible to avail benefits under UPS in terms of the aforesaid notification and Regulations. I certify that the information given above is true and correct.

I authorize the CRA, NPS Trust or any other entity connected with UPS to collect and share data/ details of my necessary personal information for the purpose of the said scheme regulated under the PFRDA Act, 2013 and the relevant regulations notified thereunder.

Place: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

**PART -B (Details as recorded in the CRA system)****1. Details of Partial Withdrawal:**

S. N.	Date of Partial withdrawal	Amount withdrawn	No. of units withdrawn as per default pattern	Default pattern NAV on the date of superannuation	Value of partial withdrawals (no. of units withdrawn * NAV) as per default pattern, as on date of superannuation
1					
2					
3					
Total					

**2. Details of voluntary contribution:**

S. N.	Date of voluntary contribution	Amount of voluntary contribution	No. of units allotted	NAV on the date of superannuation	Value of voluntary contribution (no. of units * NAV) as on date of superannuation
1					
2					
3					
...					
n					
Total					

**3. Details for calculation of UPS benefits payable to subscriber:**

Individual Corpus (IC): Value of corpus as on date of superannuation/retirement	
Benchmark Corpus (BC): Value of IC as per default pattern of Investment + Value of partial withdrawals amount at the time of Superannuation as per default pattern - value of voluntary contribution on date of superannuation/retirement	

	Final withdrawal (FW in %)	
	Representative Annuity Rate <i>(as on date of superannuation, as published by PFRDA)</i>	
	Representative annuity amount= (IC) x (1-FW%) *(Representative Annuity Rate)/ (12*100) where {IC <= BC}	

**PART -C (to be filled by the DDO in the CRA system)**

**1. Employment Details as per service record:**

	File no	
	Employee Code/ID	
	Date of commencement of qualifying service <i>(Qualifying Service as defined in Regulation 2(k) read with Regulation 13)</i>	
	Date of Superannuation/ retirement under Fundamental Rules 56(j) (which is not treated as penalty under Central Civil Services (Classification, Control and Appeal) Rules, 1965)	
	Length of Qualifying service in months (Q)	
	Length of qualifying service in completed half years (L) <i>(fraction to be ignored)</i>	
	Date of Start of monthly Payout <i>(in case of superannuation, next day of superannuation or in case of retirement under FR 56 (j), next day of retirement)</i>	

**2. Basic pay details for last 12 months before superannuation/ retirement under FR 56 (j):**

	Basic Pay	NPA <i>(non-practicing allowance granted to medical officer in lieu of private practice)</i>	Total (Basic pay +NPA)		Basic Pay	NPA <i>(non-practicing allowance granted to medical officer in lieu of private practice)</i>	Total (Basic pay +NPA)
Month 1				Month 7			
Month 2				Month 8			
Month 3				Month 9			
Month 4				Month 10			
Month 5				Month 11			
Month 6				Month 12			
Average of 12 Months of (Basic pay +NPA) = P							

**3. Salary details of last month before superannuation/ retirement under FR 56 (j):**

Month/Year	Basic Pay <i>(includes non-practicing allowance granted to medical officer in lieu of private practice if any) (BP)</i>	Dearness Allowance (DA)	Total E= (BP+ DA)
Last month emolument (E) for lump-sum payment			

Certified that the details provided by subscriber in Part-A, details of employment and salary i.e., qualifying service, last basic pay, average basic pay, superannuation/retirement date, legally wedded spouse details on the date of superannuation, which has been verified by HOO and the entry has been made as per such certification.

Verified and certified that the details are true and correct.

Signature & Name of DDO	
DDO Name	DDO Registration No.
Date:	Place:

<p align="center"><b>Form B2</b>  <b>Part D</b>  <b>UPS Payout Order (UPO) issued by PAO</b>  <i>(System Generated)</i></p>
---

Joint Photograph  
of  
Subscriber & spouse

To,  
National Pension System Trust  
(address to be added) – system

File no:	Date of issue:
UPS Payout Order (UPO) No:	

**1. Details of subscriber:**

Name	Employee Code/ID	PRAN
Date of birth	Date of Superannuation/ Retirement under FR 56(j)	Date of joining service
Gender	PAO (office name)	DDO (office name)
PAN	Ministry/Department (from where retired)	

**2. Details of legally wedded spouse on the date of superannuation/retirement:**

Name	PAN
DOB	E-mail Id
Gender	Mobile No.

**3. Details of Employment & Salary:**

Length of Qualifying service in number of months	
Average of last 12 Months basic pay	
Last month salary (Basic Pay + DA)	
Length of qualifying service in completed six months	
Date of start of monthly Payout	
Admissible Payout: Assured Payout*(IC/BC) * (1-FW%) where {IC <= BC} (Assured Payout = $(\frac{1}{2} \text{ of } P) \times (Q/300)$ ) with the condition that if $(P/2) \times Q/300$ is less than 10,000, it will be taken as 10,000, where P is basic pay and Q is qualifying service in months)	

**Sanction of Admissible UPS Benefits payable to Subscriber****4. UPS Benefits payable to Subscriber:**

Date of start of top-up Payout	
Lumpsum Payment	
Interest on Lumpsum Payment	
Monthly Top-up Amount	
DR amount on admissible payout	
Arrears on monthly top-up and applicable DR upto date of commencement of monthly top up	
Interest on Arrears (if Applicable)	

Signature & Name of PAO	
PAO Name	PAO Registration No.
Date:	Place:

**Authorising the release of benefits upon receipt of UPS payout Order after due verification**

Authorised Signatory NPS Trust	
Date:	Place:

**Copy to, To Subscriber**  
(address and email and mobile) – over email

**Instructions to fill the form**

1. All fields are mandatory, unless marked with Asterisks.
2. Please fill the details of the subscriber as per the service records.
3. Please give details of DDO, PAO, Department/Ministry of the office from where you retired.
4. Any one of the 5 KYC documents may be provided. In case of online filling of the form Aadhar Number or CKYC ID may be provided.
5. The current address shall be as per the KYC document provided. In case there is change in the current address, the concerned KYC documents is to be updated first.
6. The mobile number and e-mail id of the claimant shall be verified separately by sending an OTP or a link as may be applicable.
7. The field of date of joining in Central Govt regular service shall be captured from the CRA system, however, in case of any change, it shall be editable by the subscriber and duly verified by DDO.
8. In case, Aadhaar number is being given for legally wedded spouse, only the last four digits of the Aadhaar number may be provided.

**List of Documents to be attached with this form****By Claimant:**

- i. Photocopy of the first page of Pass Book/Bank Statement or cancelled cheque of the Bank Account or any other bank document showing the name and account details of Account Holder, in which the payout is to be credited
- ii. Copy of PAN Card of claimant.
- iii. KYC documents of claimant
- iv. One joint photograph
- v. Specimen signature of claimant

**By DDO:**

- i. Copy of the document containing employment details verified by HOO
- ii. Copy of the signed Form by subscriber (in case the form submitted by subscriber in physical mode)





**Form B6  
(Part D)  
UPS Payout Order (UPO) issued by PAO  
(System Generated)**

Photograph  
of  
Spouse

To,  
National Pension System Trust  
(address to be added)

File no:		Date of issue:	
UPS Payout Order (UPO) No:			

**1. Details of deceased subscriber:**

Name		PRAN No.		Date of death (as per death certificate)	
------	--	----------	--	--	--

**2. Details of legally wedded spouse on the date of superannuation:**

Name		PAN	
DOB		Gender	

**3. Details of Employment & Salary:**

	Length of Qualifying service in number of months	
	Average of last 12 Months basic pay	
	Last month salary (Basic Pay + DA)	
	Length of qualifying service in completed six months (fraction ignored)	
	Date of Start of Payout for deceased subscriber	
	Date of start of family Payout to spouse (on demise of subscriber)	
	Admissible Payout: Assured Payout*(IC/BC) * (1-FW%) where {IC <= BC} (Assured Payout = $(\frac{1}{2} \text{ of } P) \times (Q/300)$ ) with the condition that if $(P/2) \times Q/300$ is less than 10,000, it will be taken as 10,000, where P is basic pay and Q is qualifying service in months)	

**Sanction of Admissible UPS Benefits payable to Spouse**

**4. UPS Benefits payable to Spouse:**

Date of start of top-up Payout	
Lumpsum Payment	
Interest on Lump-sum Payment	
Monthly Family Pay-out (60 % of topup amount payable to subscriber)	
DR amount (on 60% of admissible payout)	
Arrears upto date of commencement of Family Payout (including arrears of monthly top up payout and DR on admissible payout)	
Top-up amount payable to subscriber till the date of demise of subscriber	
Family payout payable to Spouse after date of demise of subscriber	
Interest on Arrears for Top-up and applicable DR (if Applicable)	

Signature & Name of PAO	
PAO Name	PAO Registration No.
Date:	Place:

**Authorising the release of benefits upon receipt of UPS payout Order after due verification**

Authorised Signatory NPS Trust	
Date:	Place:

**Copy to,  
To Subscriber  
(address and email and mobile) – over email**

**Instructions to fill the form**

1. All fields are mandatory, unless marked with Asterisks.
2. Please fill the details of the subscriber as per the service records.
3. Please give details of DDO, PAO, Department/Ministry of the office from where you retired.
4. Any one of the 5 KYC documents may be provided. In case of online filling of the form Aadhar Number or CKYC ID may be provided.
5. The current address shall be as per the KYC document provided. In case there is change in the current address, the concerned KYC documents is to be updated first.
6. The mobile number and e-mail id of the claimant shall be verified separately by sending an OTP or a link as may be applicable.
7. The field of date of joining in Central Govt regular service shall be captured from the CRA system, however, in case of any change, it shall be editable by the subscriber and duly verified by DDO.
8. In case, Aadhaar number is being given for legally wedded spouse, only the last four digits of the Aadhaar number may be provided.

**List of Documents to be attached with this form**

**By Claimant:**

- i. Photocopy of the first page of Pass Book/Bank Statement or cancelled cheque of the Bank Account or any other bank document showing the name and account details of Account Holder, in which the payout is to be credited
- ii. Copy of Death certificate of deceased Government Subscriber
- iii. Copy of PAN Card of claimant.
- iv. KYC document of claimant
- v. One photograph
- vi. Specimen signature of claimant

**By DDO:**

- i. Copy of the document containing employment details verified by HOO
- ii. Copy of the signed Form by claimant