

JOINT DECLARATION UNDER PARA 26(6) OF THE EPF SCHEME, 1952

[Form to be used for:

1. Enrolling an 'excluded employee' as a member of EPF Scheme, 1952; and
2. Remitting Voluntary PF Contribution by a member – i.e. to allow an existing member to contribute towards PF on more than Rs.15000/- of his 'pay']

(Refer Paragraphs 2, 26, 26A, 29, 69 of Employees' Provident Funds Scheme, 1952)

To
The Regional P.F. Commissioner, Regional Office, Bengaluru (Central)

Declaration by the Employee

I, _____, son/ daughter of _____
hereby declare the following.

(Strike-off whichever is not applicable/ Print only whichever is applicable)

1. For enrolment:

- (a) I have read and understood Para 26(6) and definitions of 'pay', 'excluded employee' under Para 2 of EPF Scheme, 1952. Accordingly, I declare that I am an 'excluded employee' as per Para 2(f) (in) of the Scheme and is not enrolled as a member to the Scheme till now as my 'pay' / 'PF wage' from the date of joining an EPF covered establishment has been above the statutory wage ceiling of Rs. 15,000/-. Now, I wish to become a member of EPF Scheme, 1952 wef. _____ and hereby exercise my option for the same.

OR

(For those members who join employment again after superannuation)

- (b) I have read and understood Para 26(6), definitions of 'pay', 'excluded employee' under Para 2 and Para 69 (1) of the Scheme. Accordingly, I declare that I am an 'excluded employee' as per Para 2(f)(i) of EPF Scheme, 1952 as I have already withdrawn my full PF accumulations in the Fund under Para 69 (1) (a)/ (c). Now that I have again joined a EPF covered establishment, I hereby exercise my option to become a member of EPF Scheme, 1952 wef. _____.

2. For voluntary contribution on higher wages

- (a) I am an existing member of EPF Scheme, 1952 bearing PF Account Number _____ under UAN _____ with Emp id _____. I have read and understood Para 26(6)/ 26A/ Para 29 and definition of 'pay' under Para 2 of the Scheme. I wish to contribute towards PF on higher wages/ at higher rate and hereby exercise my option to contribute to Employees' Provident Fund on more than Rs. 15,000/- (statutory wage ceiling) of my pay per month wef _____.

(b) Rate of contribution:

- i. I exercise to contribute 12% of my entire 'pay' / 'Gross wages' as in ECR, OR
- ii. I exercise to contribute 12% of my entire 'PF wage' as in ECR, OR
- iii. I exercise to contribute _____. % (can only be higher than 12%) of my 'pay' / 'PF wage' / Rs.15, 000/- under Para 29 of the Scheme.

3. For enrolment and voluntary contribution - Fill up both 1 & 2 as applicable.

I agree to abide by/ comply with all the statutory provisions of EPF Act, 1952 and Schemes framed thereunder. Therefore, kindly approve the option exercised by me under Para 26(6) of the scheme alone with my employer. I also understand that the option exercised by me becomes valid only when it is approved by the competent authority.

Place:

Date:

Name and Signature of the Employee

Undertaking by the Employer

I / We, as the employer of the above-mentioned employee hereby undertake to:

- i. Pay the **administrative charges** payable at prescribed rates towards EPF/EPS contribution made by/ in respect of the said employee (including that of his/ her voluntary contribution); and also to
- ii. Comply with all the statutory provisions under EPF & MP Act, 1952 and Schemes framed thereunder in respect of such employee with effect from the date of option mentioned above as exercised by the employee.

2. Copy of Form-11 submitted by the member at the time of his/ her joining and Salary Slip/ statement in respect of the member for wage month _____ (both duly attested) are also enclosed herewith for verification. (Ex: if Date of Option by member is 01.06.2021 (May paid in June contribution), enclose salary slip for wage month May 2021).

Place:

Date:

Name and Signature of the Employer
Authorised Official with Seal.

For EPFO Office Use

The Joint Declaration in respect of Shri/ Smt/Ms. _____ [UAN: _____; PF Account No. : ____/____/_____/_____] under Para 26(6) of the Scheme for enrolment/ voluntary contribution is accepted herewith wef _____.

Regional/ Assistant PF Commissioner (Accounts)
(Name and Signature with Seal)

To

1. Shri/Smt/Ms. _____ (Through the employer)
2. M/s. _____
3. RPFC/ APFC (Enforcement)