



New Form : 11 - Declaration Form  
(To be retained by the employer for future reference)

## EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Fund Scheme, 1952 (Paragraph 34 & 57) and  
Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up Employment in any Establishment on which EPF Scheme, 1952 and for EPS, 1995 is applicable)

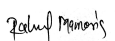
1.	Name of Member (Aadhar Name)	Rahul Mamoria
2.	Father's Name <input checked="" type="checkbox"/> Spouse's Name <input type="checkbox"/> (Please tick whichever applicable)	Ramavatar Mamoria
3.	Date of Birth (dd/mm/yyyy)	30/10/2001
4.	Gender (Male / Female / Transgender)	Male
5.	Marital Status ? (Single/Married/Widow/Widower/Divorcee)	Single
6.	(a) eMail ID	rahulmamoria@gmail.com
	(b) Mobile No (Aadhar Registered)	+91 7690898460
7.	Whether earlier member of the Employee's Provident Fund Scheme, 1952 ?	Yes / No <input checked="" type="checkbox"/>
8.	Whether earlier member of the Employee's Pension Scheme, 1995 ?	Yes / No <input checked="" type="checkbox"/>
9.	<b>Previous Employment details ? (If Yes, 7 &amp; 8 details above)</b>	
	a) Universal Account Number (UAN)	
	b) Previous PF Account Number	
	c) Date of Exit from previous Employment ? (dd/mm/yyyy)	
	d) Scheme Certificate No (If issued)	
	e) Pension Payment Order (PPO) (If issued)	
10.	a) International Worker	Yes / No <input checked="" type="checkbox"/>
	b) If Yes, state country of origin (name of other country)	
	c) Passport No.	
	d) Validity of passport (dd/mm/yyyy) to (dd/mm/yyyy)	To
11.	<b>KYC Details :</b> (attach self attested copies of following KYC's)	
	a) Bank Account No. & IFS Code	38618189563 & SBIN0031038
	b) AADHAR Number	646324001272
	c) Permanent Account Number (PAN), If available	FOQPM0478K
12.	First EPF Member Enrolled Date	First Employment EPF Wages
	Are you EPF Member before 01/09/2014	If Yes, EPF Amount Withdrawn?
	If Yes, EPS (Pension) Amount Withdrawn?	After Sep 2014 earned EPS (Pension) Amount Withdrawn before Join current Employer?
	Yes / No <input checked="" type="checkbox"/>	Yes / No <input checked="" type="checkbox"/>
	Yes / No <input checked="" type="checkbox"/>	Yes / No <input checked="" type="checkbox"/>

### UNDERTAKING

- 1) Certified that the particulars are true to the best of my knowledge
- 2) I authorise EPFO to use my Aadhar for verification / authentication / eKYC purpose for service delivery
- 3) Kindly transfer the fund 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 using his Digital Signature)
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date: 06/05/2024

Place: Hyderabad, India

  
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 the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995: ((Post allotment of UAN) The UAN allotted to the member is)  
Please Tick the Appropriate Option : The KYC details of the above member in the JAN 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 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