


**FORM 2 (Revised)**
**(For Unexempted/Exempted Establishments)**
**PF NOMINATION AND DECLARATION FORM**

(Declaration And Nomination Form under the Employees Provident Fund And Employees Pension Scheme)

**(Paragraphs 33 & 61(1) of the Employees provident funds Scheme,1952 and Paragraph 18 of the Employess Pension Scheme,1996)**

Name	Dinesh Kumar S
Father's Name	Ramasamy,SRIDHAR
Husband's Name	
Date of Birth	6/22/1994
Sex	M
Marital Status	S
Account No(PF or EPS No)	
Permanent address	2-212-5,sakthipuram doctors colony, reddipatti salem TN
Temporary Address	Software Development Block (SDB) - 1, Ground Floor to 12th Floors, Survey No. 602/3, Plot No.1, ELCOT IT/ITES -SEZ,Sholinganallur Village, Chennai TN

**Part A (EPF) #**

hereby nominate the person(s)/cancel the nomination made by me previously and nominate,the person(s) mentioned below to receive the amount standing to my credit in the Employees' provident Fund,in the event of my death.

Name & Address of Nominee	Nominee relationship with Member	Date of Birth	Total amount of share or accumulations to be paid to each Nominee(%)	If the Nominee is minor,name and relationship and address of the gaurdian who may recieve the amount during the minority of nominee
Ramasamy,SRIDHAR,2-215-5,Sakthi puram,Doctors colony,Reddipatty,Salem-636302.	Parent	16/07/1967	50	NA
Sridhar,CHITRA,2-215-5,Sakthi puram,Doctors colony,Reddipatty,Salem-636302.	Parent	22/10/1972	50	NA

1. Certified that I have no family as defined in para 2(g) of the Employees' Provident Funds Scheme,1952, and should acquire a family hereafter,the above nomination sholuld be deemed as cancelled.

2. Certified that my father/mother is/are dependent on me.

 \_\_\_\_\_  
 Signature Of the Subscriber

**Note:- A Fresh nomination shall be made by the member on his marriage and any nomination made before such marriage shall be deemed to be invalid**

Part B(EPS) (Para18)\$

I hereby furnish below particulars of the members of my family who would be eligible to receive widow/children pension in the event of my death.

SL No	Name & Address of the family member	Date of Birth	Relationship with the Member
1	Ramasamy,SRIDHAR	16/07/1967	Parent
2	Sridhar,CHITRA	22/10/1972	Parent
3			
4			

**Dated:10/6/2016**

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Signature Of the Subscriber

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed/thumb impressed before me by shri/shrimati \_\_\_\_\_ employed in my establishment after he/she has read the entry/entries have been read over to him/her by me and get confirmed by him/her.

**Place -----**

**Date:10/6/2016**

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**Signature Of the Employer or other authorised officer of the establishment**

**Designation:\_\_\_\_\_.**

**Name and address of the Factory/Establishment or rubber stamp thereof**