

Composite Declaration Form -11

(To be retained by the employer for future reference)

EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 & 57) &

Employees' Pension Scheme, 1995 (Paragraph 24)
(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1	Name	of the membe	r								
	Father'	's Name									
2	Father's Name Spouse's Name										
3	Date of Birth: (DD/MM/YYYY)										
4	Gender	r: (Male/Fema	nle/Transgender))							
5	Marital Status: (Married/Unmarried/Widow/Widower/Divorcee)										
6	(a) En	nail ID:									
7		nt employment fjoining in the	nt details: e current establis	shment (DD/N							
8	KYC Details: (attach self attested copies of following KYCs)										
	1 '										
	c) A	c) AADHAR Number									
	d) Pe	rmanent Acco	ount Number (P/	AN), if availal	ole						
9	Whether earlier a member of Employees' Provident Fund Scheme,						Yes / No				
10	Whether earlier a member of Employees' Pension Scheme, 1995						Yes / No				
					OR 10 above] -	Un-exempted	1				
11		ablishment e & Address	Universal Account Number	PF Account Number	Date of joining (DD/MM/ YYYY)	Date of exit (DD/MM/ YYYY)	Scheme Certificate No. (if issued	PPO Number (if issued)	Non Contributory Period (NCP) Days		
	Previo	Previous employment details: [if Yes to 9 AND/OR 10 above] For Exempted Trusts									
12	Name & Address of the Trust			UAN	Member EPS A/c Number	Date of joining (DD/MM/ YYYY)	Date of exit (DD/MM/ YYYY)	Scheme Certificate No. (if issued	Non Contributory Period (NCP) Days		
	a) In	a) International Worker:					Yes / No				
13	b) If yes, state country of origin (India/Name of other country)										
	c) Passport No.										
		d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]							de nacionale de la constitución de		
	d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]										

UNDERTAKING

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification/authentication/e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.*
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date: Place:			Signature of Member						
		DECLARATIO	N BY PRESENT EMPLOYER						
A.	The men	ember Mr/Ms/Mrs	has joined on and has been						
	allotted	PF No	and UAN						
В.	In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:								
	• I	Please Tick the Appropriate Option:							
	•	The KYC details of the above member i	n the LIAN database						
	. 0	Have not been uploaded	II the OAN database						
		Have been uploaded but not approved							
		Have been uploaded and approved with I	SC/e-sign.						
C.	In case t	the person was earlier a member of EPF Scho	me, 1952 and EPS, 1995:						
	•	Please Tick the Appropriate Option:-							
			nember in the UAN database have been approved with E-sign/Digital Signature						
		Certificate and transfer request has been a							
		The previous Account of the member is n	ot Aadhar verified and hence physical transfer form shall be initiated.						
	Date:		Signature of Employer with Seal of Establishment						

^{*}Auto transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.