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Employee code 603516

(For Unexempted /Exempted Establishments)

NOMINATION AND DECLARATION FORM

(Declaration and Nomination Form under the Employees' Provident Funds and Employees' Pension Scheme)

(Paragraphs 33 & 61 (1) of the Employees' Provident Funds Scheme, 1952 and paragraph 18 of the Employees' Pension Scheme, 1995)

1 Name (in Block Letters) : NARUKONDA VEERENDRA NADH  
2 Father's/Husband's Name : Purna Chandra Rao Narukonda  
3 Date of birth : 24-Nov-1999  
4 Sex : Male  
5 Marital Status : Unmarried  
6 Account No. (PF/EPS Number) : 603516  
7 Address (Residential) : Permanent not at located  
Temporary 25/392-1,port road,machillipatnam

PART A (EPF) #

I 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 and Address of the nominee/ nominees	Nominee's relationship with the member	Date of Birth	Total amount or share of accumulations in Provident Fund to be paid to each nominee(%)	If the nominee is a minor, name and relationship and address of the guardian who may receive the amount during the minority of nominee
kopparthi pavani valli sridevi 11/721,Jagannadhapuram,machillipatnam		15-Aug-1999	%	
Vanama chandrasekhar 11-249,Rajasekhar nagar,wyr	Grandfather	05-Aug-1957	%	

- 1 \* Certified that I have no family as defined in para 2(g) of the Employees' Provident Funds Scheme, 1952, and should I acquire a family hereafter, the above nomination should be deemed as cancelled.  
2 \* Certified that my father/mother is/are dependent upon me.  
( Strike out whichever is not applicable )

Signature

Signature or thumb impression 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

# If Married -> Spouse, Children (married or unmarried), his/her dependent parents, deceased son's widow and children.  
If unmarried then Parents, Brother, Sister or any other person(s).

Part B (EPS) (Para 18) \$

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 and address of the family members	Date of Birth	Relationship with the member
1			

\*\* Certified that I have no family, as defined in para 2(vii) of Employees' Pension Scheme, 1995 and should I acquire a family hereafter I shall furnish particulars thereon in the above form.

I hereby nominate the following persons for receiving the monthly widow pension (admissible under para 16 2(a) (i) and (ii) of Employees' Pension Scheme, 1995 in the event of my death without leaving any eligible family member for receiving Pension. \$

Name and Address of the Nominee	Date of Birth	Relationship with the member
kopparthi pavani valli sridevi 11/721,Jagannadhapuram,machillipatanam	15-Aug-1999	
Vanama chandrasekhar 11-249,Rajasekhar nagar,wyr	05-Aug-1957	Grandfather

Dated the : 14-Feb-2021

\*\*Strike out whichever is not applicable.

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed/thumb impressed before me by Shri/Smt./Kumari Narukonda Veerendra Nadh employed in my establishment after he/she has read the entries/the entries have been read over to him/her by me and got confirmed by him/her.

Place : HYDERABAD.

Dated the : 14-Feb-2021

Signature of the Employer or other authorised  
Officer of the establishment  
Designation : Authorised Signatory  
Deloitte  
null  
null  
HYDERABAD

\$ - Applicable If Married -> To Spouse and Children (includes children adopted legally before death in service.

\$ - Applicable to both Married and unmarried - (1) Married ----- To any person(s) other than spouse and children.  
/2) Unmarried ----- To Parents, Brother, Sister or any other person(s).