



The Employees' Pension Scheme, 1995

FORM 2

EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952

[Paragraphs 33 AND 61(1)]

EMPLOYEES' PENSION SCHEME, 1995

[Paragraphs 18]


DECLARATION AND NOMINATION FORM UNDER THE EMPLOYEES' PROVIDENT FUNDS SCHEME AND EMPLOYEES' PENSION SCHEME

1. UAN : 102120464515
2. Name (in block letters) : VINOTHA K
3. Father's / Husband's Name : KARUPPIAH
4. Date of Birth : 26/03/2004
5. Gender : FEMALE
6. Marital Status : UN-MARRIED
7. Address (Permanent) : 10a, Keela Kurichy, Karur, KARUR, TAMIL NADU, 639110
8. Address (Temporary) : 10a, Keela Kurichy, Karur, KARUR, TAMIL NADU, 639110
9. (A) Date of Joining of EPF : 01/09/2024
- (B) Date of Joining of FPS : --
- (C) Date of Joining of EPS : 01/09/2024



PART A (EPF)

I hereby nominate 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

Name of the Nominee / Nominees (1)	Address (2)	Nominees's relationship with the Member (3)	Date of Birth (4)	Total amount or share of accumulations in Provident Fund to be paid to each nominee (5)	If the Nominee is minor, name and relationship and address of the guardian who may receive the amount during the minority of (6)
 KARUPPIAH RAMASAMY AADHAAR: XXXX XXXX 7742 Bank A/c: NOT AVAILABLE	10a, Keela Kurichy, Karur, KARUR, TAMIL NADU, 639110	Dependent Father	02/05/1973	100%	--


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
2. *Certified that my father/mother is/are dependant upon me.

(Signature is not required as the document is to be digitally signed)

The Employees' Pension Scheme, 1995


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. (1)	Name of the Family members (2)	Address (3)	Date of Birth (4)	Relationship with the the (5)
1	 --	--	--	--

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

I hereby nominate the following person for receiving the monthly widow pension admissible under para 16(2)(a)(i) and (ii) in the event of my death without leaving any

Name and Address of the Nominee	Date of Birth	Relationship with the member
 KARUPPIAH RAMASAMY AADHAAR: XXXX XXXX 7742 Bank A/c: NOT AVAILABLE	02/05/1973	FATHER

Date 22-Sep-2025

(Signature is not required as the document is to be digitally signed)