National Pension System (NPS) - Request for Subscriber Shifting

NSDL e-Governance Infrastructure Limited

(Please fill all the details in CAPITAL LETTERS & in BLACK INK only. All fields / sections marked in * are mandatory.)

Section A - General Information* (*Mandatory for all Subscribers. Please tick the respective block which is applicable.*)

I) Subscriber's Name *: _____
(First Name) (Middle Name) (Last Name)

II) PRAN (Permanent Retirement Account Number) *: | | | | | | | | | | | | |

III) Existing PRAN association (Refer Instruction No. I)

a) Sector: * State Government ☐ Central Government ☐ All Citizens of India (UOS) ☐ Corporate Sector ☐

b) Office Reg. No: * _____ Office Name: * _____

IV) **Target PRAN association** (Refer Instruction No. II)

Sector: * State Government ☑

b) DDO Reg. No: * _____ DDO Name: * _____

V) PAN* | | | | | | | | | | |

VI) Aadhaar* | | | | | | | | | | | | |

I hereby authorize CRA registered with Pension Fund Regulatory and Development Authority (PFRDA) to use my Aadhaar details for National Pension System (NPS) and authenticate my identity through the Aadhaar Authentication system (Aadhaar based e-KYC services of UIDAI) in accordance with the provisions of the Aadhaar (Targeted Delivery of Financial and other Subsidies, Benefits and Services) Act, 2016 and the allied rules and regulations notified thereunder. I understand that the Aadhaar details (physical and / or digital, as the case maybe) submitted for availing services under NPS will be maintained in NPS till the time the account is not inactive in NPS or the timeframe decided by PFRDA, the regulator of NPS, whichever is later. I understand that Security and confidentiality of personal identity data provided, for the purpose of Aadhaar based authentication is ensured by CRA registered with PFRDA till such time it is acting as CRA for my NPS account.

VII) Nomination Details* *(Mandatory - You can nominate up to a maximum of 3 nominees and if you desire so please fill Additional Nomination Form provided on Page 5&6. Please refer to Instruction No. VI.)*

Nominee's Name: : _____
(First Name) (Middle Name) (Last Name)

Relationship with the Nominee: ☐ Date of Birth (In Case of Minor): | | | | | | | | |
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Nominee's Guardian Details (in case of a minor) : _____
(First Name) (Middle Name) (Last Name)

Section B - Additional information for Subscribers shifting to Government Sector (*All Details are Mandatory)*
[Subscriber's Employment Details to be filled and attested by DDO. Please refer to Instruction No. IX & X]

a) Date of Joining: | | | | | | | | (dd/mm/yyyy) b) Date of Retirement: | | | | | | | | (dd/mm/yyyy)

c) Group of the Employee : A ☐ B ☐ C ☐ D ☐

d) Office: | | | | | | | | | | | |