Ver 1.1

Cent	ral Re	ecord					N SYS DL e-Go				uctu	re Lir	nite	b		
Request For Char	nge/C						r Details					I-PIN	T-P	IN/PF	RAN	Card
For POP-SP/DDO/NL-CO	cuse:					For PO	P/POP-SP/I	PAO/DTO	/DTA/Pi	AO/ N	L-AO	/NL-00	use:			
Registration No.						Registra	tion No.:									
Date of Receipt:						l i	Receipt :				POP-S O Starr		DTO	/DTA/P	rAO/N	L-AO/
Signature and Stamp of P	POP-SP	P/DDO/I	NL-CC				By : By:									
Receipt No.: (Mandatory for PC		SP)														
Acknowledgement No. (To be filled by Nodal Office as g			CAN / CRA	system)												
hereby request for the followi	ing deta	ils for th	ne change	e [Please tio	ck (✔)].											
 Change or Correction Reissue of PRAN Car Vermanent Retirement Active 	ď			er Details		B) Re	issue of I-	PIN or T-	PIN (Not	t Applica	able for i	NPS-Lite	Subsc	riber)		
hereby submit the following o orresponding rows.]		-	-			-			ere chang	e/corre	ction is	s require	d and	provide	the deta	ails in th
Section A – Change or Co	orrecti	on in S	Subscrib	er Maste	r Detail	s (* Indicat	es Mandato	ry Field)								
1. PERSONAL DETAIL	S: (Plea	ase refer	r to Sr. No.	.1 of the ins	tructions)											
Name of Applicant in full First Name*		Shri	i	Smt.		Kumari										
Middle Name																
Last Name																
Subscriber's Maiden Name																
<u>Father's Full Name</u> : First Name																
Middle Name																
Last Name																
Mother's Full Name:																
First Name																
Middle Name																
Last Name																
Date of Birth		d /	m m	/ у у												
(Date of Birth should be sup	ported b	oy releva	ant docume	entary proof	. Nodal C	office shall ve	erify the same	e before up	odating de	etails in	the CR	RA syster	n.)			
Gender [please tick (✓)]		Male	e	Fem	ale		Others									
Marital Status [please tic	:k (✓)]	Marr	ried	Unm	arried		Others									
PAN CARD																
Spouse Name (Refer Sr. No. 1 of instructions)																
KYC Number								Gen	erated from	Central K	YC Regis	try. Submis	sion of p	roof for the	same is r	necessary.
Retirement Adviser Code KYC Number, Retirement A	dvisor	Codo an	nd Spouse	Namo field	le aro no	t applicable	for Covorn	nont & ND	S Lito Su	beerib	ore					
_			-										_			
2. PROOF OF IDENTIT	Y (Pol)	(Any or	ne of the d	locuments n	eed to be	e provided a	ong with the	identificatio	on numbe	er) [Plea	se refer	Sr. No. 2 o	of the in	structions]	
Passport							Passport I	Expiry Da	te		1		1			
Voter ID Card							PAN Card									
Driving License							Driving Lie	cense Exp	piry Date	e d		/ m		/ у		
NREGA JOB Card Others	Name	of the I	חו									Please	efer Sr	No. 2 of t	he instru	ctions
Others	name		U U									1 100301	31.	1 10. Z UI L	ne matru	000113.

Annexure - S2

3. PROOF OF ADDRESS (PoA)	Correspondence Address		Permanent Address					
[Please tick (\checkmark), as applicable]	Passport /Driving License/UID (Aadhaar)/Voter I Card/Ration Card/Others	D card/NREGA Job	Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others Registered Lease/Sale agreement of residence/Municipal Tax Receipt #Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid					
#Not more than 2 months old. Please refer Sr. No. 2 of the instructions	Registered Lease/Sale agreement of residence/M	Iunicipal Tax						
	Receipt #Latest Piped Gas/Water/Electricity/Telephone[La	andline or postpaid						
	mobile] Bill		mobile] Bill					
4.1 CORRESPONDENCE ADDRESS DE	TAILS [Please refer Sr. No. 2 of the instructions]							
Address Type* Residential/	Business Residential Busi	iness F	Registered Office Unspecified					
Flat/Room/Door/Block no.		Landma	ark					
Premises/Building/Village								
Road/Street/Lane								
Area/Locality/Taluk								
City/Town/District			PIN Code					
State/U.T.								
4.2 PERMANENT ADDRESS DETAILS			as above.] (Please refer Sr. No. 2 of the instructions)					
Address Type* Residential/	Business Residential E	Business	Registered Office Unspecified					
Flat/Room/Door/Block no.		Landma	ark					
Premises/Building/Village								
Road/Street/Lane								
Area/Locality/Taluk								
City/Town/District			PIN Code					
State/U.T.								
5. CONTACT DETAILS								
	Tel (Dee) (with CTD code)						
Tel. (Off) (with STD code) +		with STD code) +						
Mobile + 9 1	(MODIIE I	Number is requir	ed for communication and to get SMS alerts)					
Email ID								
6. OTHER DETAILS (Please refer to Sr no.	3 of the instructions)							
► Occupation Details [please tick(✓)]								
Private Sector Dublic Sector	Government Sector Profession	onal						
Self Employed Homemaker		Please Specify)						
Income Range (per annum) Upto 1 la			c to 25 lac 25 lac and above					
Educational Qualifications Below SS Belows Tick If Applicable Boliticall			ters Professionals (CA, CS, CMA, etc.) del Person (Please refer instruction no.3)					
••								
7. SUBSCRIBER BANK DETAILS [All b	eank details are mandatory except MICR Co	ode.] (Please ref	er to Sr no. 4 of the instructions)					
You want to change Bank details of: Tie	er I Tier II							
(In case you want to change bank details	in both Tier I & Tier II Account, tick both che	eck box)						
Tier I Account : Savings A/c	Current A/c							
Bank A/c Number								
Bank A/c Number								
Bank A/c Number Bank Name			PIN Code					
Bank A/c Number Bank Name Branch Name								
Bank A/c Number Bank Name Branch Name	State/U.T.							
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code	IFS Code							
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI	IFS Code ease Tick (✓) else, provide the details be							
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c	IFS Code	low:						
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c Bank A/c Number	IFS Code ease Tick (✓) else, provide the details be	low:						
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c Bank A/c Number Bank Name	IFS Code ease Tick (✓) else, provide the details be							
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c Bank A/c Number Bank Name Branch Name	IFS Code ease Tick (✓) else, provide the details be							
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c Bank A/c Number Bank Name	ease Tick (✓) else, provide the details be Current A/c		C o u n t r y					
Bank A/c Number Bank Name Branch Name Branch Address Bank MICR Code Tier II Account: If same as Tier I, PI Savings A/c Bank A/c Number Bank Name Branch Name	IFS Code ease Tick (✓) else, provide the details be							

Ver 1.1

Annexure - S2

8. SUBSCRIBERS NOMINATION DETAILS (Ple	ase refer to Sr. No . 5 of the instructions)					
You want to change Nomination details of: Tie	er I Tier II					
	both Tier I & Tier II Account, tick both check box)					
Tier I Account :						
	mum of 3 nominees and if you desire so please fill in Addition	al Nomination Form provided on page no. 4 & 5 separately.)				
First Name	Middle Name	Last Name				
Relationship with the Nominee	Date of Birth (In case of I	Minor) d d / m m / y y y				
Nominee's Guardian Details (in case of a minor)						
First Name	Middle Name	Last Name				
	iol () clos, provide the details below					
Tier II Account : If same as Tier I, Please 1						
Name of the Nominee (You can nominate up to a maxi First Name	mum of 3 nominees and if you desire so please fill Additional Middle Name	Nomination Form provided on pages 4 & 5 separately) Last Name				
First Name						
Relationship with the Nominee	Date of Birth (In case of	Minor) d d / m m / y y y y				
	Date of Diffit (in case of					
Nominee's Guardian Details (in case of a minor)						
First Name	Middle Name	Last Name				
Section C – Request for Reissue of PRA Reissue of T-PIN, I-PIN and reissue of PRA per the preference given at the time of regis I the applicant, do hereby declare that the information & belief. Date : d d / m m / y y y y To be filled by POP / POP-SP KYC Compliance : Yes KYC document accepted for identify proof : Copy of PAN card submitted : Yes PAN Compliance : Yes	N card will be chargeable to Subscriber/emplo stration under NPS. provided above is true to the best of my knowledge	oyer by CRA. PRAN Card will be re-printed as Signature/Thumb Impression* of the Subscriber				
Signature of Authorized Signatory Name :						
POP / POP-SP Seal	5					

Ver 1.1

Annexure - S2

	ADDITIONAL NOMINATION F	ORM
	INSTRUCTIONS FOR FILLING IN TH	IE FORM
are withdrawn is to be provided hereunder (Please	refer instruction no: 5). Also, please note the sent in the NPS account of the Subscriber s	in case of the demise of the Subscriber before entire proceeds at in case of demise of the Subscriber after opting for deferred shall be withdrawn upon receiving the request and paid to the e of the obligation.
I hereby submit the Nomination details for: (Pleas	e Tick{⁄}) Tier I Tier II	account under NPS.
(Please Tick on above both the option (i.e Tier I an	d Tier II) in case you want to retain same no	mination for both account and in case of different nomination
kindly fill separate Nomination Form)		
I, of my family to receive the amount in my PRAN acc		minate the person(s) mentioned below who is/are member(s)/ e event of my death.
1. Name of the Nominee:		
1st Nominee	2nd Nominee	3rd Nominee
First Name Middle Name Last Name	First Name Middle Name Last Name	First Name Middle Name Last Name
2. Present Communication address of the nom	nees:	
Address of 1st Nominee	Address of 2nd Nominee	Address of 3rd Nominee
3. Date of Birth* (Only in case of a minor):		
1st Nominee d I m m I y <th< th=""><th>2nd Nominee d d / m m / y y</th><th>y y y 3rd Nominee d d 1 m m 1 y y y y</th></th<>	2nd Nominee d d / m m / y y	y y y 3rd Nominee d d 1 m m 1 y y y y
4. Relationship with the Nominee:	and Nominee	2nd Nomines
1st Nominee	2nd Nominee	3rd Nominee
5. Percentage Share:		
1st Nominee %	2nd Nominee	% 3rd Nominee %
6. Nominee's Guardian Details (Only in case of a	i minor):	
1st Nominee's Guardian Details	2nd Nominee's Guardian Details	3rd Nominee's Guardian Details
First Name	First Name	First Name
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name
Dated this day of	20 at	Signature/ Thumb Impression* of the Subscriber

*Note: Left thumb impression in case of illiterate male Subscriber and Right thumb impression in case of illiterate female subscriber must be obtained.

TO BE	FILLED/ATTESTED BY POP-SP/DDO/NL-CC	
Certifie	d that the above declaration and nomination details has been signed /	
	after he / she have read the entries / entr	ies have been read over to him / her by me and got confirmed by him / her.
	Rubber Stamp of the POP-SP/DDO/NL-CC	Signature of the Authorised Person
	P/DDO/NL-CC Registration Number	Designation of the Authorised Person :
	tted by CRA)	
		POP-SP/DDO/NL-CC Office Name :
Date	d d I m m I y y y y	
TO BE	FILLED/ATTESTED BY POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO	
		POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO Registration Number
		(Allotted by CRA):
Rubbo	Stamp of the POP/POP-SP/PAO/DTO/DTA/PrAO/NL-AO/NL-OO	
		Signature of the Authorised Person
		•

INSTRUCTIONS FOR FILLING THE FORM

General Guidelines

- (a) This form is to be used for the purpose of change/correction in Subscriber master details, reissue of I-Pin /T-Pin, reissue of PRAN card.
- (b) The form is to be submitted at the Nodal Office POP/POP-SP for carrying out the necessary changes.
- (c) Please tick the box on the left margin of appropriate row where change/correction is required and provide the details in the corresponding row. Please strike off the remaining blank rows for which no change is requested.
- (d) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- (e) Details Marked with (*) are the mandatory fields. Mention 12 digits PRAN correctly.
- (f) All Dates should be in "DD/MM/YYYY" Format.
- (g) Reissue of T-PIN, I-PIN (Not Applicable for NPS-Lite Subscriber) and reissue of PRAN card will be chargeable to Subscriber/employer by CRA.

S. No	ltem No.	Item Details	Instructions						
1	1	Spouse Name	If married, spouse name is mandatory.						
			S.No Proof of Identity (Copy of any one)			Proof of Address (Copy of any one)			
			1	Passport issued by Government of India.	1	Passport issued by Government of India			
			2	Ration card with photograph.	2	Ration card with photograph and residential address			
		3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and resident address				
	2 2,3 & 4		4	Certificate of the POP for an existing customer.	4	Certificate of the POP for an existing customer.			
			5	Voters Identity card with photograph and residential address.	5	Voters Identity card with photograph and residential address			
			6	Valid Driving license with photograph	6	Valid Driving license with photograph and residential address			
		Identity, Correspondence & Permanent address details	7	Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly	7	Letter from any recognized public authority at the level Gazetted officer like District Magistrate, Divisional commission BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate of			
			8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Membe Parliament or Member of Legislative Assembly			
			9	Aadhar Card / letter issued by Unique Identification Authority of India	9	Aadhar Card / letter issued by Unique Identification Authorit India clearly showing the address			
2			10	Job cards issued by NREGA duly signed by an officer of the State Government	10	Job cards issued by NREGA duly signed by an officer of State Government			
			11	Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.		The identity card/document with address or letter of allotrr of accomodation issued by any of the following: Cen State Government and its Departments, Statutory/Regula Authorities, Public Sector Undertakings, Scheduled Commer Banks, Financial Institutions and listed companises for t employees.Pension or Family Pension Payment Orders iss by Govt. Departments or PSU containing address.			
			12	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water/piped gas bill in the name of the Subscr / Claimant and showing the address (less than 2 months old)			
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name the Subscriber / Claimant and showing the address (less that months old)			
			14	Photo Credit card.	14	Latest Property/house Tax receipt (not more than one year of			
					15	Existing valid registered lease agreement of the house on sta paper (in case of rented/leased accommodation)			
			(i) If th (ii) If op	 Note: (i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/her the account opening form, the document may be accepted as a valid proof of both identity and address. (ii) If the address indicated on the document submitted for identity proof differs from the current address mentioned in the account opening form, a separate proof of address should be obtained. All future communications will be sent to correspondence address If correspondence & Permanent address are different, then proof for both have to be submitted. 					
3	6	Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.						
4	7	Subscriber's Bank Details	conta prepr	In case, subscriber provides bank details, it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account No. and IFS Code should be submitted.					
5	8	Subscriber's Nomination Details	not be	se of more than one nominee, percentage share value for e accepted in the nomination(s). Sum of percentage share equal to 100, entire nomination will be rejected.					
				General Information for Subscribe	rs				

b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the Nodal Officer / POP / POP-SP where they submit the application.

c) For more information, contact CRA:

Website: https://www.npscra.nsdl.co.in Call: 022-4090 4242 Address: Central Recordkeeping Agency (CRA) NSDL e-Governance Infrastructure Limited 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400013