Annexure S1	Page 1
Application for Allotment of Permanent Retirement Account Number (PRAN)	
(To avoid mistake(s), please follow the accompanying instructions and examples carefully before filling up the form)	To affix recent
Acknowledgement No.	Coloured photograph
(To be filled by FC)	$(3.5 \text{ cm} \times 2.5 \text{ cm})$
Permanent Retirement Account Number :	
(To be filled by FC after PRAN generation)	
Sir/Madam,	
I hereby request that a permanent retirement account number be allotted to me.	
I give below necessary particulars :	
Section A - Subscribers Personal Details (* Indicates Mandatory Field)	Signature/Left Thumb Impression of Subscriber in black ink
1. Full Name (Full expanded name: initials are not permitted) Please Tick as applicable, Shri Smt . Kumari	
First Name *	
Middle Name	
Last Name	
2. Gender * Please Tick as applicable, Male Female	
3. Date of Birth *	
D D M M Y Y Y Y (Date of Birth to be Certified by DDO) 5. Father's Full Name:	
5. ramer's run Name: First Name *	
Middle Name	
Last Name	
6. Present Address:	
Flat/Unit No, Block no. *	
Name of Premise/Building/Village	
Area/Locality/Taluka	
District/Town/City *	
State / Union Territory *	
Country *	
Pin Code *	
7. Permanent Address: If same as above, Please Tick else,	
Flat/Unit No, Block no. *	
Name of Premise/Building/Village	
Area/Locality/Taluka	
District/Town/City *	
State / Union Territory *	
Country *	
Pin Code *	
8. Phone No.	
STD Code Phone No.	
9. Mobile No.	

<u>Annexure</u> 10. Email ID																								Page	<u>e 2</u>	
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11. Subscribe	ers Bank D	etails :	(Plea	se refe	r instru	action	no. 4	1)				Sa	ving	A/c				Curre	ent A/	c						
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Bank Add	lress*																									
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Pin Code*																										
Bank IFS	Code														(If I	FS co	ode is	s not a	availa	ble,	then j	provie	de MI	CR)		
Bank MIC	CR Code																									
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(Please ticl																					0					
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					ii) E	Email	Alert:	:	Y	es		Ν	0													
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hat is stated ab	oove is true	to the	best o	f my iı	nforma	tion &	k beli	ief.																		
Date :																										
L	D D	M M	í Y	Y	Y	Y																	ture/I			
Section B	- Subsci	ribers	Em	plovr	nent	Deta	uils t	o be	fille	ed a	and a	ttest	ed b	v D	DO (A11 E	Detail	s are	Mand	ator		npres	sion (or Su	oscri	ber
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1. Date of 3	Johning											2. Dai		xeure	ment										17	
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3. PPAN											Г			 	(Plea	ise re	efer to	o insti	uction	ns N	o.5.)					
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Section C - Subscriber's Nomination Details (* Indicates Mandatory Field for nominee)

1. Name of the Nominee *:										
1 st Nominee First Name *	2nd Nominee First Name *	3rd Nominee First Name *								
Middle Name	Middle Name	Middle Name								
Last Name	Last Name	Last Name								
2. Date of Birth (In case of a minor)*:										
1st Nominee	2nd Nominee	3rd Nominee								
3. Relationship with the Nominee*:										
1st Nominee	2nd Nominee	3rd Nominee								
4. Percentage Share *: 1st Nominee	6 2nd Nominee %	3rd Nominee %								
5. Nominee's Guardian Details (in case of a minor)*:										
1st Nominee's Guardian Details	2nd Nominee's Guardian Details 3rd N	Nominee's Guardian Details								
First Name *	First Name *	First Name *								
	┫┝╌┼┼┼┼┼┼┼┼┼┼┤┥									
Middle Name	Middle Name	Middle Name								
Last Name	Last Name	Last Name								
6. Conditions rendering nomination invalid:										
1st Nominee	2nd Nominee	3rd Nominee								
Continu D. Cubaniban Cabama Dataila										
Section D - Subscriber Scheme Details										
1st Scheme	2nd Scheme	3rd Scheme								
Pension Fund Managers Name/Code	Pension Fund Managers Name/Code	Pension Fund Managers Name/Code								
Scheme ID No./Name	Scheme ID No./Name	Scheme ID No./Name								
	┫┝╌┼┼┼┼┼┼┼┼┼┼┤╢									
Percentage Share	Percentage Share	Percentage Share								
%		<u> </u>								
Section E - Declaration										
	A approved Terms and Conditions for Subscri									
	<i>details</i>) & <i>T-pin</i> . I agree to be bound by the sa									
that CRA may, as approved by PF	FRDA, amend any of the services compl	etely or partially without any new								

Declaration/Undertaking being signed.

Iwhat is stated a	, the applicant, do hereby declare that bove is true to the best of my information & belief.	
Date :	D D M M Y Y Y Y	
		Signature/Left Thumb Impression of Subscriber

INSTRUCTIONS FOR FILLING PRAN FORM

- a) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- b) Details Marked with (*) are the mandatory fields.
- c) Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- d) 'Individual' Subscriber should affix a recent colour photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)
- e) Signature /Left thumb impression should only be within the box provided in the form. The signature should not be on the photograph. If there is any mark on the photograph such that it hinders the clear visibility of the face of the Subscriber, the application will not be accepted.
- f) Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer under official seal and stamp.

Sr. No.	Item No	Item Details	Guidelines for Filling the Form						
		Section	A - Subscribers Personal Details						
1	3.	Date of Birth	All Dates Should be in "DDMMYYYY" Format						
2	6.	Present Address	All future communications will be sent to present address.						
3	8, 9, 10	Phone No., Mobile No, & Email ID	It is advisable to mention either "Telephone number" or "Mobile number" or "Email id" so that Subscriber can be contacted in future for any discrepancy.						
4	11	Subscriber's Bank Details	For subscribers, the Bank details are mandatory. In case, Bank details are not available at the time of filling the form, subscriber has to accept the declaration for providing the Bank details within six months or on opening of Bank account whichever is earlier.						
		Section I	3 - Subscribers Employment Details						
Subsci	riber and should be verifie	riber's Employment details i ed by the Authorised Signato / Striking off of any of the e							
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number), if it has been allotted to the subscriber by the concerned PAO.						
6	8&9	PAO/CDDO Reg. No. & DDO Reg. No.	PAO/CDDO Reg. No. and DDO Reg. No. are the unique Registration number allotted by Central Recordkeeping Agency. CDDOs will register as both PAOs and DDOs. NCDDOs will register only as DDOs and obtain the PAO Reg. No. from their respective PAOs.						
		Section (C - Subscriber's Nomination Details						
7	4.	Percentage Share	Subscriber can nominate maximum of three nominees. Subscriber can not fill the same nominee details more than once. Percentage share value for all the nominees must be integer. Fractional value will not be accepted. Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected.						
8	5.	Nominee's Guardian Details	If a nominee is a minor, then nominee's guardian details will be mandatory.						
		Sectio	on D - Subscriber scheme details						
		mention the Scheme details	s i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest an also search for the scheme details on <u>http://www.npscra.nsdl.co.in</u>						
9	Scheme	Subscriber can select max: http://www.npscra.nsdl.co Subscriber can not fill the If a scheme name is filled filled for that scheme.	imum three schemes. Details of the schemes are available on <u>in</u> same scheme details more than once. in the form for scheme setup there must be a PFM name and percentage contribution						
10	Percentage Share	If the Scheme details are not filled, default scheme as approved by PFRDA will be applicable Scheme Contribution Value will be in terms of percentage. It cannot be in terms of amount. Percentage contribution value for all the schemes must be integer. Fractional value will not be accepted. If the sum of contributions (in percentage) across all the schemes is not equal to 100, the balance will be allotted to the default scheme approved by PFRDA.							

GENERAL INFORMATION FOR PRAN SUBSCRIBERS

- a) Subscribers can obtain the application form for PRAN in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) from DDO or can freely download from the CRA website (http://www.npscra.nsdl.co.in).
- b) The request for a reprint of PRAN card with the same PRAN details or/and changes or correction in PRAN data can be made by filling up 'Request for change/correction in subscriber master details and/or re-issue of I-Pin/T-Pin/PRAN card' or/and 'Request For change in signature and/or change in photograph'. The form is available from the sources mentioned in (a) above.
- c) The Subscriber can obtain the status of his/her application from the CRA website or through the respective PAO/CDDO.
- d) For more information
 - Visit us at <u>http://www.npscra.nsdl.co.in</u> Call us at 022-24994200
 - e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, NSDL e-Governance Infrastructure Limited, 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

Annexure S5

Covering letter for Subscriber Registration Application Forms (To be submitted by DDO in duplicate on official stationery)

To NSDL CRA,

From:

Date:

DDO Registration Number: DDO Name and designation: DD 's contact No.:

Enclosed please find _______ (*in words*) number of Subscriber registration application forms, for the purpose of allotment of Permanent Retirement Account Number (PRAN).

I the authorized signatory, do hereby declare that what is stated above is correct and complete.

Yours faithfully,

Signature/Name of authorized signatory Acceptance Date and Stamp of FC branch Stamp of DDO

Instructions:

- 1. This covering letter is to be provided by the DDO along with the subscriber registration forms.
- 2. The total number of forms per covering letter should not exceed 50. If the total subscriber registration forms exceed 50, kindly provide different covering letters.
- 3. Please quote the correct DDO Reg.No. allotted by CRA. The forms are liable to be rejected if incorrect DDO Reg. No. is mentioned.

Annexure S6

Covering Letter with Subscriber Registration Application Form (To be submitted by PAO in duplicate on official stationery)

To NSDL CRA,

From:

Date:

PAO Registration Number: PAO Department/Ministry: PAO Contact No.:

Enclosed please find DDO wise Subscriber Registration Forms along with the covering letter from the respective DDOs for the purpose of allotment of Permanent Retirement Account Number (PRAN). The Details of the DDO are as listed below:

Sr. No.	DDO Registration Number	DDO Office	Number of Packets	Total Number of Forms (in words)
	Total number of fo	orms attached		

I the authorized signatory, do hereby declare that what is stated above is correct and complete.

Yours faithfully,

Signature/Name of Authorised Signatory Acceptance Date and Stamp of FC branch: Stamp of PAO

Instructions:

- 1. This covering letter is to be provided by the PAO along with the subscriber registration forms.
- 2. The total number of forms per DDO covering letter in a single packet should not exceed 50.
- 3. The subscriber application forms should be arranged DDO wise along with the respective DDO covering letter in the same order as mentioned above.
- 4. The Provisional Receipt Number will be issued DDO wise.

5. Please quote the correct PAO Reg. No. allotted by CRA.. The forms are liable to be rejected if incorrect PAO Reg. No. is mentioned.
