## ANNEXURE Vide GO (P) No.149/2013/Fin dated 03.04.2013) (TO BE FURNISHED IN DUPLICATE BY THE EMPLOYEE)

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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 the second seco	recent			
Acknowledgement No. (To be filled by FC)  Coloured ph (3.5 cm x 2)	otograph			
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 * 4. PAN				
D D M M Y Y Y Y (Date of Birth to be Certified by DDO)				
5. Father's Full 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 *	<del></del>			
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.				

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10. Email ID			
11. Subscribers Bank Details: Please refer instruction no. f (4)  Savings A/c  Current A/c			
Bank A/c Number			
Bank Name			
Bank Branch			
Bank Address			
Bank Address			
Pin Code Pin Code			
Bank MICR Code (Wherever applicable)			
Wherever appreadie)			
12. Value Added Services:  i) SMS Alert  Yes No			
ii) Email Alert: Yes No			
I, the applicant, do hereby declare that			
what is stated above is true to the best of my information & belief.			
Date :			
D D M M Y Y Y Y Signature/Left Thumb			
Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory)			
1. Date of Joining 2. Date of Retirement			
D D M M Y Y Y Y D D M M Y Y Y Y			
3. PPAN (Please refer to instructions No.5.)			
4. Group of the Employee (Please Tick) Group A Group B Group C Group D			
5. Office			
6. Department			
7. Ministry			
8. DDO Registration Number 9. DTO Registration Number			
(Please refer to instructions No.6.)			
10. Basic Salary			
11. Pay Scale			
Certified that the above declaration has been signed / thumb impressed before me by			
details is as per employee records available with the Department.			
Signature of the Authorised Person Rubber Stamp of the DDO			
Designation of the Authorised Person:  Name of the DDO			
Date:			

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Section C - Subscriber's Nomination D	etails (* Indicates Mandatory Field for nominee)	
1. Name of the Nominee *:  1st Nominee	2nd Nominee 3rd	Nominee
First Name *	First Name * First Name *	Nominee
Middle Name	Middle Name Middle Name	
Mildule Ivalile	Windle 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	2nd Nominee	%
5. Nominee's Guardian Details (in case of a minor)*:  1st Nominee's Guardian Details	2nd Nominee's Guardian Details 3rd Nominee's Guard	ian Details
First Name *	First Name * First Name *	<del></del>
Middle Name	Middle Name Middle Name	
Last Name	Last Name Last Name	
6. Conditions rendering nomination invalid:		
1st Nominee	2nd Nominee 3rd Nominee	
Section D - Subscriber Scheme Details		_ <del></del>
1st Scheme Pension Fund Managers Name/Code	2nd Scheme     3rd Scheme       Pension Fund Managers Name/Code     Pension Fund M	anagers Name/Code
Scheme ID No./Name	Scheme ID No./Name Scheme ID No./	Name
Percentage Share	Percentage Share Percentage Shar	e e
%	%	
Section E - Declaration		
Section E - Declaration		
	A approved Terms and Conditions for Subscribers on the G	
	details) & T-pin. I agree to be bound by the said terms and	
Declaration/Undertaking being signed.	RDA, amend any of the services completely or par	many without any new
I what is stated above is true to the best of my informati	on & helief	
Date: D D M M Y Y Y	<del></del>	
		Signature/Left Thumb Impression of Subscriber

## INSTRUCTIONS FOR FILLING PRAN FORM

- a) This form is to be used by State Governments and Union Territories employees.
- b) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- c) Details Marked with (\*) are the mandatory fields.
- d) Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- e) '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.)
- f) 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.
- g) 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	If Subscribers mentions any of the bank details, except MICR Code all the bank details will be mandatory.		
<b>—</b>	Section B · Subscribers Employment Details				
It is mandatory to fill the Subscriber's Employment details in the application. The employment details should be filled by the respective DDO of the Subscriber and should be verified by the Authorised Signatory.  DDO should ratify Overwriting / Striking off of any of the employment details.					
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number) or equivalent number, if it has been allotted to the subscriber by the respective state government / Union Territory.		
6	8 & 9	DTO Reg. No. & DDO Reg. No.	DTO Reg. No. and DDO Reg. No. is the unique Registration number allotted by Central Recordkeeping Agency.		
		Section (	- 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.		
		Section	on D - Subscriber scheme details		
If the Subscriber is unable to mention the Scheme details i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest Facilitation Centre (FC) for information or the Subscriber can also search for the scheme details on http://www.npscra.nsdl.co.in					
9	Subscriber can select maximum three schemes. Details of the schemes are available on http://www.npscra.nsdl.co.in Subscriber can not fill the same scheme details more than once. If a scheme name is filled in the form for scheme setup there must be a PFM name and percentage contribution filled for that scheme.  If the Scheme details are not filled, default scheme as approved by PFRDA will be applicable.				
10	Percentage Share	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.
- The Subscriber can obtain the status of his/her application from the CRA website or through the respective DTO.
- d) For more information
  - Visit us at http://www.npscra.nsdl.co.in
  - Call us at 022-24994200
  - e-mail us at info.cra@nsdl.co.in
  - Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai 400 013.
  - ✓ DDO/DTO/Authorized Person/Authorized Signatory be read as Appointing Authority.
  - ✓ DDO/DTO Reg.No. To be allotted by the Central Record Keeping Agency to the Sub Treasury office / District Treasury Office concerned.