F.No. 5-ITPO(2)/E-I/2017 part India Trade Promotion Organisation (Administration Division)

13.09.17

Circular No. 47 /Admin/2017

Subject: Implementation of NPS in ITPO.

The Board of Directors of ITPO in its 196th meeting held on 28.03.2016 had approved LIC of India as insurer/fund manager for the NPS scheme. At the implementation stage, approved Point of Presence, M/s. Alankit Assignments Ltd has made camp office to assist in filling of NPS Subscriber Registration Forms of all the eligible serving employees of ITPO.

Administration Division has been approached by some of the employees with request to opt for other Pension Fund Managers instead of LIC of India which, inter-alia is not in coherence with the decision of the Board of Directors of ITPO.

In this regard, all the employees are hereby informed that in terms of approval of Board of Directors, they shall opt for LIC of India as a Pension Fund at Sr. No. 10 of the NPS form.

This issues with the approval of Competent Authority and for information of the employees.

(J.L. Gupta)

Dy. General Manager (Admin.)

Dy. General Manager (Law & Admn.)

To: All employees.

Copy to:

Notice Board

(Ver-2)

NATIONAL PENSION SYSTEM (NPS) SUBSCRIBER REGISTRATION FORM Affix recent Please Select your Category [Please tick($\sqrt{}$)] colour photograph of **Government Sector Corporate Sector** Tο 3.5 cm X 2.5 cm NPS Lite/Swavalamban **All Citizen Model** National Pension System Trust. size Dear Sir/Madam, I hereby request that an NPS account be opened in my name as per the particulars given below: * indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page) **PERSONAL DETAILS:** Name of Applicant in full Shri ___ Smt. Kumari First Name* Middle Name Last Name d / m m / Date of Birth* У (Date of Birth should be supported by relevant documentary proof) Gender* [Please tick $(\sqrt{})$] Male _ Female ___ Others ___ M i d d I e Father's Name* (Refer Sr. No. 1 of instructions) IDENTITY DETAILS* (Any one of the documents need to be provided) PAN Aadhaar Voter ID Others Name of the ID Passport **CORRESPONDENCE ADDRESS DETAILS*** Flat/Room/Door/Block no. Landmark Premises/Building/Village Road/Street/Lane Area/Locality/Taluk City/Town/District PIN Code State/U.T. **PERMANENT ADDRESS DETAILS** Tick $(\sqrt{})$ in the box in case the address is same as above. Flat/Room/Door/Block no. Landmark Premises/Building/Village Road/Street/Lane Area/Locality/Taluk City/Town/District PIN Code State/U.T. Proof of Address (Correspondence/Permanent) Aadhar card 🔲 Passport 🔲 Voter ID card 🔲 Driving License 🔲 Ration Card 🔲 Registered Lease 🔲 Sale agreement of residence 🖂 Latest Gas Bill# Electricity Bill# Telephone[Landline] Bill# Others (please specify) *Not more than 3 months old. Please refer Sr. No. 2 of the instructions **CONTACT DETAILS** Landline Phone (with STD Code) Mobile + Do you want to subscribe to SMS Alerts: Yes No 🗌 Mobile number is essential for receiving sms alerts regarding your NPS account OTHER DETAILS (Please refer to Sr no. 3 of the instructions) Occupation Details [please tick($\sqrt{}$)] Private Sector Government Sector Public Sector Business Professional Agriculture ___ NRI Homemaker Student Other (please specify) Please Tick If Applicable Politically exposed person Related to Politically exposed Person Income Range (per annum) Upto 1 lac 1 lac to 5 lac 5 lac to 10 lac 10 lac to 25 lac 25 lac and above **Educational Qualifications** Below SSC SSC HSC Graduate Masters Professionals (CA, CS, CMA, etc.) SUBSCRIBER BANK DETAILS (Please refer to Sr no. 4 of the instructions) Account Type [please tick($\sqrt{}$)] Saving A/c Current A/c Bank A/c Number Bank Name Branch Name **Branch Address** PIN Code

IFSC Code

Bank MICR Code

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Declaration & Authorization by all subscribers I have read and understood the terms and conditions of the National Pension System and hereby agree to the same and declare that the information and documents furnish by me are true and correct, to the best of my knowledge and belief. I understake to inform immediately the Central Record Keeping Agency/National Pension System Tru of any change in the above information furnished by me. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any fall or incorrect information or documents. I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, wheth complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-pin (to access CRA/NPSCAN and view details) & T-pin on the CRA website. Additional declaration by Swavalamban subscriber I have read/explained to me and understood the Swavalamban guidelines and I meet the prescribed eligibility criteria for assistance under the scheme. I also undertake adhere to the prescribed contribution limit of minimum Rs. 1000/- and maximum of Rs. 12000/-, failing which the Central Government contribution credited to my account may be forfeited along with such interest rates as may be prescribed. Declaration under the Prevention of Money Laundering Act, 2002 I hereby declare that the contribution paid by melon my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I gound violating the provisions of any law relating to prevention of money laundering. ACKNOWLEDGEMENT Name of the Subscriber: Contribution Amount Remitted: **TIT in case of male and RTI in case of female)											
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Date d d / m m / y y y y Place: Signature/Thumb Impression* of Subscriber in black ink (* LTI in case of male and RTI in case of female) ACKNOWLEDGEMENT Name of the Subscriber: Contribution Amount Remitted: ₹							ies. I	further agree that	at NPS Trust has t	he right to close my	PRAN in case I a
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A DECLARATION BY EMPLOYED BODY CORPORTOR						
2. DECLARATION BY EMPLOYER/POP/AGGREGATOR Applicable to Government Subscribers only						
(Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory)						
Date of Joining d d I y						
Employee Code/ID						
Group of Employee (Tick as applicable)	Group A Group B	Group C Group D				
Office						
Department						
Ministry						
DDO Registration Number						
DTO/PAO/CDDO/DTA/PrAO Registration	Number	Basic Pay				
Pay Scale						
It is certified that the details provided in including the address and employment de read entries/entries have been read over	tails provided above are as per the service	employed with us erecord of the employee maintained by us. Also, it is further certified that he/she has				
Signature of the Authorised person	Rubber Stamp of the DDO	Signature of the Authorised person Rubber Stamp of the DTO/PAO/CDDO/				
(In the box above) Designation of the Authorised Person	(In the box above)	(In the box above) DTA/PrAO (In the box above) Designation of the Authorised Person				
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO				
Deptt/Ministry		Date d d I m m I y y y				
	Applicable to Corpora					
(Subscril		ttested by Corporate (All Details are Mandatory))				
Date of Joining d d /	m m I y y y y	Date of Retirement ddd/mmm//yyyy				
Employee ID						
Corporate Regd. No Allotted by CRA		CBO No. allotted by CRA				
Certified that the details provided in this su		employed with us, including				
have been read over to him / her by us an		e maintained by us. Also, it is further certified that he / she has read the entries / entrie				
	Date d d					
	Date u u	<u> </u>				
Signature of the Authorized Person	In the box above)	Rubber Stamp of the Corporate				
Designation of the Authorized Person:		(In the box above)				
To I	e filled by POP-SP (Only in case of Al	Citizen Model or Corporate subscribers)				
Receipt No. (17 digits)		POP-SP Registration Number				
Document accepted for date of Birth Proo	: [
Copy of PAN card submitted YES	NO KYC	Compliance YES NO				
Existing Bank Customer: Live hereby certify/confirm that Shri/Smt/k	ium	is an existing customer of the Bank having fully operative Savir				
Bank account no	brand	ch and KYC norms required for opening Bank Account which match the requirement				
is not a 'Basic Savings Bank Deposit Account nave been fully		S. B. a/c of Sh/Smt/Kum				
Adhaar Based KYC Certificate:	.10	LO AUTO				
		h/Smt/Kumhas bee stching with that mentioned on NPS application form.				
To be filled by POP-SP		Name:				
		Designation: Place:				
POP-SP Seal	Signature of Authorized Signat					
FOF-SF Sedi	Signature of Authorized Signator	ory Date d d / m m / y y y y				
		e of NPS Lite/Swavalamban Subscribers)				
Authorisation by Aggregator's office (N Certified that the subscriber is registered v		to join NPS. I hereby declare that the subscriber is eligible to join NPS and the abov				
declaration has been signed /thumb impres	sed before me by	after (s)he has read the entries/ entries have been read over to her/him by m				
Signature of the Authorise	person (In the box above)	Rubber Stamp of the Aggregator (In the box above)				
Name of the Aggregator						
NPS Lite Account Office (NL-AO) Registra	ion Number NP	S Lite - Collection Centre (NL - CC) Registration Number				
Membership No. allotted by Aggregator (if	any)					
Place	Date d d / m m /	y y y y				
	[To be filled by CRA - Faci	litation Centre (CRA-FC)]				
Received by		Registration Number				
Received at		Date dd/mm/m//yyy				
Acknowledgement Number (by CRA-FC)						
PRAN Alloted						

(Ver-2)

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

General Guidelines

- (a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word.
- (b) Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back
- (c) The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted.
- (d) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (e) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (f) The subscriber's thumb impression should be verified by the DDO/PAO/DTO/designated officer of POP-SP/Aggregator
- (g) Government employees (mandatorily covered under NPS) may submit their application for Tier II to any POP-SP of their choice. The list of POP-SPs rendering services under NPS is available on CRA website http://www.npscra.nsdl.co.in

S.No	Item No.	Item Details	Instructions						
		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.						
1	1	Father's Name	i. I ii. I	 i. If father's name has more than 30 digits, you may fill Annexure II for the same. ii. Father's name is mandatory. However, if applicant does not want to provide father's name, he/she has an option to provide mother's name on Annexure II and the mother's name will be printed on PRAN card 					
			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			
	2,3 & 4	Identity, Correspondence & Permanent address details	3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residential address			
			4	Certificate of the POP bank for an existing Bank customer.	4	Certificate of the POP bank for an existing Bank 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	Valid Driving license with photograph and residential address				
			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 of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.			
			8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly			
2			9	Aadhar Card / letter issued by Unique Identification Authority of India	9	Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address			
			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 the State Government			
			11	Identity card issued by Central/State government and it Departments, statuary/ Regulatory Authorities, Publi Sector Undertakings, Scheduled commercial Banks, Publi Financial Institutions, Colleges affiliated to universitie and Professional Bodies such as ICAI, ICWAI, ICSI, Ba Council etc.		The identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statuary/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions for their employees.			
			12	Photo Identity Card issued by Defence, Paramilitary and Police departments.	12	Latest Electricity/water bill in the name of the Subscriber showing the address (less than 3 months old)			
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill in the name of the Subscriber showing the address (less than 3 months old)			
			14	Photo Credit card.		Latest Property/house Tax receipt (not more than one year old) Existing valid registered lease agreement of the house on			
						stamp paper (in case of rented/leased accommodation)			
	Note:								
	(i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by h								
			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 accepted as a valid proof of both identity and address.						
			opening form, a separate proof of address should be obtained. All future communications will be sent to corresponde address. If correspondence & Permanent address are different, then proof for both have to be submitted.						
		Other Details	(iii) In case of Government subscribers, the KYC documents may be submitted within a period of 30 days after generation of PRAN. An NRI subscriber would need to furnish an Indian address for communication and bank details within India. Fund transfers by NRIs						
3	6	(Occupation Details)		d be subject to regulatory requirements as prescribed by RBI					
		Politically Exposed	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign						
		Person	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	For Tier I, bank details are optional. For activation of Tier II, bank details are mandatory. Please attach a Cancelled cheque (containing Subscriber Name, Bank Account Number and IFS Code) or Bank Certificate containing Name, Bank Account Number and IFS code, for direct credit or electronic transfer. In case if the cheque is not preprinted with name, additionally, a copy of the bank passbook or bank certificate containing Name, Bank Account Number and IFS code should be submitted.						
5	8	Subscriber's Nomination Details	In case of more than one nominee, percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). 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.						
6	10	Pension Fund (PF) Selection and Investment Option	For more detail on 'Investment Option', you may visit CRA website (www.npscra.nsdl.co.in)						
7	11	Declaration by Subscriber	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the nodal officer with the official seal and stamp. Left Thumb Impression in case of male and Right Thumb Impression in case of female.						

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.

 For more information / clarifications, contact CRA: Website: https://www.npscra.nsdl.co.in

Call: 022-2499-4200

e-mail: info.cra@nsdl.co.in

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

General Information for Subscribers