

**NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM - Government Sector**

Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.)

Print my PRAN in Hindi

 Yes  No If yes, submit details as per Annexure I

Select your category [Please tick (✓)]

 Central Government  State Government  
 Central Autonomous Body  State Autonomous Body

Paste recent photograph of 3.5 cm × 2.5 cm size / Passport size (Do not sign across / staple / clip)

To,  
National Pension System Trust  
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 (Refer general guidelines at instructions page.)

**1. PERSONAL DETAILS:** (Refer Sr. No. 1 of the instructions)

Use Annexure II if name exceeds the space provided below

Salutation*	<input type="checkbox"/> Shri <input type="checkbox"/> Smt. <input type="checkbox"/> Kumari
Applicant Name*	F i r s t M i d d l e L a s t
Father's Name	F i r s t M i d d l e L a s t
Mother's Name	F i r s t M i d d l e L a s t
Either Father's or Mother's name is mandatory*	Select the name to appear on PRAN Card <input type="checkbox"/> Father's name <input type="checkbox"/> Mother's Name
Date of Birth*	d d m m y y y y
Place of Birth*	
Country of Birth*	
Gender*	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender Nationality* <input type="checkbox"/>
Marital Status*	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Divorcee
Spouse Name* (if married)	F i r s t M i d d l e L a s t
PAN*	or Form 60 furnished <input type="checkbox"/> Submission of PAN or Form 60 is mandatory
Income Range (per annum)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 1 lac to 5 lac <input type="checkbox"/> 5 lac to 10 lac <input type="checkbox"/> 10 lac to 25 lac <input type="checkbox"/> 25 lac to 1 Cr <input type="checkbox"/> Above 1 Cr
Please Tick if Applicable	<input type="checkbox"/> Politically exposed person <input type="checkbox"/> Related to Politically exposed person (Refer instruction no. 1)

**2. PROOF OF IDENTITY (PoI)\*** (If PAN is not provided, any one of the following documents to be submitted)

Passport	<input type="checkbox"/>	Passport Expiry Date	d d m m y y y y
Driving License	<input type="checkbox"/>	Driving License Expiry Date	d d m m y y y y
Government ID Card	<input type="checkbox"/>	Voter ID Card	<input type="checkbox"/>
National Population Register	<input type="checkbox"/>		
Proof of possession of Aadhaar	<input type="checkbox"/>	Provide last Four Digits. Redact or black-out first 8 digits of the Aadhaar number on submitted copy	

**3. ADDRESS DETAILS\*** (To be attested by the Nodal Office)

Line 1	<input type="checkbox"/>
Line 2	<input type="checkbox"/> Village / City
District	<input type="checkbox"/> State/U.T. <input type="checkbox"/>
Country	<input type="checkbox"/> PIN Code <input type="checkbox"/>

**4. CONTACT DETAILS**

Mobile*	9 1 <input type="checkbox"/>	Telephone with STD code	<input type="checkbox"/>
Email ID	<input type="checkbox"/>		

**5. BANK DETAILS\*** (Proof to be submitted - Refer Sr. No. 3 of the instructions)

Account Type	<input type="checkbox"/> Saving A/c <input type="checkbox"/> Current A/c
Bank A/c Number	<input type="checkbox"/>
Bank Name	<input type="checkbox"/> IFS Code <input type="checkbox"/>

**6. NOMINATION DETAILS\*** (Refer Sr. No. 4 of the instructions)

- A. The nomination shall be in favour of one or more persons belonging to his/her family. For nominating more than one person, submit Annexure III  
 B. A fresh nomination shall be made by the subscriber on his/her marriage.  
 C. Before filling up the details, please refer Nomination relationship matrix provided on the instructions page.

Nominee Name	F i r s t M i d d l e L a s t
Relationship	Age <input type="checkbox"/> Date of Birth (In case of Minor) d d / m m / y y y y
Name of Guardian	F i r s t M i d d l e L a s t
(if nominee is a minor)	

**7. SELECTION OF PENSION FUND (PF) AND INVESTMENT CHOICE\*** (Refer Sr. No. 5 of the instructions)

- Please Tick (✓) one  Default option (3 Pension Funds - SBI/UTI/LIC and default Govt. Scheme)  
 I would like to choose my Pension Fund and investment choice (Please select below)

Pension Fund* (Please Tick (✓) one)		Investment Choice (Please Tick (✓) one)	
<input type="checkbox"/> Aditya Birla Sunlife Pension Mgmt Ltd	<input type="checkbox"/> Axis Pension Fund Management Limited	<input type="checkbox"/> Active Choice (i.e. 100% in Govt Securities)	<input type="checkbox"/>
<input type="checkbox"/> HDFC Pension Mgmt Co Ltd	<input type="checkbox"/> ICICI Prudential Pension Funds Mgmt Co Ltd	Or	
<input type="checkbox"/> Kotak Mahindra Pension Fund Ltd	<input type="checkbox"/> LIC Pension Fund Limited	<input type="checkbox"/> Auto Choice	<input type="checkbox"/>
<input type="checkbox"/> Max Life Pension Fund Mgmt Ltd	<input type="checkbox"/> SBI Pension Funds Private Limited	<input type="checkbox"/> Conservative (LC25)	<input type="checkbox"/>
<input type="checkbox"/> TATA Pension Mgmt Ltd	<input type="checkbox"/> UTI Retirement Solutions Limited	<input type="checkbox"/> Moderate (LC50)	<input type="checkbox"/>

If no option is chosen, the contributions will be invested as per default option

**8. Tier-II Choice** (Please tick (✓) to activate)**Providing PAN is mandatory**

Tier-II	Tier II - Tax Saver (only for Central Government employees)
<input type="checkbox"/> As per the details given in Annexure IV	<input type="checkbox"/> With same bank, nominee details <input type="text" value="Please write name of Pension Fund"/>
	<input type="checkbox"/> With different bank/nominee/investment details as per Annexure IV

**9. FATCA\* (Foreign Account Tax Compliance Act) & CRS DECLARATION** (Refer Sr no. 6 of the instruction):
 I am a tax resident of India and not resident of any other country  I am a tax resident of the country/ies mentioned below

 US Person Yes  No. 

Particulars	Country (1)	Country (2)	Country (3)
Country/countries of Tax Residency			
Address in the jurisdiction for Tax Residence	Address Line 1		
	City/Town/Village		
	State		
	ZIP/Post Code		
Tax Identification Number (TIN)/Functional equivalent Number			
TIN/ Functional equivalent Number Issuing Country			
Validity of documentary evidence provided (Wherever applicable)	ddmmyyyy	ddmmyyyy	ddmmyyyy

I have understood the information requirement of the Form (read along with the FATCA / CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete and hereby accept the same.

**Signature / Thumb Impression\* of Applicant** (refer instructions)
**10. DECLARATION BY APPLICANT\*** (Refer Sr no. 7 of the instructions)

I have read and understood the terms and conditions of the National Pension System. The information and documents furnished by me are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to CRA / NPS Trust. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

**Declaration under the Prevention of Money Laundering Act, 2002**

I hereby declare that the contribution paid by me/on 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 am found violating the provisions of any law relating to prevention of money laundering.

 Date:  Place: 
**Signature / Thumb Impression\* of Applicant**  
 (\*LTI in case of males and RTI in case of females to be provided. Toe impression in case no hands)
**11. DECLARATION BY NODAL OFFICE** (All Details are Mandatory)

Date of Joining	<input type="text" value="d d m m y y y y"/>	Date of Retirement	<input type="text" value="d d m m y y y y"/>
Employee Code/ID (If applicable)	<input type="text"/>	Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.	
PPAN (If applicable)	<input type="text"/>		
Name of the office	<input type="text"/>		
Department	<input type="text"/>		
Ministry	<input type="text"/>		
DDO Registration Number	<input type="text"/>	DTO/PAO/CDDO/DTA/PrAO Registration Number	<input type="text"/>

It is certified that \_\_\_\_\_ is employed with us and the details provided in this subscriber registration form including the address and employment details provided above are as per the service record of the employee maintained with us. The given address and the documents are verified by this office. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person	Rubber stamp of the DDO	Signature of the Authorised person	Rubber stamp of the DTO/PAO/CDDO
Name of the Authorised Person	<input type="text"/>	Designation of the Authorised Person	<input type="text"/>
Name of the DDO	<input type="text"/>	Name of DTO/PAO/CDDO/DTA/PrAO	<input type="text"/>
Deptt / Ministry	<input type="text"/>	Date	<input type="text"/>

**ACKNOWLEDGEMENT**
 Name of the Subscriber 

 Date of Receipt of Application: 

Stamp and Signature of Nodal Officer

## INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

### General guidelines

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by the Nodal Office are liable to be rejected.
- (b) Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed / stamped by the designated nodal officer where they submit the application.

SI	Item No	Item Details	Instructions
1	1	Fathers Name, Mother's Name	(a) If the name has more than 30 digits, fill Annexure II for the same. (b) If the applicant is an Orphan, he/she may leave the fields blank. However, an official document to support the status to be submitted.
		Politically Exposed Person	Politically Exposed Person's (PEPs) are individuals who are or have been entrusted with prominent public functions such as 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.
2	2	Proof of Identity	If the applicant is submitting Aadhaar as proof of Identity, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
3	5	Bank Details	For Tier I & Tier II account, bank details and documentary proof are mandatory. Please submit a cancelled cheque / copy of bank passbook / bank statement / bank certificate / letter from Bank containing applicant's Name, Bank Name, Bank Account Number and IFS Code.
4	6	Nomination Details	(a) If a subscriber has family at the time of making a nomination, the nomination shall be in favour of one or more persons belonging to his/her family. Any nomination made in favour of a person not belonging to family shall be invalid; A fresh nomination shall be made by the subscriber upon marriage and any nomination made before such marriage shall be deemed to be invalid; If at the time of making a nomination the subscriber has no family, the nomination may be in favour of any person or persons but if the subscriber subsequently acquires a family, such nomination shall forthwith be deemed to be invalid and the subscriber shall make a fresh nomination in favour of one or more persons belonging to his family. (b) In case of more than one nominee, the percentage share for each nominee should be in whole numbers and must be equal to 100. (c) Please refer nomination relationship matrix provided below.
5	7	Selection of Pension Fund (PF) & Investment Choice	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' or in Life Cycle Funds - LC 50 / LC 25 under 'Auto Choice'. The choices exercised by applicants from State Government/Autonomous body shall be ignored if the choice is not extended by the respective employer and the contributions shall be invested as per the default choice. If no choice is provided, the contributions will be distributed among the three default Pension Funds (SBI/UTI/LIC) selected by the Government.
6	9	FATCA & CRS Declaration	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India: <ul style="list-style-type: none"> <li>Jurisdiction(s) of Tax Residence : Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.</li> <li>Tax identification Number (TIN) : TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number).</li> <li>In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided.</li> <li>In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form.</li> </ul>
7	9 & 10	Declaration / Signature by Applicant	In case the applicant is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the designated nodal officer attesting the same under his/her official seal and stamp.

Nomination Relationship Matrix (Please mention relationship as per details given below)			
Marital Status	Male	Female	Transgender
Unmarried	1. Mother 2. Father 3. Please specify the relationship if any other person	1. Mother 2. Father 3. Please specify the relationship if any other person	1. Mother 2. Father 3. Please specify the relationship if any other person
Married	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Daughter in Law 7. Grandson 8. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter
Widow/ Widower	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter
Divorcee	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter

### General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and respective Nodal Office.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated respective nodal office where they submit the application.
- c) For more information / clarifications, contact CRA:

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

## Annexures - Subscriber Registration Form for Government Sector applicants (Tick and fill applicable annexures below)

 Annexure I - Print PRAN Card in Hindi (Fill the details in Devnagri script)

Applicant's First Name

Middle Name

Last Name

Father / Mother's First Name

Middle Name

Last Name

 Annexure II - If alphabets of name exceeded the space provided on page 1 of the application form

Applicant's First Name

Middle Name

Last Name

Father's First Name

Middle Name

Last Name

Mother's First Name

Middle Name

Last Name

 Annexure III - Additional Nomination  For Tier - I  For Tier - II  For Tier - II Tax Saver

Percentage Share

Nominee I

Nominee II

Nominee III

Total should be equal to 100%

Nominee I	Nominee I - Name	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					
	Relationship											Age		Date of Birth (in case of Minor)	D	D	/	M	M	/	Y	Y	Y	Y			
	Name of Guardian (if nominee is a minor)	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					

Nominee II	Nominee II - Name	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					
	Relationship											Age		Date of Birth (in case of Minor)	D	D	/	M	M	/	Y	Y	Y	Y			
	Name of Guardian (if nominee is a minor)	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					

Nominee III	Nominee III - Name	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					
	Relationship											Age		Date of Birth (in case of Minor)	D	D	/	M	M	/	Y	Y	Y	Y			
	Name of Guardian (if nominee is a minor)	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					

 Annexure IV - tick and fill as applicable  Activate Tier - II  Activate Tier - II Tax Saver\* (available to Central Govt employees only)PAN\*  No change in Bank details  Bank details for Tier-II are as under:

Account Type

 Saving A/c Current A/c

Bank A/c Number

Bank Name

IFS Code

 No change in Nominee details  Nominee details for Tier-II are as under:

Nominee Name	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					
Relationship											Age		Date of Birth (in case of Minor)	D	D	/	M	M	/	Y	Y	Y	Y			
Name of Guardian (if nominee is a minor)	F	i	r	s	t				M	i	d	d	l	e				L	a	s	t					

In case you desire to nominate more than one person, fill Annexure III above

 Investments details for Tier-II are as under:

#only selection of PF is required

## Pension Fund\* (Please Tick (√) one)

- |  |   |
|--|---|
| <input type="checkbox"/> Aditya Birla Sunlife Pension Mgmt Ltd | <input type="checkbox"/> Axis Pension Fund Management Limited       |
| <input type="checkbox"/> HDFC Pension Mgmt Co Ltd              | <input type="checkbox"/> ICICI Prudential Pension Funds Mgmt Co Ltd |
| <input type="checkbox"/> Kotak Mahindra Pension Fund Ltd       | <input type="checkbox"/> LIC Pension Fund Limited                   |
| <input type="checkbox"/> Max Life Pension Fund Mgmt Ltd        | <input type="checkbox"/> SBI Pension Funds Private Limited          |
| <input type="checkbox"/> TATA Pension Mgmt Ltd                 | <input type="checkbox"/> UTI Retirement Solutions Limited           |

## Investment Choice (Please Tick (√) one)

<input type="checkbox"/> Active Choice mention the % share in applicable asset class below			
E (upto 100%)	C (Upto 100%)	G (Upto 100%)	Total
% Equity	% Corp Bonds	% Govt. Sec.	100%
<b>OR</b>			
<input type="checkbox"/> Auto Choice Select one life cycle fund below			
Conservative (LC25)	Moderate (LC50)	Aggressive (LC75)	

Name of the Applicant

Place

Date

D / D / M / M / Y / Y / Y / Y

Signature / Thumb Impression\* of Applicant  
(refer instructions)