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: 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.	

10. Email ID																			Page	e <u>2</u>	
							1 1				1										
11. Subscribers Bank Details : (Pleas	se refer instr	ruction	no. 4)				Sa	vings	A/c				Curre	ent A/c	:						
Bank A/c Number*	<u> </u>		<u> </u>	<u> </u>			<u> </u>				<u> </u>						1	1	r	1	1
Bank Name*																					
Bank Branch*																					
Bank Address*																					
Pin Code*																					
Bank IFS Code										(If I	FS co	ode is	not a	wailab	ole, t	hen p	provid	de Ml	CR)		
Bank MICR Code																					
	L						11														
 Declaration by subscriber fo account details within six months (Please tick (√) in case, Bank detai 12. Value Added Services: 	or on openin ils are not av	ng of B	ank ac	coun	t which Yes	never is	earlier N	to th		sociate	ed no	odal o	office	for up	dati	ng th	e san	ne in	CRA	syste	m.
	ii) I	Email A	Alert:		Yes		N	0													
						, th	e applid	cant,	do he	reby d	leclar	e tha	t								
hat is stated above is true to the best of	t my inform	ation &	belief	•																	
Date :																					
D D M M Y	YY	Y																ture/l			
Section B - Subscribers Emp	olovment	Detai	ils to	be f	filled	and a	atteste	ed b	v D	DO (All D	etails	s are l	Manda	atory		press	sion	of Su	bscri	ber
1. Date of Joining				_	7		2. Dat		-												
		7 17	v	v			2. Dui	011	count	ment			D	D				v	V	v	v
D D	MMY	ΥΥ	Y	Y									D	D		М	М	Y		Y	Y
								T											1		
3. PPAN										(Plea	se re	fer to	instr	uction	s No	o.5.)			1		
 3. PPAN 4. Group of the Employee (Please T 	lick)	Grou	p A		Grou	ıp B		roup	с[se re Grou		instr	uction	s No	0.5.)			I		
3. PPAN	Tick)	Grou	р А [Grou	ıp B		iroup	с [instr	uction	s No	o.5.)			1		
3. PPAN 4. Group of the Employee (Please T 5. Office	Fick)	Grou	p A		Grou	ıp B		broup	с [instr	uction	s No	0.5.)					
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3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department	Гіск) — — — — — — — — — — — — — — — — — — —	Grou	p A [Grou	ıp B			с [instr			0.5.)					
3. PPAN	Гіск)	Grou	p A [0.5.)					
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department		Grou	p A [C C												ise refunction		
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department 7. Ministry 8. DDO Registration Number 10. Basic Salary	Image: Image of the second	Grou	p A [Less rel		
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department 7. Ministry 8. DDO Registration Number	Image: Image of the second	Grou																	Less rel		
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department 7. Ministry 8. DDO Registration Number 10. Basic Salary	been signed	I / thum n read o	ab improver to	him	9.	. DTO	Registr	ration	Nur	nber	Grou	пр D						instr	ise rel	ns N	0.6.)
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department 7. Ministry 8. DDO Registration Number 10. Basic Salary 11. Pay Scale Certified that the above declaration has fter he / she has read the entries / entries	been signed	I / thum n read o	ab improver to	him	9.	. DTO	Registr	ration	Nur	nber	Grou	пр D					date	instr	ise rel	ns N	0.6.)
3. PPAN 4. Group of the Employee (Please T 5. Office 6. Department 6. Department 7. Ministry 8. DDO Registration Number 10. Basic Salary 11. Pay Scale Certified that the above declaration has fter he / she has read the entries / entrie etails is as per employee records availa Event field that the above declaration has fter he / she has read the entries / entrie etails is as per employee records availa	been signed es have beer able with the	1 / thum n read o e Depa	ab improver to	him	9.	. DTO	Registr	ration	Nur	nber	Grou	IP D			d tha			instr	ise rel	ns N	0.6.)
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Declaration/Undertaking being signed.

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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							
2. Date of Birth (In case of a minor)*:	2nd Nominee	3rd Nominee							
1st Nommee		Sid Nommee							
3. Relationship with the Nominee*:									
1st Nominee	2nd Nominee	3rd Nominee							
1 Percentage Share *·									
4. Percentage Share *:	% 2nd Nominee %	3rd Nominee %							
5. Nominee's Guardian Details (in case of a minor)*:									
1st Nominee's Guardian Details		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							
Section D - Subscriber Scheme Details	5								
	-								
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							
%	%	%							
Section E - Declaration									
I understand that there would be DEDD	A approved Tarma and Conditions for Subar	ibers on the CPA website severing T							
	A approved <i>Terms and Conditions</i> for Subscr. <i>w details</i>) & <i>T-pin</i> . I agree to be bound by the sa								
that CRA may as approved by D	FRDA, amend any of the services compl	ately or partially without any new							
mat CKA may, as approved by P	FRDA, amenu any of the services compl	etery or partially without any new							

I, the what is stated above is true to the best of my information & belief.	applicant, do hereby declare that
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				
	-		n 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.				
			3 - Subscribers Employment Details				
Subscr	iber and should be verifie	iber's Employment details i of 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 DTO.				
6	8 & 9	DTO Reg. No. & DDO Reg. No.	DTO Reg. No. and DDO Reg. No. are the unique Registration number allotted by Central Recordkeeping Agency.				
		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.				
		Section	on D - Subscriber scheme details				
		rmation or the Subscriber ca Subscriber can select max <u>http://www.npscra.nsdl.co</u> Subscriber can not fill the If a scheme name is filled filled for that scheme.	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 DTO.

d) For more information

- Visit us at http://www.npscra.nsdl.co.in
- Call us at 022-2499-4200
- 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.