Request for Activation of Tier-II account under New Pension System (NPS) To be used by Subscribers having a pre-existing Tier I account under NPS



	(s), please read the accompanying instructions carefully before filling up the form)	
For POP-SP use: POP-SP Registration No. :		
Receipt No.:		
Entered By: Date	: Verified By: Date:	
I hereby submit the following details for activation	of Tier – II account under NPS.	
Permanent Retirement Account Number (PRAN)*		
1. Subscriber's Name:		
2. Bank Details (Mandatory): I have already provided bank details		
If NO, please fill in the details below:	Savings A/c Current A/c (Please refer to Serial No i of the Instructions)	
Bank A/c Number*		
Bank Name*		
Bank Branch*		
Bank Address*		
Pin Code*	Bank MICR Code*	
IFS Code (Wherever applicable)		
· ·	PTIONAL - please refer to Sr. No. J of the instructions)	
Do you want to retain the same nominati	on as in your Tier I account? YES NO	
If NO, please fill in the details below. Name of the Nominee:		
If NO, please fill in the details below.	on as in your Tier I account? YES NO 2nd Nominee 3rd Nominee First Name * First Name*	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee	2nd Nominee 3rd Nominee	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee	2nd Nominee 3rd Nominee	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name*	2nd Nominee 3rd Nominee First Name * First Name*	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name*	2nd Nominee 3rd Nominee First Name * First Name*	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name	2nd Nominee 3rd Nominee First Name* Middle Name Middle Name	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*:	2nd Nominee 3rd Nominee First Name* Middle Name Last Name Last Name Last Name	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*: 1st Nominee	2nd Nominee 3rd Nominee First Name* Middle Name Middle Name	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*:	2nd Nominee 3rd Nominee First Name* Middle Name Last Name Last Name Last Name	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*: 1st Nominee Relationship with the Nominee:	2nd Nominee 3rd Nominee First Name * First Name* Middle Name Middle Name Last Name Last Name 2nd Nominee 3rd Nominee	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*: 1st Nominee Relationship with the Nominee:	2nd Nominee First Name* First Name* Middle Name Last Name Last Name 2nd Nominee 3rd Nominee 3rd Nominee 3rd Nominee	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Date of Birth (In case of a minor)*: 1st Nominee Relationship with the Nominee: 1st Nominee Percentage Share: 1st Nominee 9	2nd Nominee First Name* First Name* Middle Name Last Name Last Name 2nd Nominee 3rd Nominee 3rd Nominee 3rd Nominee	
If NO, please fill in the details below. Name of the Nominee: 1st Nominee First Name* Middle Name Last Name Last Name Date of Birth (In case of a minor)*: 1st Nominee Relationship with the Nominee: 1st Nominee Percentage Share: 1st Nominee Nominee's Details (in case of a minor): 1st Nominee's Guardian Details	2nd Nominee First Name * First Name * Middle Name Last Name Last Name 2nd Nominee 2nd Nominee 3rd Nominee 3rd Nominee 2nd Nominee 3rd Nominee 3rd Nominee 3rd Nominee 3rd Nominee 3rd Nominee 3rd Nominee	
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Annexure UOS-S10				Clankit		
4. Subscriber Scheme Prefere	nce (Please refer to Sr. No. k of the in	nstructions for furthe	er details):			
(i). PFM Selection for Active a PFM Name (in alphabetical order)	nd Auto Choice (Select only one PF)	Please tick only one				
ICICI Prudential Pension Funds Management Company Limited						
IDFC Pension Fund Manageme						
Kotak Mahindra Pension Fund						
Reliance Capital Pension Fund						
SBI Pension Funds Private Lin						
UTI Retirement Solutions Lim						
	in Active and Auto Choice. In case you do not i	indicate a choice of PFM,	your application fo	rm shall be summarily		
ejected). ii). Investment Option						
Note:- In case you do not indice In case you have opted	Choice (For details on Aucate any investment option, your funds for Auto Choice, DO NOT fill up sections will be ignored and investment management of the control of the co	on (iii) below relating	to Choice to Asset Allocati	,		
iii). Asset Allocation (to be fill	ed up only in case you have selected	the 'Active Choice' in	vestment optio	<u>n)</u>		
Asset Class	E (Cannot exceed 50%)	С	G	Total		
% share	(Camot exceed 3070)			100%		
b. Declaration & Authorization hereby declare and agree that to me, and the answers entered in	chall be rejected by the POP. (a) I have read and understood the Officin the application are mine. (b) I am a Cor for the time being in force. (d) I am not be the control of the time being in force.	Citizen of India. (c) I h	nave not been for	und or declared to b		
ncome Tax Act. 1961: Tax bene	fits are available as per the Income Tax	Act. 1961, as amende	d from time to ti	me.		
Declaration under the Prevent hereby declare that: The contribution paid has be I understand that the PFRD has the right to close the NI	een derived from legally declared and a A/NPS Trust has the right to peruse meson account in case I am found guilty of w, having relation to the laws governing	ssessed sources of inc y financial profile and violating the provisio	ome. I also agree that ns of any Law, o	the PFRDA/NPS To		
	, the app	olicant, do hereby				
re that the information provided above	is true to the best of my knowledge & belief.					
Date: (DD/MM/YYYY)				e/Thumb of Subscriber		
filled by POP-SP		1	•			
	Si	Signature of Authorized Signatory				
		Surrent of Truckoring	Place :			
		_				
POP-SP Seal	Designation:		Date :			

To be used by subscribers having a pre-existing Tier I account under NPS