## Form-ISS-1

## National Pension System (NPS)

(Please fill all the details in CAPITAL LETTERS & in BLAC (Please tick the respective blo	K INK only. All fields / sections marked in * are mandatory.)									
A. General Information:										
I) NAME *										
II) PRAN (Permanent Retirement Account Number) *										
III) Existing PRAN association (refer Instruction no. I)  a) Sector: * Central Government State Government	All Citizens of India (UOS) Corporate Sector									
b) DDO / CBO / POP-SP Reg. No: *										
c) DDO / CBO / POP-SP Name: *										
IV) Target PRAN association (refer Instruction no. II)										
a) Sector:* Central Government State Government	All Citizens of India (UOS) Corporate Sector									
b) DDO / CBO / POP-SP Reg No: *										
c) DDO / CBO / POP-SP Name: *										
B. Additional information for subscribers shifting to All Citizens of In-	dia - UOS									
V. Subscriber Scheme Preference										
a) PFM (Name in alphabetical order)  Please tick only one										
1 DSP BlackRock Pension Fund Managers Private Limited 2 HDFC Pension Management Company Limited 3 ICICI Pension Fund Management Company Limited 4 Kotak Mahindra Pension Fund Limited 8 UTI Retirement Solutions Limited  (Selection of PFM is mandatory both in Active and Auto Choice. In case you do not indicate a choice of PFM, your application form										
shall be summarily rejected).										
b) Investment Option (refer Instruction no. VI & VII)										
Active Choice Auto Choice	(For details on Auto Choice, please refer to the Offer Document)									
Note:- 1. In case you do not indicate any investment option, your funds will be invested in Auto C 2. In case you have opted for Auto Choice, DO NOT fill up section (V.c) below relating to investment will be made as per Auto Choice.										
c) Asset Allocation table (to be filled up only in case you have selected the 'Active Choice	'investment option)									
Asset Class (Cannot exceed 50%)	G Total									
% share	100%									
Note:- The allocation across E, C and G asset classes must equal 100%. In case, the allocation	tion is left blank and/or does not equal 100%, the application shall be rejected by the POP.									
$\label{eq:VI.KYC} \textbf{VI. KYC details (Applicable only if subscriber is shifting from Government Sector)}$	(Refer instruction no. X)									
a) KYC document accepted for identify proof:  b) KYC document accepted for address proof:										
c) Document accepted for Date of birth proof:										
C. Additional information for subscribers shifting to Central Governm (Please refer to instruction No. VIII & IX)	nent or State Government (to be filled by target DDO)									
VII. Subscribers Employment Details to be filled and attested by DDO (All Details ar	e Mandatory)									
a) Date of Joining:  D D M M Y Y Y Y	b) Date of Retirement:  D D M M Y Y Y Y									
c) Group of the Employee A B	C D									

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d) Office												<u> </u>																		<u> </u>	_ _
e) Department											<u> </u>	<u> </u>																		<u> </u>	_
f) Ministry												<u> </u>			<u> </u>		1	<u> </u>													J
g) Basic Salary																															
h) Pay Scale													Ш				l														]
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VIII. Subscriber's Bank De a) Bank A/c Number b) Bank Name c) Bank Branch d) Bank Address e) Pin Code f) Bank MICR Code	etails* (The	subse	cribe s	hall pr	rovid	le a c	ancell	ed ch	neque	e, the	detai	ils of	which	h sh	aould	l ma	tch	the	bank	det	tails	prov	vide	d)							J
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g) IFS code (Wherever app	olicable)												]																		
D. Additional information of the second of t	tion for su			s shift	ting	to (							] erifie	ed l	oy t	he (	Cor	po	rate	Of	fice	of	the	sub	sci	ibe	er c	onc	cerr	ned)	
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D. Additional informat  IX. Subscribers Employmen a) Date of Joining*: c) Employee ID* d) CHO Reg No*:  Certified that the above declar after he / she has read the ent per employee records availab Signature of the Authorised I	nt and PAN  D D  arration has bettries / entries ble with the C  Person  ed Person	Deta  M 1	ils Y	Y Y	Y me byver to	Y y him	b) PAN / her t	Date	e of R	got c	onfiri	*:	by hin	n / h	D D Received the R	D D Also	M Certification	M	Y  I that	Y Y	Y date	Y Y	Dirth								_
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D. Additional information of the Authorised In Early Bank Alc Number  b) Bank Address  D. Additional information of the Authorised In Early Bank Branch  d) CHO Reg No*:  Certified that the above deck after he / she has read the entiper employee records available Signature of the Authorised In Early Bank Authorised In Early Bank Detail (a) Bank Alc Number  b) Bank Name  c) Bank Branch  d) Bank Address	nt and PAN  D D  arration has bettries / entries ble with the C  Person  ed Person	Deta  M 1	ils Y	Y Y	Y me byver to	Y y him	b) PAN / her t	Date	e of R	got c	onfiri	*:	by hin	n / h	D D Received the R	D D Also	M Certification	M	Y  I that	Y Y	Y date	Y Y	Dirth								]

XI. Subscriber Scheme Preference (Appl	cable only if the target Corporate has give	n the option of selecting scheme preference to the associated employees)
a) PFM (Name in alphabetical order)	Please tick only one	
1 DSP BlackRock Pension Fund Mana 2 HDFC Pension Management Compa 3 ICICI Pension Fund Management C 4 Kotak Mahindra Pension Fund Limi	ny Limited	5 LIC Pension Fund Limited 6 Reliance Capital Pension Fund Limited 7 SBI Pension Funds Private Limited 8 UTI Retirement Solutions Limited
(Selection of PFM is mandatory both in Ac	tive and Auto Choice. In case you do not ind	cate a choice of PFM, your application form shall be summarily rejected).
b) Investment Option (refer Instruction no.	VI & VII)	
		(For details on Auto Choice, please refer to the Offer Document)  O Choice to Asset Allocation. In case you do, the Asset Allocation instructions will be ignored and
•	ly in case you have selected the 'Active Choi	ce' investment option)
Asset Class E % share Note:- The allocation across E, C and G as:	C et classes must equal 100%. In case, the allo	G Total 100% cation is left blank and/or does not equal 100%, the application shall be rejected by the POP.
	of :	
	ions for the target sector (in which my PRAN any of the services completely or partially wi	Oscribers across all sectors): I will belong after processing of this Intersector Shifting request) and understand that thout any new Declaration / Undertaking being signed. Further, I agree to pay all the
Date	Signature/Left Thumb impression of Su	oscriber*
	For Officie use only (To be filled	up by the officer accepting the form)
Received by:		PAO/POP –SP Registration Number:
Received at:  Details verified by:		Date:            Date:    Time Stamp:
Receipt Number Issued by the receiving of	ice (only for POP-SP)	
	xxxxxxxxxx	xxxxxxxxxxx

## Instructions for filling the form

- I. Details of the DDO /  $\stackrel{-}{\text{POP-SP}}$  with which the PRAN is currently associated.
- II. Details of the DDO / POP-SP with which the PRAN will be associated.
- III. Please quote the correct PRAN and attach a copy of the PRAN Card
- IV. This form is to be used by the subscriber only
- V. Sector for 'Existing PRAN association' and 'Target PRAN association' can be the same only if a subscriber is shifting from one State Government to another State
- VI. Active choice Under Active choice, subscribers have an option to choose a fund manager and provide the ratio in which his / her funds are to be invested among asset classes
- a. PFM selection is mandatory. The form shall be rejected if a PFM is not opted for.
- b. Allocation under Equity (E) cannot exceed 50%
- c. A subscriber opting for active choice may select the available asset classes ("E", "G", & "C"). However, the sum of percentage allocation across all the selected asset classes must equal 100. If the sum of percentage allocations is not equal to 100%, or the asset allocation table is left blank, the application shall be rejected.
- VII. Auto choice Under Auto choice investment will be made in a lifecycle fund in the schemes of PFM chosen by Subscriber.
- A subscriber opting for Auto Choice must also select a PFM. The application shall be rejected if the subscriber does not indicate his/her choice of PFM.
- In case both investment option and the asset allocation table are left blank, the subscriber's funds will be invested as per Auto Choice
- For more details on investment options and asset classes, please refer to the Offer Document..

VIII. Employment details are to be captured in CRA system by the target PAO/DTO along with other details, if the subscriber is shifting from UOS to Central / State Government sector

IX. PAO/DTO have to modify the employment details of the subscriber after the shifting of the PRAN, in case of subscriber shifting from Central Government to State Government or vice versa or across two State Governments, i.e, both existing and new PRAN association are Government Sectors

X. Illustrative list of documents acceptable as proof of identity and address

No.	Proof of Identity (Copy of any one)
i)	School Leaving Certificate
ii)	Matriculation Certificate
iii)	Degree of Recognized Educational Institution
iv)	Depository Account Statement
v)	Bank Account Statement / Passbook
vi)	Credit Card
vii)	Water Bill
viii)	Ration Card
ix)	Property Tax Assessment Order
x)	Passport
xi)	Voter's Identity Card
xii)	Driving License
xiii)	PAN Card
xiv)	Certificate of identity signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.

No.	Proof of Address (Copy of any one)
i)	Electricity bill^
ii)	Telephone bill^
iii)	Depository Account Statement^
iv)	Credit Card Statement^
v)	Bank Account Statement / Passbook^
vi)	Employer Certificate <sup>^</sup>
vii)	Rent Receipt^
Viii	Ration Card
ix)	Property Tax Assessment Order
x)	Passport
xi)	Voter's Identity Card
xii)	Driving License
	Certificate of address signed by a Member of
	Parliament or Member of Legislative Assembly or
xiii	Municipal Councillor or a Gazetted Officer.

## Note:

- 1) Proof of Address mentioned in Sr. No. i) to vii) (^) should not be more than six months old on the date of application.
- 2) You are required to bring original documents & two self-attested photocopies (Originals will be returned over-the-counter after verification)