

### **Instructions for filling up Declaration Form**

- a. Form to be filled in the language of the form.
- b. Each box, wherever provided, should contain only one character (alphabet /number /punctuation sign) leaving a blank box after each word.
- c. The item-wise instructions to fill up the form are as follow:
  1. Please tick the Title (Mr/Ms/Mrs) and write full name in the form in Item No 1. It is reiterated that each box should contain only one character leaving a blank box after each word. It may please be noted that the Title (Mr/Ms/Mrs) **should not** be entered again in the boxes provided to write full name.
  2. Please provide Date of Birth in the form (DD/MM/YYYY) in Item No 2.
  3. Please provide Father's / Husband's Name in full in the form in Item No 3. It may please be noted that the Title (Mr/Sh.) **should not** be entered again in the boxes provided to write full name.
  4. Please tick the relevant box in item no 4 based on Item no 3. Tell the relationship i.e. Father or Husband.
  5. Please Tick the relevant Box in Item No 5.
  6. Please provide your mobile number on which formal communication can be established and necessary information can be provided through S.M.S to the member in Item No 6.
  7. Please provide e-mail id on which formal communication can be established and necessary information can be provided through e-mails to the member in Item No 7.
  8. Please tick '**YES**' if you have previous membership of the Employees' Provident Fund Scheme, 1952 otherwise '**NO**' in Item No 8, which is a mandatory field.
  9. Please tick '**YES**' if you have previous membership of the Employees' Pension Scheme, 1995 otherwise '**NO**' in Item No 9, which is a mandatory field.

*If you have ticked '**YES**' in any or both of (8) & (9) above, please follow points 10, 11, & 12 to fill up the previous employment details at Item Numbers 10,11 &12, otherwise follow 13 onwards. This is very important and should be entered with utmost care as a number of services including tagging of various member IDs with UAN and its portability are dependent on these details.*
  10. Please fill Universal Account Number (UAN) Or Previous employment P.F. member ID in Item No (10).
    - UAN is 12 digit number which has been allotted by EPFO and provided to the EPF member through employer. To check whether you have been allotted UAN against

your PF member ID, please go to the UAN Member e-sewa on EPFO website [www.epfindia.gov.in](http://www.epfindia.gov.in) and click on **Know your UAN status**.

- Previous employment P.F. member ID is to be furnished in the boxes as:

REGION CODE	OFFICE CODE	ESTABLISHMENT ID	EXTENSION	ACCOUNT NUMBER
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For instance, the number MH/BAN/12345/123 has to entered as:

MH	BAN	12345	000	123
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and the number MH/BAN/12345/A/123 has to entered as:

MH	BAN	12345	00A	123
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11. Please fill Date of Exit (i.e. Date on which member has ceased to work in the previous establishment) for the previous employment in Item No. 11.
  12. Please provide the details of Scheme Certificate in Item No. 12 (A) and Pension Payment Order in Item No. 12 (B), if the same have been issued to the member for the previous membership.
  13. Please tick the relevant box in Item No. 13. If you are international worker then fill the boxes 13(A), 13(B) & 13(C) i.e. please provide country of origin in 13(A), Passport Number in 13(B) and validity period of Passport in 13(C).
  14. Please tick the relevant Box for educational qualification in Item No. 14.
  15. Please provide marital Status by ticking the relevant Box in Item No. 15.
  16. Please tick the relevant box for handicap status in Item No. 16. If response to this item is YES, please tick the relevant category in the adjacent box.
  17. Please provide 'Know Your Customer (KYC)' details of all the available documents mentioned in this column as far as possible. Bank account Number with I.F.S.C. code is mandatory. Fill the name as on KYC with KYC Number and also the remarks in Item No 17. Remarks column is to fill up the relevant details i.e. I.F.S.C. code in case of Bank account Number, 'Valid up to' date in case of Passport, date of expiry in case of driving license.  
**It is very important to note that KYC details are required to provide better services to the members and hence details of maximum number of documents should be provided in the Item No. 17.**
- d. Please put your signature in the space provided with date and place. Please submit the filled up form to the present employer.
  - e. The present employer is required to take necessary action as explained in detail on EPFO website under **UAN services** and fill up the necessary details with his signature, designation and seal in the space provided.