Form No. 11 (New) Declaration Form



(To be retained by the Employer for future reference)

Employees' Provident Fund Organization

THE EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (PARAGRAPH-34 & 57)

THE EMPLOYEES' PENSION SCHEME, 1995 (PARAGRAPH-24)

DECLARATION BY A PERSON TAKING UP EMPLOYMENT IN AN ESTABLISHMENT	ON WHICH EMPLOYEE	S' PROVIDENT FUND SCHEI	ME,
1952 AND/OR EMPLOYEES' PENSION SCHEME	, 1995 IS APPLICABLE	_	
(PLEASE GO THROUGH THE INST	RUCTIONS)		

		•				•					
1)	NAME (TITLE)										
	Mr. Ms. Mrs.										
	(PLEASE TICK)										
	L					1 1				<u> </u>	
2)	DATE OF BIRTH	D D	M M	Y	YY						
21	5/a/								1 1		
3)	FATHER'S/ HUSBAND'S NAME MR.	4									
4)	RELATIONSHIP IN RESPECT OF (7)	ABOVE F	ATHER	Husb	AND						
	(PLEASE TICK)										
5)	GENDER	MALE	FEMALI	TRAN	NSGENDER						
	(PLEASE TICK)										
				<u> </u>							
6)	MOBILE NUMBER										
	(IF ANY)										
71	Frank ID (Is ann)	1	<u> </u>	<u> </u>				<u> </u>	1		
/)	EMAIL ID (IF ANY)										
8) WHETHER EARLIER A MEMBER OF THE EMPLOYEES' PROVIDENT FUND SCHEME, 1952?											
(PLEASE TICK)				YES NO							
9)	WHETHER EARLIER A MEMBER O		S' PENSION SO	НЕМЕ, 199	5?						
(PLEASE TICK)			YES			NO					

If response to any or both of (8) & (9) above is yes, then <u>mandatorily</u> fill up the previous employment details at (10,11&12):

A.	PREVIOU	S EMPLOY	MENT DET	ΓAILS											
10)	THE DETAI	LS OF THE	JNIVERSAL	Acco	UNT N UME	BER (UA	N) or pr	EVIOUS	PF ME	MBER	ID:				
	UAN OR														
		s PF M EM	IBER ID		REGION	CODE	OFFICE (CODE	ESTAE	BLISHN	иENT ID	EXTEN	ISION	ACCOUNT NU	JMBER
11)	DATE OF I	EXIT FOR PI	REVIOUS) D	M	M	Y	<u>'</u>	Υ	Υ	Y			
,		ID (DD/MI													
12)	` ,	CHEME CER' ENSION PAY											R:		
В.	OTHER D	ETAILS													
13)	INTERNAT (PLEASE T	TONAL WO	RKER		`	YES			No		}				
		REPLY TO (OUNTRY OF INDIA		Please		N INDIA	(IF YES, I	PLEASE		A), 1	3(в) & :	13 (c):			
					ILITION	APIL OI	THE COOK	iiki)							
	13(B) P	ASSPORT NI	JMBER	_											
	13(c) P	ASSPORT VA	ALID FROM		D	D	M M	Y	Y	Y	Υ				
			To	0	D	D	M M	ΙΥ		Y	Υ				
										•	·				
14) EDUCATION (ILLITE	RATE	Non- Matri		MATRIC		NIOR ONDARY	G	RADUATE		OST DUATE	Doctor	TECHNIC PROFESSI
	(PLEASE T	TCK)													
15) MARITAL :		MAI	RRIED	Un	IMARRIE	ED W	IDOW/	WIDOV	VER	Divord	CEE			
	(PLEASE 7	ICK)													
16) SPECIALLY		YES	5	No				IF	YES,	TICK THE	CATEG	ORY		
	(PLEASE T	ICK)					L	_OCOM	OTIVE		VISUAL		H	EARING	

AIL

KYC DOCUMENT TYPE	Name as on KYC Document	Number	REMARKS, IF ANY
BANK ACCOUNT-1*			IFSC CODE*
NPR/AADHAAR			
PERMANENT ACCOUNT			
NUMBER (PAN)			
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD			
ESIC CARD			

^{*} Mandatory Field (<u>Note</u>: Bank Account NUMBER (along with IFSC code) is mandatory. You are however advised to provide all KYC documents available with you in addition to mandatory KYCs to avail better services. **Self-Attested Photocopies of the documents** must be attached with this form.

C. UNDERTAKING:

- A. I CERTIFY THAT ALL THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- B. IN CASE, EARLIER A MEMBER OF EPF SCHEME, 1952 AND/OR EPS, 1995,
 - (I) I HAVE ENSURED THE CORRECTNESS OF MY UAN/ PREVIOUS PF MEMBER ID.
 - (II) THIS MAY ALSO BE TREATED AS MY REQUEST FOR TRANSFER OF FUNDS AND SERVICE DETAILS IF APPLICABLE FROM THE PREVIOUS ACCOUNT AS DECLARED ABOVE TO THE PRESENT P.F. ACCOUNT. (THE TRANSFER WOULD BE POSSIBLE ONLY IF THE IDENTIFIED KYC DETAILS APPROVED BY PREVIOUS EMPLOYER HAS BEEN VERIFIED BY PRESENT EMPLOYER USING HIS DIGITAL SIGNATURE CERTIFICATE).
 - (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

DATE: PLACE:	SIGNATURE OF MEMBER
	DECLARATION BY PRESENT EMPLOYER
A.	THE MEMBER Mr./Ms./Mrs HAS JOINED ON AND HAS BEEN ALLOTTED PF MEMBER ID
B.	IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
	(Post allotment of UAN) The UAN allotted for the member is
	Please Tick the Appropriate Option:
	THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE
	☐ HAVE NOT BEEN UPLOADED
	☐ HAVE BEEN UPLOADED BUT NOT APPROVED
	☐ HAVE BEEN UPLOADED AND APPROVED WITH DSC
C.	IN CASE THE PERSON WAS EARLIER A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
	• THE ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A) ABOVE HAS BEEN TAGGED WITH HIS/HER UAN/PREVIOUS
	MEMBER ID AS DECLARED BY MEMBER.
	Please Tick the Appropriate Option:-
	☐ THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE BEEN APPROVED WITH DIGITAL
	SIGNATURE CERTIFICATE AND TRANSFER REQUEST HAS BEEN GENERATED ON PORTAL.
	As the DSC of establishment are not registered with EPFO, the member has been informed to file physical claim (Form-13) for transfer of funds from his previous establishment.

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT