

Section D – Subscriber’s Annuity Details:

1. Annuity Service Provider (ASP) Name *:

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2. ASP ID*:

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3. ASP Scheme Name *:

4. ASP Scheme ID *:

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Declaration:

I _____, NPS Subscriber, my PRAN is _____,
do hereby declare that the information provided above is true to the best of my knowledge and belief.

Date :

D	D	M	M	Y	Y	Y	

Signature/Left Thumb Impression of the Subscriber

***Note: Left thumb impression in case of illiterate male claimants and Right thumb impression in case of illiterate female claimants must be obtained.**

Annexure for Nomination Details

INSTRUCTIONS FOR FILLING IN THE FORM

The details of nominees to whom the outstanding pension wealth of the subscriber is payable in case of the demise of the subscriber before entire proceeds are withdrawn (Please refer general instruction no: 6) is to be provided hereunder. Also, please note that in case of demise of the subscriber after opting for phased withdrawal, all the outstanding pension wealth out of the phased lump sum withdrawal in the account of the subscriber will be paid to the nominee(s) as mentioned in this form and the same would be treated as full and final discharge of the obligation. **In case, if you wish to appoint multiple nominees, please fill in the form 401-AN.**

I, _____ hereby nominate the person(s) mentioned below who is/are member(s)/non-member(s) of my family to receive the amount that may stand to my credit in the National Pension System as indicated below, in the event of my death before that eligible accumulated pension wealth amount has become payable or having become payable or having become payable has not been paid.

1. Name of the Nominee:

First Name*	Middle Name	Surname/last name

2. Nominee’s current communication Address

Flat/Unit No, Block no* _____
Name of Premise/Building/Village _____
Area/Locality/Taluka _____
District/Town/City* _____
State / Union Territory* _____
Country* _____ Pin Code* _____ Email ID: _____ Mobile No.: _____

3. Date of Birth of the Nominee* (Only in case of a minor):

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4. Relationship of the nominee with the Subscriber*:

(e.g. If nominee is son, subscriber should fill the relationship as ‘Son’)

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5. Nominee’s Guardian Details*(only in case of a minor):

First Name*	Middle Name	Last Name

Dated this _____ day of _____ 20 ____ at _____.
in the presence of the following witnesses:

Particulars	1 st Witness	2 nd Witness
Name		
Address		
Signature		

Signature/Left Thumb Impression of the Subscriber

*Note: Left thumb impression in case of illiterate male Subscriber and Right thumb impression in case of illiterate female subscriber must be obtained.

INSTRUCTIONS FOR FILLING UP THE FORM

This application should be filled by the Subscriber seeking to withdraw pension wealth benefits upon Superannuation from Government Service.

Documents to be enclosed along with this application:-

1. PRAN card in original. In case PRAN card is not available, the subscriber needs to submit a duly notarized Affidavit as to the reasons of non-submission of the PRAN card.
2. Cancelled cheque (containing Subscriber Name, Bank Account Number and IFS Code) or Bank Certificate Containing Name, Bank Account Number and IFSC code, for direct credit or electronic transfer.
3. A pre-signed receipt acknowledging the receipt of the proceed under NPS by the subscriber
4. In addition to the PRAN card any other Identification and address proof of the subscriber. The photocopies of documents (Sr. No. a to i) and original document (Sr No. j) that can be provided as identification and address proof are as mentioned below:
 - a) Ration Card with photograph of the subscriber and residential address
 - b) Bank Passbook with photograph and residential address
 - c) Credit Card with photograph, any other address proof like latest telephone bill, electricity bill in the name of the subscriber.
 - d) Passport
 - e) Aadhar Card issued by UIAD
 - f) Voter's Photo Identity Card with residential address
 - g) Driving license with photograph and residential address
 - h) PAN card and any other address proof like latest telephone bill, electricity bill in the name of the subscriber.
 - i) Final relieving certificate from government service on superannuation, if the application for withdrawal is submitted through the Points of Presence (POP).
 - j) Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councilor or a Gazetted Officer and any other address proof like latest telephone bill, electricity bill in the name of the subscriber (to be provided original)

In case if the address is not present on any of the above documents or differs with address provided in this form, proof in respect of current residential address like latest telephone bill, electricity bill in the name of the subscriber should be submitted.

GENERAL INSTRUCTIONS:

1. All the columns in the form should be filled with black ink pen without any overwriting.
2. Fields marked with (*) are mandatory.
3. Correct postal address, including the pin code should be provided.
4. Percentage of allocation for amount to be withdrawn as Lump-sum and amount to purchase life annuity. Subscriber can withdraw maximum 60% of pension wealth and is required to transfer minimum 40% of pension wealth to annuity. For example, for a total corpus of Rs.1000, if subscriber wants Rs.300 as lump-sum and Rs.700 for annuitisation, subscriber to select 30% and 70%.
5. Please select the type of lump-sum withdrawal as one-time or phased. For e.g. for a total corpus of Rs. 1000/- subscriber has selected Rs. 300 as lump-sum amount. For one time withdrawal subscriber will be given Rs. 300 as lump-sum amount on processing of withdrawal request. For phased withdrawal subscriber will be given minimum of 10% i.e. Rs. 30 for the period of 10 years, at the age of 70 years, subscriber would compulsorily withdraw any amount lying to their credit.
6. Instructions for nomination
 - Subscriber can nominate maximum of three nominees.
 - Subscriber cannot 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.
 - If a nominee is a minor, then nominee's guardian details will be mandatory

For the purpose of this document Pension Wealth means: The total amount of contributions made by the subscriber in the scheme plus the investment income derived from the investment of the contributions made by the subscriber from the date of joining of New Pension System till the date of execution of withdrawal request in the CRA System.

Annexure for Nomination Details

INSTRUCTIONS FOR FILLING IN THE FORM

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I, _____ hereby nominate the person(s) mentioned below who is/are member(s)/non-member(s) of my family to receive the amount that may stand to my credit in the National Pension System as indicated below, in the event of my death before that eligible accumulated pension wealth amount has become payable or having become payable or having become payable has not been paid.

1. Name of the Nominee*:

1st Nominee	2nd Nominee	3rd Nominee
First Name*	First Name*	First Name*
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name

2. Present Communication address of the nominees:

Address of 1 st Nominee	Address of 2 nd Nominee	Address of 3 rd Nominee

3. Date of Birth* (Only in case of a minor):

1st Nominee	2nd Nominee	3rd Nominee
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4. Relationship with the Nominee*:

1st Nominee	2nd Nominee	3rd Nominee
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5. Percentage Share*:

1st Nominee	%	2nd Nominee	%	3rd Nominee	%
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6. Nominee's Guardian Details* (Only in case of a minor):

1st Nominee's Guardian Details	2nd Nominee's Guardian Details	3rd Nominee's Guardian Details
First Name*	First Name*	First Name*
Middle Name	Middle Name	Middle Name
Last Name	Last Name	Last Name

Dated this _____ day of _____ 20 ____ at _____.

Particulars	1 st Witness	2 nd Witness
Name		
Address		
Signature		

Signature/Left Thumb Impression of the Subscriber

***Note: Left thumb impression in case of illiterate male Subscriber and Right thumb impression in case of illiterate female subscriber must be obtained.**

TO BE FILLED/ATTESTED BY DDO

Certified that the above declaration and nomination details has been signed / thumb impressed before me by Sh/Smt/Ms. _____ after he / she have read the entries / entries have been read over to him / her by me and got confirmed by him / her.

Rubber Stamp of the DDO

Signature of the Authorised Person

DDO/POP-SP Registration Number SGV067468C
(Allotted by CRA)

Designation of the Authorised Person : _____

DDO/POP-SP Office Name : _____

Date :

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TO BE FILLED/ATTESTED BY CAO/GPF, HVPNL, PANCHKULA

PAO/DTO/POP Registration Number (Allotted by CRA): 4009342

Rubber Stamp of the PAO/DTO/POP/POP-SP

Signature of the Authorised Person