

5. PREFERRED ADDRESS FOR COMMUNICATION

(Please tick) Overseas Address Permanent Address
 (Communication at overseas address would entail extra charges)

6. CONTACT DETAILS* (Include country code for Overseas phone numbers)

Landline Phone* (Overseas No.-with ISD code) +

Mobile* (Overseas No.) + (Mobile Number is required for communication and to get SMS alerts)

Email ID*

7. OTHER DETAILS (Please refer to Sr no. 3 of the instructions)

► Occupation Details* [please tick(√)]

- Private Sector Public Sector Government Sector Professional
 Self Employed Homemaker Student Others (please specify)
- Income Range (per annum) Upto 1 lac 1 lac to 5 lac 5 lac to 10 lac 10 lac to 25 lac 25 lac and above
- Educational Qualifications Below SSC SSC HSC Graduate Masters Professionals (CA, CS, CMA, etc.)
- Please Tick If Applicable Politically exposed person Related to Politically exposed Person (Please refer instruction no.3)

8. SUBSCRIBER BANK DETAILS* (Please refer to Sr no. 4 of the instructions)#

(All bank details are mandatory except MICR Code)

Account Type [please tick(√)] NRE Account NRO Account

Bank A/c Number

Bank Name

Branch Name

Branch Address

PIN Code

State/U.T.

Country

Bank MICR Code

IFS Code

NRIs can make contributions through NRE/FCNR/NRO Account or by inward remittance through normal banking channels.

9. SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No . 5 of the instructions)

Name of the Nominee (You can nominate up to a maximum of 3 nominees and if you desire so please fill in Annexure II (Additional Nomination Form) provided separately)

First Name Middle Name Last Name

Relationship with the Nominee Date of Birth (In case of Minor)

Nominee's Guardian Details (in case of a minor)

First Name Middle Name Last Name

10. NPS OPTION DETAILS (Please tick (√) as applicable)

I would like to open account on* Repatriation Basis Non-Repatriation Basis

In Case of Non-Repatriation Basis, the amount will be credited only in NRO account.

I would like my PRAN to be printed in Hindi YES NO If Yes, please submit details in Annexure I

11. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION* (Please refer to Sr. No. 6 of the instructions)**(i) PENSION FUND SELECTION (Tier I) : Please read below conditions before opting for the choice of Pension Funds:**

(a) An NRI Subscriber has the option to choose one of the available PFs as per their choice in the table below.

*Names of the Pension Funds are given in alphabetical order.

Name of the Pension Fund (Please select only one)	Please Tick (√) Only One
Birla Sunlife Pension Management Limited	<input type="checkbox"/>
HDFC Pension Management Company Limited	<input type="checkbox"/>
ICICI Prudential Pension Funds Management Company Limited	<input type="checkbox"/>
Kotak Mahindra Pension Fund Limited	<input type="checkbox"/>
LIC Pension Fund Limited	<input type="checkbox"/>
SBI Pension Funds Private Limited	<input type="checkbox"/>
UTI Retirement Solutions Limited	<input type="checkbox"/>

* Selection of Pension Fund is mandatory both in Active and Auto Choice.

(ii) INVESTMENT OPTION

(Please Tick (√) in the box given below showing your investment option).

Active Choice Auto Choice

Please note:

- In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below.
- In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).
- In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE – ASSET ALLOCATION (to be filled up only in case you have selected 'Active Choice' the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Government Bonds and related instruments; Asset Class A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, InvIts etc.
Specify %					100%	

Please note:

- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(iv) Auto Choice Option (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.

Life Cycle (LC) Funds	Please Tick (√) Only One
LC 75	<input type="checkbox"/>
LC 50	<input type="checkbox"/>
LC 25	<input type="checkbox"/>

- Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset
 2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset
 3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset

12. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 7 of the instructions)**Declaration & Authorization by all subscribers**

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same along with the PFRDA Act, regulations framed thereunder and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the Central Record Keeping Agency/National Pension System Trust, of any change in the above information furnished by me. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-PIN (to access CRA website and view details) & T-PIN.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Date / /

Place :

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)**13. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE** (Please refer to Sr no. 8 of the instructions):**Section I***US Person* Yes No **Section II***

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

Particulars		Country (1)	Country (2)	Country (3)
Country/countries of tax residency				
Address in the jurisdiction for Tax Residence	Address Line 1			
	City/Town/Village			
	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional equivalent Number				
TIN/ Functional equivalent Number Issuing Country				
Validity of documentary evidence provided (Wherever applicable)		dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy

"I certify that:

- It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid rules,
- the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence,
- I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI) /RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date / / Place : Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)Name of subscriber

14. DECLARATION BY POINT OF PRESENCE(POP):

Receipt Number	<input type="text"/>															
POP-SP Registration Number	<input type="text"/>															
Bank Name and Branch :	<input type="text"/>															
KYC Compliance	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>												
Document accepted for date of Birth Proof	<input type="text"/>															
Copy of PAN Card submitted	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	PAN Card No.	<input type="text"/>										
Documents Received:	<input type="text"/> (Originals Verified) Self Certified				<input type="text"/> (Attested) True Copies											
Identity Verification :	<input type="text"/> Done															

Existing Bank Customer:

I/we hereby certify/confirm that Shri/Smt/Kum is an existing NRI customer of the Bank having fully operative Saving Bank account no. atbranch and KYC norms required for opening NRI Bank Account (NRE/NRO) which match the requirements for opening NPS account have been fully complied with. We further confirm that the S. B. a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account' .

Adhaar Based KYC Certificate:

I/we hereby certify that Aadhaar Number of Sh/Smt/Kum.....has been checked and the name and address mentioned on the original Aadhaar card are matching with that mentioned on NPS application form.

To be filled by POP-SP		Name:	<input type="text"/>									
		Designation:	<input type="text"/>					Place:	<input type="text"/>			
POP-SP Seal	Signature of Authorized Signatory	Date	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[To be filled by CRA - Facilitation Centre (CRA-FC)]

Received by	<input type="text"/>	CRA-FC Registration Number	<input type="text"/>																		
Received at	<input type="text"/>										Date	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Acknowledgement Number (by CRA-FC)	<input type="text"/>																				
PRAN Alloted	<input type="text"/>																				

ACKNOWLEDGEMENT

Name of the Subscriber:	<input type="text"/>															
Contribution Amount Remitted:	₹	<input type="text"/>														
Date of Receipt of Application and Contribution Amount:	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Stamp and Signature of the PoP:

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM**General Guidelines**

- (a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word.
- (b) In case, you mention the KYC number submission of proof for the same is necessary.
- (c) Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back
- (d) The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted.
- (e) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (f) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (g) The subscriber's thumb's impression should be verified by the designated officer of POP-SP.

S. No	Item No.	Item Details	Instructions																																
1	1	Personal Details	This Form is applicable only for Non Resident Indians (NRI). Currently, foreign national and Person of Indian Origin are not allowed to open PRAN																																
		Spouse Name	If married, spouse name is mandatory.																																
		Father's Name	i. Father's name is mandatory. ii. If father's name has more than 30 digits, you may fill Annexure I for the same.																																
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		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.																																
2	3, 4 & 5	Address Details	<table border="1"> <thead> <tr> <th>S.No</th> <th>Proof of Address (Copy of any one)</th> </tr> </thead> <tbody> <tr><td>1</td><td>Passport issued by Government of India</td></tr> <tr><td>2</td><td>Ration card with photograph and residential address</td></tr> <tr><td>3</td><td>Bank Pass book or certificate with photograph and residential address</td></tr> <tr><td>4</td><td>Certificate of the POP for an existing customer.</td></tr> <tr><td>5</td><td>Voters Identity card with photograph and residential address</td></tr> <tr><td>6</td><td>Valid Driving license with photograph and residential address</td></tr> <tr><td>7</td><td>Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.</td></tr> <tr><td>8</td><td>Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly</td></tr> <tr><td>9</td><td>Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address</td></tr> <tr><td>10</td><td>Job cards issued by NREGA duly signed by an officer of the State Government</td></tr> <tr><td>11</td><td>The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address.</td></tr> <tr><td>12</td><td>Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old)</td></tr> <tr><td>13</td><td>Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than 2 months old)</td></tr> <tr><td>14</td><td>Latest Property/house Tax receipt (not more than one year old)</td></tr> <tr><td>15</td><td>Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation)</td></tr> </tbody> </table>	S.No	Proof of Address (Copy of any one)	1	Passport issued by Government of India	2	Ration card with photograph and residential address	3	Bank Pass book or certificate with photograph and residential address	4	Certificate of the POP for an existing customer.	5	Voters Identity card with photograph and residential address	6	Valid Driving license with photograph and residential address	7	Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.	8	Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly	9	Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address	10	Job cards issued by NREGA duly signed by an officer of the State Government	11	The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. Pension or Family Pension Payment Orders issued by Govt. Departments or PSU containing address.	12	Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old)	13	Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than 2 months old)	14	Latest Property/house Tax receipt (not more than one year old)	15	Existing valid registered lease agreement of the house on stamp paper (in case of rented/leased accommodation)
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Note:	<p>1. If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/her in the account opening form, the document may be accepted as a valid proof of both identity and address.</p> <p>2. If the address indicated on the document submitted for identity proof differs from the current address mentioned in the account opening form, a separate proof of address should be obtained. All future communications will be sent to correspondence address. If correspondence & Permanent address are different, then proof for both have to be submitted.</p> <p>3. An NRI subscriber is required to furnish an Indian address for communication and bank details within India.</p>																																		
3	7	Other Details (Occupation Details)	An NRI subscriber would need to furnish an Indian address for communication and bank details within India. Fund transfers by NRIs would be subject to regulatory requirements as prescribed by RBI from time to time and FEMA requirements.																																
		Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.																																
4	8	Subscriber's Bank Details	Subscriber requires to give the details of only NRE/NRO account. For Tier I & Tier II account, bank details are mandatory and it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account Number and IFS Code should be submitted.																																
5	9	Subscriber's Nomination Details	In case of more than one nominee, percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). 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.																																
6	11	Pension Fund (PF) Selection and Investment Option	For more details on 'Investment Option', you may visit CRA website.																																
7	12	Declaration by Subscriber	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the designated officer of POP/POP-SP with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Impression in case of females.																																
8	13	Declaration by subscriber on FATCA Compliance	<p>Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India</p> <ul style="list-style-type: none"> Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number) If applicant residence for tax purpose in jurisdiction(s) within India, Permanent Account Number (PAN) to be provided as Tax Identification Number (TIN) In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided 																																

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: <https://www.npscra.nsdl.co.in>
 Call: 022-4090 4242
 Address: Central Recordkeeping Agency (CRA)
 NSDL e-Governance Infrastructure Limited
 1st Floor, Times Tower, Kamala Mills Compound,
 Senapati Bapat Marg,
 Lower Parel (W), Mumbai - 400013

Equity Allocation Matrix for Active Choice

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

Please note:

1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

ADDITIONAL NOMINATION FORM**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 is to be provided hereunder (Please refer instruction no: 5). Also, please note that in case of demise of the subscriber after opting for deferred withdrawal, all the outstanding pension wealth present in the NPS account of the subscriber shall be withdrawn upon receiving the request and paid to the nominees as mentioned in this form and the same would be treated as full and final discharge of the obligation.

I, _____ hereby nominate the person(s) mentioned below who is/are member(s)/ of my family to receive the amount in my PRAN account under National Pension System in the event of my death.

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

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

1st Nominee <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	2nd Nominee <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	3rd Nominee <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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4. Relationship with the Nominee:**1st Nominee****2nd Nominee****3rd Nominee**

_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
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5. Percentage Share:

1st Nominee <input type="text"/> <input type="text"/> %	2nd Nominee <input type="text"/> <input type="text"/> %	3rd Nominee <input type="text"/> <input type="text"/> %
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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 _____

Signature/ 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 POP-SP

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 POP-SP

Signature of the Authorised Person

POP-SP Registration Number _____
(Allotted by CRA)

Designation of the Authorised Person : _____

POP-SP Office Name : _____

Date

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

TO BE FILLED/ATTESTED BY POP/POP-SP

Rubber Stamp of the POP/POP-SP

POP/POP-SP Registration Number
(Allotted by CRA): _____

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Signature of the Authorised Person