

Phone :. 011-23711595

Fax: 011-23325508

वैज्ञानिक एवं औद्योगिक अनुसंघान परिषद, अनुसंघान भवन, रफी मार्ग, नई दिल्ली-110001 Council of Scientific & Industrial Research Anusandhan Bhavan, Rafi Marg, New Delhi - 110 001

No.34-2(5)/NPS/2009-10

Dated:16th July 2009

To

The Directors of the National Laboratories/Institutes.

Sub: Joining of CSIR in the New Pension Scheme (NPS) Architecture.

Sir,

- 1. As you are aware that New Pension Scheme (NPS) introduced by Government of India (GOI) was made applicable to all employees joining CSIR on or after 1st January 2004.
- 2. The GOI established Pension Fund Regulatory and Development Authority (PFRDA) for developing and regulating the pension funds under NPS Architecture. The PFRDA have identified SBI Pension Fund Ltd., UTI Retirement Solution Ltd. and LIC Pension Fund Ltd. to act as pension fund managers to manage the accumulated corpus and incremental inflow in accordance with Government mandated investment guidelines. The PFRDA have also appointed National Securities Depository Limited (NSDL) as the Central Recordkeeping Agency (CRA) for managing the accounting, record keeping, database and other operational aspects of the 'New Pension Scheme'.
- 3. The Ministry of Finance ,Department of Expenditure vide OM No. 1(13)/EV/2008 dated 28-11-2008 advised all the autonomous bodies to contact PFRDA for shifting to NPS Architecture operationalised by PFRDA/NSDL and submit a formal 'Letter of Consent'. Accordingly CSIR has consented to PFRDA vide letter No.34-2(6)/CSIR/NPS/08-09-1347 Dated 20-04-2009.
- 4. As a course of action in this direction we have to go for registration. Accordingly the registration forms S1 (for individual subscriber), N2, for Pay and Account Office (COFA/FAO) and N3 (for DDO) for subscribing to the scheme are enclosed herewith.

5. All the Labs/Instt's are therefore requested to submit duly filled in form S1 N2 and N3 (copy enclosed) to CSIR Hqrs. by **27th July 2009(27-07-2009)** positively so that NSDL may be approached for operationalisation of NPS at the earliest. In case of any problem in filling up the forms, the Lab./Instt. may contact Mr.Rakesh Bidalia, Finance & Accounts Officer CSIR Hqrs (contact No.011-23711255 e-mail id bidalia@hotmail.com) who has been nominated for coordinating the task. The details of the NPS architecture can also be seen at website www.npscra.nsdl.co.in for further information and guidance.

Yours faithfully,

(SHEILA SANGWAN)

Encl: as above

Annexure S1	Page 1
Application for Allotment of Permanent Retirement Account Number (PRAN)	
(To avoid mistake(s), please follow the accompanying instructions and examples carefully before filling up the form)	To affix recent Coloured photograph
Acknowledgement No. (To be filled by FC)	(3.5 cm × 2.5 cm)
Permanent Retirement Account Number	
(To be filled by FC after PRAN generation)	
Sir/Madam,	
I hereby request that a permanent retirement account number be allotted to me.	
I give below necessary particulars:	Signature/Left Thumb Impression
Section A - Subscribers Personal Details (* Indicates Mandatory Field) Full Name (Full expanded name: initials are not permitted)	of Subscriber in black ink
Please Tick as applicable, Shri Smt Kumari	
First Name *	
Middle Name	
Last Name	
Gender * Please Tick as applicable. Male Female	
defined Trease from the appropriate, some	
Date of Buth	
D D M M Y Y Y (Date of Birth to be Certified by DDO) 5. Father's Full Name:	
First Name *	
Middle Name	
Last Name	
C. Drosent Address:	<u> </u>
6. Present Address: Flat/Unit No, Block no. *	
Name of Premise/Building/Village	
Area/Locality/Taluka	· · · · · · · · · · · · · · · · · · ·
District/Town/City *	
State / Union Territory *	
Country *	
Pin Code *	
7. Permanent Address: If same as above, Please Tick else,	
Flat/Unit No, Block no. *	
Name of Premise/Building/Village	
Area/Locality/Taluka	
District/Town/City *	
State / Union Territory *	▗ ┈╸╹┈╏┈╏┈╏┈╏
Country *	
County	
Pin Code *	
8. Phone No.	
STD Code Phone No.	
9. Mobile No.	

Annexure S1	Page 2
10. Email ID	
	
11. Subscribers Bank Details: (Please refer instruction no. 4) Savings A/c Current A/c	
Bank A/c Number	
Bank Name	
Bank Branch	
Bank Address	
Pin Code	
Bank MICR Code (Wherever applicable)	
12. Value Added Services: i) SMS Alert Yes No	
ii) Email Alert: Yes No	
, the applicant, do hereby declare that	
what is stated above is true to the best of my information & belief.	
Date:	
	/Left Thumb of Subscriber
Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory)	
1. Date of Joining 2. Date of Retirement	
D D M M Y Y Y Y	Y Y Y
3. PPAN (Please refer to instructions No.5.)	
4 Group of the Employee (Please Tick) Group A Group B Group C Group D	
5. Office	
6. Department	
7. Ministry	
8. DDO Registration Number 9. PAO/CDDO Registration Number	
(Please refer to instructions No.6.)	
10. Basic Salary	
11. Pay Scale	
Certified that the above declaration has been signed / thumb impressed before me by after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of b	
after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of details is as per employee records available with the Department .	oirth and employment
Rubber Stamp of the DDO	
Signature of the Authorised Person Designation of the Authorised Person . Name of the DDO	
Date:	
D D M M Y Y Y Y Department / Ministry	

INSTRUCTIONS FOR FILLING PRAN FORM

a) Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.

b) Details Marked with (*) are the mandatory fields.

c) Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word

d) 'Individual' Subscriber should affix a recent colour photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)

e) Signature /Left thumb impression should only be within the box provided in the form. The signature should not be on the photograph. If there is any mark on the photograph such that it hinders the clear visibility of the face of the Subscriber, the application will not be accepted.

f) Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer under official seal and stamp.

Sr. No.	Item No	Item Details	Guidelines for Filling the Form
110.		Section	A - Subscribers Personal Details
1	3.	Date of Birth	All Dates Should be in "DDMMYYYY" Format
2	6.	Present Address	All future communications will be sent to present address.
3	8, 9, 10	Phone No., Mobile No, & Email ID	It is advisable to mention either "Telephone number" or "Mobile number" or "Email id" so that Subscriber can be contacted in future for any discrepancy.
4	11	Subscriber's Bank Details	If Subscribers mentions any of the bank details, except MICR Code all the bank details will be mandatory.
		Section J	B - Subscribers Employment Details
Subscr	iber and should be verifi-	riber's Employment details ed by the Authorised Signate / Striking off of any of the	in the application. The employment details should be filled by the respective DDO of the ory.
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number), if it has been allotted to the subscriber by the concerned PAO.
6	8 & 9	PAO/CDDO Reg. No. & DDO Reg. No.	PAO/CDDO Reg. No. and DDO Reg. No. are the unique Registration number allotted by Central Recordkeeping Agency. CDDOs will register as both PAOs and DDOs. NCDDOs will register only as DDOs and obtain the PAO Reg. No. from their respective PAOs.
		Section (C - Subscriber's Nomination Details
7	4.	Percentage Share	Subscriber can nominate maximum of three nominees. Subscriber can not 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.
8	5.	Nominee's Guardian Details	If a nominee is a minor, then nominee's guardian details will be mandatory.
		Secti	on D - Subscriber scheme details
If the	Subscriber is unable to ation Centre (FC) for info	ormation or the Subscriber c	s i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest an also search for the scheme details on http://www.npscra.nsdl.co.in
9	Scheme	Subscriber can select max http://www.npscra.nsdl.cc Subscriber can not fill the If a scheme name is filled filled for that scheme. If the Scheme details are	timum three schemes. Details of the schemes are available on bin same scheme details more than once. in the form for scheme setup there must be a PFM name and percentage contribution not filled, default scheme as approved by PFRDA will be applicable.
10	Percentage Share	Percentage contribution v	ue will be in terms of percentage. It cannot be in terms of amount. alue for all the schemes must be integer. Fractional value will not be accepted. s (in percentage) across all the schemes is not equal to 100, the balance will be allotted roved by PFRDA.

GENERAL INFORMATION FOR PRAN SUBSCRIBERS

a) Subscribers can obtain the application form for PRAN in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) from DDO or can freely download from the CRA website (http://www.npscra.nsdl.co.in).

b) The request for a reprint of PRAN card with the same PRAN details or/and changes or correction in PRAN data can be made by filling up 'Request for change/correction in subscriber master details and/or re-issue of I-Pin/T-Pin/PRAN card' or/and 'Request For change in signature and/or change in photograph'. The form is available from the sources mentioned in (a) above.

The Subscriber can obtain the status of his/her application from the CRA website or through the respective PAO/CDDO.

d) For more information

Visit us at http://www.npscra.nsdl.co.in

Call us at 022-24994200

e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

CENTRAL RECORDKEEPING AGENCY

PAO REGISTRATION FORM (To avoid mistake(s), please read the accompanying instructions carefully before filling up the form) This form is to be used for the purpose of registration of Pay and Accounts Office (PAO) or equivalent entities in Central Civil Ministries / Railways/Post / Telecom /Civil Defence/Central Autonomous Bodies. PAO Registration Number: (To be allotted by CRA) We are pleased to inform you that our Pay and Accounts Office has decided to join the New Pension System. The details required for registration in the CRA system are provided below: 1. PAO AIN (Optional): (Refer instruction no. 4) 2. Are you a PAO cum DDO: Yes No (Refer instruction no. 10) 3. PAO Type*: (Please Tick) X Central Autonomous Body Railways Defence Telecom Civil Postal 4. Name of the PAO Office*: 5. PAO Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City* State / Union Territory* Country* Pin Code* Phone No.*: (Phone No.) (STD code) Alternate Phone Number: Fax Number: 6. Official Email ID*: (Refer instruction no.5) 7. Authorized contact person's Designation*: 8. Name of the Department currently served by the PAO*:

> PAO stamp & Signature of Authorised signatory

(b) Existing PAO code: (c) Pr.AO Registration Number*: (Refer instruction no. 7) (c) Pr.AO Registration Number*: (Refer instruction no. 8) Received on: Name of the officer: Signature of Authorised signatory of Pr.AO Name: Place: Designation: Date: Pr.AO Stamp Pr.AO Stamp Pr.AO Registration Number*: (Refer instruction no. 8) Received on: Name of the officer: Signature of Authorised signatory of Pr.AO Name: Place: Designation: Date: Name of the officer: Signature of Multiput the form: The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senagai Bapat Marg, Lower Parel (W), Mumbai - 400 (13), Form to be filled legishly in BLOCK LETTERS and in BLACK INK only. Form to be filled legishly in BLOCK LETTERS and in BLACK INK only. Form to be filled legishly in BLOCK LETTERS and in BLACK INK only. Email Do Should be official Email Do fithe Principal Accounts Office ie. email Id should be in the name of the office and not of the individual For e.g. I. NIT@in.eam - \formall 2. NIT@in.eam - \formall 3. Raj@in.eam - \formall 4. Raj@in.eam	Annexure N2		Page 2
(Refer instruction no. 7) I/We understand that there would be PFRDA approved Terms and Conditions on the CRA website governing Noda. Office's use of I-Pin (to view and transact online) & T-pin to access CRA / NPSCAN. I /We agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed. Signature of Authorised signatory of PAO Name: Place: Designation: Date:	9. (a) Name of the Ministry*: (Refer to instruction no. 6)		
(Refer instruction no. 7) I/We understand that there would be PFRDA approved Terms and Conditions on the CRA website governing Noda. Office's use of I-Pin (to view and transact online) & T-pin to access CRA / NPSCAN. I /We agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed. Signature of Authorised signatory of PAO Name: Place: Designation: Date:			
(Refer instruction no. 7) I/We hereby agree and declare that the information provided in the application, is complete and true. I / We understand that there would be PFRDA approved Terms and Conditions on the CRA website governing Noda. Office's use of I-Pin to view and transact online) & T-pin to access CRA / NPSCAN. I /We agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed. Signature of Authorised signatory of PAO Name: Place: Designation: Date:			
We understand that there would be PFRDA approved Terms and Conditions on the CRA website governing Noda Office's use of I-Pin (to view and transact online) & T-pin to access CRA / NPSCAN. I /We agree to be bound by the saic terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely of partially without any new Declaration/Undertaking being signed. Signature of Authorised signatory of PAO	(b) Existing PAO code:		*:
Signature of Authorised signatory of PAO	I/We hereby agree and declare that the information pro	ovided in the application, is com	plete and true.
Name:	Office's use of I-Pin (to view and transact online) & terms and conditions and understand that CRA may	T-pin to access CRA / NPSCA, as approved by PFRDA, ame	N. I /We agree to be bound by the said
Pr.AO Stamp Pr.AO Reg. No. (Allotted by CRA) (Refer instruction no.8) Received on: Name of the officer: Signature of the officer: Signature of the officer: Signature of the officer: Place: Name of the officer: Signature of the officer: Signature of the officer: Signature of the officer: CRA Stamp Instructions for filling the form: The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word. Details marked with (*) are mandatory fields. AlN is the Account Identification Number allotted by Income Tax Department. Email ID should be official Email ID of the Principal Accounts Office i.e. email Id should be in the name of the office and not of the individual For c.g. 1. NIT@nic.in - √ 2. NIT@valno.com - √ 3. Raj@yahoo.com - X 4. Raj@nic.in - X		Signature of Auth	orised signatory of PAO
Signature of Authorised signatory of Pr.AO		Name:	Place:
Pr.AO Reg. No. (Allotted by CRA) Designation: Date: Designature of the officer: Signature of the officer: Signature of the officer: Designature of the officer: De	PAO Stamp	Designation:	Date:
Received on: Name of the officer: Signature of the officer:	Pr.AO Reg. No. (Allotted by	Name:	Place:
Name of the officer: Signature of the officer:	· · · · · · · · · · · · · · · · · · ·		
Signature of the officer: CRA Stamp Instructions for filling the form: The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word. Details marked with (*) are mandatory fields. AIN is the Account Identification Number allotted by Income Tax Department. Email ID should be official Email ID of the Principal Accounts Office i.e. email Id should be in the name of the office and not of the individual For e.g. 1. NIT@nic.in -√ 2. NIT@yahoo.com -√ 3. Raj@yahoo.com - X 4. Raj@nic.in - X			-
Instructions for filling the form: 1. The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013. 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. 3. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word. Details marked with (*) are mandatory fields. 4. AIN is the Account Identification Number allotted by Income Tax Department. 5. Email ID should be official Email ID of the Principal Accounts Office i.e. email Id should be in the name of the office and not of the individual For e.g. 1. NIT@nic.in - √ 2. NIT@yahoo.com - √ 3. Raj@yahoo.com - X 4. Raj@nic.in - X		Name of the officer :	
Instructions for filling the form: 1. The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013. 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. 3. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word. Details marked with (*) are mandatory fields. 4. AIN is the Account Identification Number allotted by Income Tax Department. 5. Email ID should be official Email ID of the Principal Accounts Office i.e. email Id should be in the name of the office and not of the individual For e.g. 1. NIT@nic.in - √ 2. NIT@vahoo.com - √ 3. Raj@yahoo.com - X 4. Raj@nic.in - X		Signature of the officer:	
 The form is to be submitted to the address - Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word. Details marked with (*) are mandatory fields. AIN is the Account Identification Number allotted by Income Tax Department. Email ID should be official Email ID of the Principal Accounts Office i.e. email Id should be in the name of the office and not of the individual For e.g. 1. NIT@nic.in -√ NIT@vahoo.com -√ Raj@yahoo.com - X Raj@nic.in - X 	CRA Stamp		
g and the state of	 Wing, Trade World, Kamala Mills Compound, Senap Form to be filled legibly in BLOCK LETTERS and ir Each box, wherever provided, should contain only on word. Details marked with (*) are mandatory fields 4. AIN is the Account Identification Number allotted by Email ID should be official Email ID of the Prin and not of the individual For e.g. 1. NIT@nic.in - √ 2. Note that is a single provided in the print of the individual in the print of the pri	ati Bapat Marg, Lower Parel (W), Man BLACK INK only. e character (alphabet/number/punctions. Income Tax Department. acipal Accounts Office i.e. email IIT@yahoo.com - √ ai@nic.in - X	Aumbai - 400 013. uation mark) leaving a blank box after each

- 8.
- Form has to be duly authorised by Pr.AO registered at CRA. Till it has been registered, it shall retain the forms.

 The application form in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) can be freely downloaded from the CRA website (http://www.npscra.nsdl.co.in).
- If you function as PAO cum DDO, Form N3 (DDO registration form) NEED NOT BE SUBMITTED FOR 10. REGISTRATION AS A DDO.
- For more information contact CRA at 022-24994200 or write to CRA at Central Recordkeeping Agency, National Securities 11. Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

Annexure N3															~								Pa	ge 1	
				CE	NΊ					_			EP			<u>A(</u>	E	VC'	<u>Y</u>						
(To his form is to be used for linistries / Railway / Post		urpo	se c	f re	gisti	reac atio	the <i>n of</i>	acco Dro	ompa <i>win</i>	anyir g <i>ar</i>	ng in nd D	struc <i>isbu</i>	rsing	care:	fully	befo (DI	ore fil O <i>O) (</i>	lling and o	up th equi	ie fo vale	rm) <i>nt er</i>	ıtitie	s in	Cen	tral Ci
	OO Re To be																								
We are pleased to inf The details required f																ide	d to	join	the	Ne	w Pe	 ensi	on S	Syste	em.
1. DDO TAN (Option (Refer to instruction		10)																							
2. Name of the DDO	Offic	e*:																							
3. DDO Address: Flat/Unit No, Bloo	k no.	*		L	Д														<u></u>	<u> </u>	,				
N CD '-/			37:11				<u> </u>	<u> </u>				<u> </u>						<u> </u>	}	<u> </u>		1			
Name of Premise/I	Juilai	ng/	VIII	age		Ι	<u> </u>	1		Τ		Ţ	T		Ι	1	T	Τ				Т	Τ	Τ	
Area/Locality/Talu	ka					I	l						-l	.1	.1		. I								
							<u> </u>	<u> </u>														<u> </u>			
District/Town/City	*	-				r	г	T	1	1	_	,		т		_	1	1	Т	1		т	1	1	т
State / Union Terri	tom/ *					<u> </u>	L		<u> </u>					<u> </u>	L	<u> </u>		<u></u>				<u> </u>		<u> </u>	
State / Official Terri	lory						ŀ		T		Τ	T	Τ-				i	1	1		1	T			
Country *		1		L		<u> </u>	1									·		1	1						
															L.							<u> </u>			
Pin Code *		_		DI.		NT.	ı	_			,—,		,				-,-	Ţ .							
				Pn	ione	No	·. *			<u> </u>	<u> </u>														
								(SI	ſDο	code	e)			(I	Phoi	ne N	(.ol								
Alternate Phone No	0:									Ι			[<u> </u>							
4. Official Email ID*	(Ref	er te	o in	stru	ctio	n no	5.5)																		
							Í						<u> </u>	Τ	Τ		,								
					<u></u>													<u> </u>	_]			<u> </u>	<u> </u>		
5. Authorized contact	pers	ons	De	sign	atic	n *:					.,						. .			,		,	,	·	,
									ļ	ļ_				1	ļ		ļ	_				-			}
									ļ <u>.</u>	_	-					ļ							-		-
			i					l	1	<u> </u>					L							<u></u>	Ļ		J
6. Name of the Depar	tmen	t:																							
								ı																	
												<u> </u>	<u> </u>							<u> </u>	<u> </u>			<u>L.</u>	
7. (a) Name of the M	linisti	ry *	: (I	Refe	r to	ins	truc	tion	no.	.6)															
]

DDO stamp and Signature of Authorised Signatory

nnexure N3				Page 2
(b) Existing DDO Code:		(c) DI	OO Type : Centra	J Autonomous Body √
PAO Registration Number (To be filled by PAO)	r*:	(Refer instruction	1 no.7)
/We hereby agree and decla	re that the information [provided in the appl	ication, is compl	ete and true.
				Date:
				Place:
	Signature of A	uthorised Signator	y of DDO	
DDO Stamp				
Name of Authorised Sign	natory:			
To be attested by PAO			Date:	
			Place:	
			Name of Au	ithorised Signatory :
PAO Stamp	Signature of Auth	orised Signatory		
PAO Reg. No. (Allotted b	y CRA)			
(Refer instruction no.8)				
		Received or	1	
		Name of the	e officer:	
(To be filled at CRA)		Signature o	f the officer:	
	Stamp		· · · · · · · · · · · · · · · · · · ·	

- 1. The form is to be submitted to the address Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai 400 013.
- 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- 3. The form should be filled up completely. Details marked with (*) are mandatory fields.
- 4. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- 5. Email ID should be the official Email ID of the Drawing and Disbursing Officer at any of Government of India or similar websites & not of any individual person or non government websites like yahoo.com and rediffmail.com.
- 6. Kindly provide Name of the Ministry under which DDO office is functioning.
- 7. Kindly mention PAO Registration No. allotted by CRA to the PAO.
- 8. Form has to be duly authorised by PAO registered at CRA. Till it has been registered, it shall retain the forms.
- 9. The application form in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) can be freely downloaded from the CRA website (http://www.npscra.nsdl.co.in).
- 10. TAN is the Tax Deduction and Collection Account Number allotted, by Income Tax Department, New TAN is a ten character alphanumeric number with the following structure: First four digits (Alphabets), Next Five digits (Numeric) and last digit (Alphabets)
 - It is advisable that DDO verifies from the Income Tax website whether TAN has been allotted as per the new format.
- 11. For more information contact CRA at 022-24994200 or write to CRA at Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai 400 013.