

पटना विश्वविद्यालय

पत्रांक - AC / PF / 344

दिनांक- 09.03.2021

सेवा में ,

1. सभी संकायाध्यक्ष, पटना विश्वविद्यालय
2. सभी विभागाध्यक्ष, पटना विश्वविद्यालय
3. सभी प्रधानाचार्य, पटना विश्वविद्यालय ।
4. सभी संस्थानों के निदेशक, पटना विश्वविद्यालय
5. सभी छात्रावासों के अधीक्षक, पटना विश्वविद्यालय
6. सभी सम्बद्ध इकाइयों के नियंत्री पदाधिकारी , पटना विश्वविद्यालय ।

विषय- दिनांक 01.09.2005 को एवं उसके बाद नियुक्त होने वाले कर्मियों पर अच्छादित नेशनल पेंशन योजना के अंतर्गत PRAN registration हेतु CSRF Form भरवाने के सम्बन्ध में ।

महोदय / महोदया,

उपर्युक्त विषय के सम्बन्ध में निदेशानुसार सूचित करना है कि पटना विश्वविद्यालय में दिनांक 01.09.2005 को एवं उसके बाद नियुक्त होने वाले कर्मियों (शिक्षकों, शिक्षकेतर एवं पदाधिकारियों) पर अच्छादित नेशनल पेंशन योजना के अंतर्गत Permanent Retirement Account Number (PRAN) registration / generate किया जाना है ।

अतः आपसे अनुरोध है कि आप अपने अधिनस्त उन सभी कर्मियों का Subscriber Registration Form विधिवत भरवाकर यथाशीघ्र अधोहस्ताक्षरी कार्यालय में जमा कराना सुनिश्चित करेंगे ताकि खाता खुलवाकर अंशदान जमा किया जा सके । खाता ससमय नहीं खुलवाने की स्थिति में होने वाले नुकसान के जिम्मेवार वे खुद होंगे ।

Subscriber Registration Form आप (वेबसाइट) [www. https://www.npsra.ndl.co.in/state-forms.php](https://www.npsra.ndl.co.in/state-forms.php) से एवं पटना विश्वविद्यालय के वेबसाइट www.patnauniversity.ac.in से भी डाउनलोड कर सकते हैं ।

आवेदक से आग्रह है कि - (1) Subscriber Registration Form में दिए गए निर्देशों के अनुसार फॉर्म Black Pen (ink) से BLOCK LETTER से विधिवत भरकर निर्दिष्ट स्थान पर फोटो साटकर , नियुक्ति प्रमाण पत्र , योगदान प्रतिवेदन , बैंक पासबुक , Identity proof , Address proof (सभी अनिवार्य प्रमाण पत्र की स्व-अभिप्रमाणित छायाप्रति) के साथ फॉर्म पर हस्ताक्षर कर अपने नियंत्री पदाधिकारी के माध्यम से अधोहस्ताक्षरी कार्यालय में जमा करना सुनिश्चित करेंगे ।

(2) पटना विश्वविद्यालय में कार्यरत वे कर्मी जिनका पूर्व से PRAN है वे (वेबसाइट) www.npsra.ndl.co.in से ISS-1 Form डाउनलोड कर, विधिवत भरकर अपने नियंत्री पदाधिकारी के माध्यम से अधोहस्ताक्षरी कार्यालय में जमा करना सुनिश्चित करेंगे ।

इसे अति आवश्यक समझा जाये ।

विश्वासभाजन

कुलसचिव 09/3/21

पटना विश्वविद्यालय

09/03/21

NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM

Central Recordkeeping Agency (CRA) - NSDL e-Governance Infrastructure Limited

Please select your category [Please tick(✓)]	Central Govt.	<input type="checkbox"/>	State Govt.	<input type="checkbox"/>
	Central Autonomous Body	<input type="checkbox"/>	State Autonomous Body	<input type="checkbox"/>
	All Citizen Model	<input type="checkbox"/>	Corporate Sector	<input type="checkbox"/>
	NPS Lite (GDS)	<input type="checkbox"/>		

Affix
recent photograph of
3.5 cm × 2.5 cm size /
Passport size

To,
National Pension System Trust.
Dear Sir/Madam,
I hereby request that an NPS account be opened in my name as per the particulars given below:

* indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page)
KYC Number, Retirement Adviser Code and Spouse Name fields are not applicable for Government & NPS Lite Subscribers

KYC Number (if applicable)		Generated from Central KYC Registry
Retirement Adviser Code (If applicable)		

1. PERSONAL DETAILS: (Please refer to Sr. No.1 of the instructions)

Name of Applicant in full	Shri <input type="checkbox"/>	Smt. <input type="checkbox"/>	Kumari <input type="checkbox"/>												
First Name*															
Middle Name															
Last Name															
Subscriber's Maiden Name (if any)															
Father's Name*	F	i	r	s	t	M	i	d	d	l	e	L	a	s	t
(Refer Sr. No. 1 of instructions)															
Mother's Name*	F	i	r	s	t	M	i	d	d	l	e	L	a	s	t
(Refer Sr. No. 1 of instructions)															
Father's name will be printed on PRAN card. In case, mother's name to be printed instead of father's name [Please tick (✓)]	<input type="checkbox"/>														
Date of Birth*	d	d	/	m	m	/	y	y	y	y	(Date of Birth should be supported by relevant documentary proof)				
City of Birth*															
Country of Birth*															
Gender* [Please tick (✓)]	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Others <input type="checkbox"/>	Nationality*	Indian <input type="checkbox"/>										
Marital Status*	Married <input type="checkbox"/>	Unmarried <input type="checkbox"/>	Others <input type="checkbox"/>												
Spouse Name*	F	i	r	s	t	M	i	d	d	l	e	L	a	s	t
(Refer Sr. No. 1 of instructions)															
Residential Status*	Indian														

2. PROOF OF IDENTITY (PoI)* (Any one of the documents need to be provided along with the identification number)

Passport		Passport Expiry Date	d	d	/	m	m	/	y	y	y	y		
Voter ID Card		PAN Card												
Driving License		Driving License Expiry Date	d	d	/	m	m	/	y	y	y	y		
NREGA JOB Card														
Others	Name of the ID													
UID (Aadhaar)	<input type="checkbox"/>	(UIDI [Aadhaar] number not required.)												

As per the amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2019, PAN or Form 60 is mandatory under NPS. If you do not have PAN at present, please ensure that these details are provided within six months of submission of this Subscriber Registration Form.

3. PROOF OF ADDRESS (PoA)*

[Please tick (✓), as applicable]	Correspondence Address	Permanent Address
#Not more than 2 months old. Please refer Sr. No. 2 of the instructions	Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others	Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
	Registered Lease/Sale agreement of residence/Municipal Tax Receipt	Registered Lease/Sale agreement of residence/Municipal Tax Receipt
	#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill	#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill

4.1 CORRESPONDENCE ADDRESS DETAILS*

Address Type*	Residential/Business <input type="checkbox"/>	Residential <input type="checkbox"/>	Business <input type="checkbox"/>	Registered Office <input type="checkbox"/>	Unspecified <input type="checkbox"/>
Flat/Room/Door/Block no.	Landmark				
Premises/Building/Village					
Road/Street/Lane					
Area/Locality/Taluk					
City/Town/District	PIN Code				
State/U.T.	C o u n t r y				

4.2 PERMANENT ADDRESS DETAILS*

Tick (✓) in the box in case the address is same as above.

Address Type*	Residential/Business <input type="checkbox"/>	Residential <input type="checkbox"/>	Business <input type="checkbox"/>	Registered Office <input type="checkbox"/>	Unspecified <input type="checkbox"/>
Flat/Room/Door/Block no.	Landmark				
Premises/Building/Village					
Road/Street/Lane					
Area/Locality/Taluk					
City/Town/District	PIN Code				
State/U.T.	C o u n t r y				

(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, Invlts etc.
Specify %					100%	
Choices in Govt sector	Not available		Available	Not available	In case of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only	

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	Choices in Govt sector	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 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC 75		Not available	
LC 50		Available	
LC 25			

11. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 7 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 : Name of subscriber

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)

15. DECLARATION BY THE AGGREGATOR

Applicable to NPS Lite Subscribers

Authorisation by Aggregator's office (NL - AO)

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me byafter (s)he has read the entries/ entries have been read over to her/him by me.

Signature of the Authorised person (In the box above)	Rubber Stamp of the Aggregator (In the box above)

Name of the Aggregator NPS Lite Account Office (NL-AO) Registration Number NPS Lite - Collection Centre (NL - CC) Registration Number Membership No. allotted by Aggregator (if any) Place Date **16. TO BE FILLED BY POP-SP**Receipt No. (17 digits) POP-SP Registration Number Document accepted for date of Birth Proof: Copy of PAN card submitted YES NO KYC Compliance YES NO Documents Received: (Originals Verified) Self Certified (Attested) True CopiesIdentity Verification : Done **Existing Customer:**

I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer The above applicant is having an operative Bank/ Demat/Folio/.....account (specify nature of the account) having account number/client ID.....maintained at.....branch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA Rules. I / We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP)

To be filled by POP-SP		Name:
		Designation: Place:
POP-SP Seal	Signature of Authorized Signatory	Date <input style="width: 100px;" type="text"/>

[To be filled by CRA - Facilitation Centre (CRA-FC)]Received by CRA-FC Registration Number Received at Date Acknowledgement Number (by CRA-FC) PRAN Allotted **ACKNOWLEDGEMENT**Name of the Subscriber: Contribution Amount Remitted: ₹ Date of Receipt of Application and Contribution Amount:

Stamp and Signature of the Employer/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 / Nodal Office.

S. No	Item No.	Item Details	Instructions																																																																
1	1	Personal Details	i. This Form is applicable only for Resident Indians. There is a separate Form for Non Resident Indians & Overseas Citizen of India. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card.																																																																
		Spouse Name	If married, spouse name is mandatory.																																																																
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			11	Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.	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	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water/piped gas bill in the name of the Subscriber / Claimant and showing the address (less than 2 months old)																																																													
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than 2 months old)																																																													
14	Photo Credit card.	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)																																																																
Note:																																																																			
(i) 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.																																																																			
(ii) 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.																																																																			
(iii) The KYC documents may be submitted within a period of 30 days after generation of PRAN. (Only for Government Subscribers)																																																																			
3	6	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	7	Subscriber's Bank Details	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 No. and IFS Code should be submitted.																																																																
5	8	Subscriber's Nomination Details	Nomination details are mandatory. 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	10	Pension Fund (PF) Selection and Investment Option	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. In case a Government employee/subscribers does not exercise the choices of Pension Fund, their contributions will be allocated among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pension Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd.																																																																
7	11	Declaration by subscriber on FATCA Compliance	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India <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 																																																																
8	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/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Impression in case of females.																																																																

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.