

NATIONAL PENSION SYSTEM (NPS) VATSALYA (MINORS) - SUBSCRIBER REGISTRATION FORM

Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.)

To National Pension System Trust, I hereby request that an NPS account be opened in my ward's name as per the particulars given below:

* indicates mandatory fields. Please fill the form in English and BLOCK letters (Refer general guidelines at instructions page).

1. Minor Subscriber Details : (Refer Sr. No. 2&6 of the instructions)

Use Annexure I if name exceeds the space provided below

Subscriber Name*

Date of Birth* DOB Proof* Birth Certificate Passport PAN Matriculation/School Certificate

Gender* Male Female Transgender Nationality*

Minor Bank Account Details (Refer Sr no. 6 of the instructions)

Bank A/c Number

Bank Name IFS Code

2. Selection of Pension Funds and Investment Choice* (Refer Sr No. 7 of the instruction)

Pension Fund* (Please Tick (√) any one)		Investment Choice (Please Tick (√) one)				
<input type="checkbox"/> Aditya Birla Sunlife Pension Mgmt Ltd	<input type="checkbox"/> Axis Pension Fund Management Limited	<input type="checkbox"/> Active Choice mention the % share in applicable asset class below				
<input type="checkbox"/> DSP Pension Fund Managers Private Ltd	<input type="checkbox"/> HDFC Pension Mgmt Co Ltd	<input type="checkbox"/> E (upto 75%)	<input type="checkbox"/> C (Upto 100%)	<input type="checkbox"/> G (Upto 100%)	<input type="checkbox"/> A (Upto 5%)	<input type="checkbox"/> Total
<input type="checkbox"/> ICICI Prudential Pension Funds Mgmt Co Ltd	<input type="checkbox"/> Kotak Mahindra Pension Fund Ltd	<input type="checkbox"/> % Equity	<input type="checkbox"/> % Corp Bonds	<input type="checkbox"/> % Govt. Sec.	<input type="checkbox"/> % Alt. Assets	<input type="checkbox"/> 100%
<input type="checkbox"/> LIC Pension Fund Limited	<input type="checkbox"/> Max Life Pension Fund Mgmt Ltd	OR				
<input type="checkbox"/> SBI Pension Funds Private Limited	<input type="checkbox"/> TATA Pension Management Private Limited	<input type="checkbox"/> Auto Choice Select one life cycle fund below				
<input type="checkbox"/> UTI Retirement Solutions Limited		Conservative (LC25) <input type="checkbox"/> Moderate (LC50) <input type="checkbox"/> Aggressive (LC75) <input type="checkbox"/>				
		(Default)				

* Selection of one Pension Fund is mandatory, else the form is liable to be rejected.

GUARDIAN'S DETAILS**3. Personal Details:** (Refer Sr. No. 2 & 3 of the instructions)

Use Annexure I if name exceeds the space provided below

CKYC Identifier RA Code

Guardian's Name*

Relationship with the minor* Mother Father Legal Guardian

Date of Birth* Place of Birth*

Gender* Male Female Transgender Nationality*

Pan Card* or Form 60 furnished

Annual Income Range* upto 1 lac 1 lac - 5 lac 5 lac - 10 lac 10 lac - 25 lac 25 lac - 1 cr Above 1 Cr

Occupation Details* Public Sector Private Sector Professional Self Employed Homemaker Others

Please Tick if Applicable Politically exposed person Related to Politically exposed person (Please refer instruction no. 1)

Paste recent passport size photograph of the Guardian (3.5 cm × 2.5 cm size)

Do not sign across
Do not staple / clip**4. Proof of Identity and Address*** (Please tick (√) the appropriate box and give details. In case of Aadhaar, give last four digits only)

Passport Driving License Voter ID Card NREGA Job Card National Population Register

Proof of possession of Aadhaar PoP Certificate (refer section 9)

Document / Identification No. Expiry Date

5. Current Address Details* (Proof to be submitted, please refer instruction no. 4)

Line 1

Line 2 V i l l a g e / C i t y

District State/U.T.

Country PIN Code

6. Contact Details*

Mobile* Telephone with STD Code

Email ID*

7. FATCA* (Foreign Account Tax Compliance Act) & CRS Declaration (Refer Sr no. 8 of the instructions) :

I am a tax resident of India and not resident of any other country Yes No (Please fill the annexure - II)

US Person Yes (Please fill the annexure - II) No

8. Declaration by the Guardian* (Refer Sr no. 9 of the instructions)

I have read and understood the terms and conditions of the National Pension System. The information and documents furnished by me for myself and my ward are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to POP / CRA / NPS Trust. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that the contribution paid by me/on my ward's 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 ward's PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Signature / Thumb Impression* of Guardian
 (*LTI in case of males and RTI in case of females to be provided.
 Toe impression in case no hands)

Date
 Place

9. To be filled by the POP

POP Registration Number

POP-SP Registration Number

Receipt Number

Signature of Authorised Person

Rubber Stamp of the POP

Existing Customer: I/we hereby certify/confirm that Mr. / Ms. and his/her guardian are our existing customer. The above subscriber & his/her guardian are having operative Bank/ Demat/ Folio / account (specify nature of the account) with account number /client ID & The KYC documents of the guardian and DOB proof of the subscriber are available with us which matches the requirement for opening the said account and are in compliance with PMLA Rules. I/We further confirm that the said a/c of the guardian is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP).

Name of the Authorised Person

Designation of the Authorised Person

Date Place

ANNEXURES TO THE MINOR SUBSCRIBER REGISTRATION FORM

Annexure I - If characters of name exceeded the space provided

Subscriber's First Name

Middle Name

Last Name

Guardian's First Name

Middle Name

Last Name

Annexure II - FATCA (Foreign Account Tax Compliance Act) & CRS Declaration (Refer Sr no. 8 of the instructions):

Father's Name

Country of Birth Place & City of Birth

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)	ddmmyyyy	ddmmyyyy	ddmmyyyy

I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete and hereby accept the same.

Signature / Thumb Impression* of Guardian
 (refer instruction 9)

Acknowledgement

Name of the Subscriber:

Application Receipt Date: Initial contribution amount

Mode of Payment Cheque / DD Debit Instruction Cash

Signature and Stamp POP

INSTRUCTIONS FOR FILLING THE MINOR SUBSCRIBER REGISTRATION FORM

General Guidelines

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected.
- (b) Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed/ stamped by the PoP/PoP-SP office.
- (d) Initial contribution amount is Rs. 1000/- for opening NPS account.

Sr.	Heading	Instruction
1	PRAN Card and Kit	The english e-PRAN card and welcome kit would be sent to the applicant vide email. In case the applicant wish to have a physical or hindi PRAN Card / welcome kit, special request may be sent to the POP / CRA. Higher charges may be applicable on such requests.
2	Subscriber's / Guardian's Name	(a) Guardian's Name should match with the PAN. (b) If the name has more than 30 characters, please fill Annexure II for the same.
3	Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions such as 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	Proof of Identity and Address	If the guardian is submitting Aadhaar as proof of Identity and Address, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
5	Current Address	Providing current address is mandatory. The submitted address proof should contain the current address as provided in the form.
6	DOB and Bank Account	(a) DoB proof is mandatory. (b) If bank account details are provided, please provide saving bank account details of minor or joint with guardian.
7	Investment Choices	(a) Selection of one Pension fund is mandatory, else the form is liable to be rejected. (b) Moderate LC50 (Default): 50% allocation into Equity; (c) Conservative LC25: 25% allocation into equity; (c) Aggressive LC75: 75% allocation into equity (d) Active Choice: Subscriber can actively decide the allocation into Equity / Corporate Debt / G-Sec / Alternate assets.
8	FATCA & CRS Declaration	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) • 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. • In case applicant is declaring US person status as 'Yes', provide FATCA declaration as per Annexures II.
9	Declaration / Signature by the Guardian	In case the guardian is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the authorised official of PoP attesting the same under his/her official seal and stamp.

Applicable CRA Charges (Excluding taxes)	Protean CRA
Account Opening Charges	₹ 18
Account Maintenance Charges (p.a.)	₹ 69
Charge per transaction	₹ 3.75

For more details on CRA charges, please refer
NPS Trust website (www.npstrust.org.in)

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and respective Point of Presence (PoP).
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by PoP/PoP-SP 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)
 Protean eGov Technologies Limited
 (formerly NSDL e-Governance Infrastructure Limited)
 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
 Lower Parel (W), Mumbai - 400013

