

ATAL PENSION YOJANA (APY) (Administered by Pension Fund Regulatory and Development Authority)

SUBSCRIBER REGISTRATION FORM

To The Branch Manager/ Of Dear Sir/Madam,	ficer In-Charge,	Branch, The M	ehsana Urban Co-Ope	erative Bank Ltd.				
I hereby request that an APY account be opened in my name under National Pension System (NPS) as per the particulars given below:								
* Indicates mandatory fields. Please fill the form in English and BLOCK letters								
1. BANK DETAILS:								
Bank A/c Number*								
Bank Name*	Bank Name* The Mehsana Urban Co-Operative Bank Ltd. Bank Branch*							
2. PERSONAL DETA	LS:							
Name of Applicant		mt. Kumari	PAN					
Full Name*								
Date of Birth*	d d / m m / y y y y	Age	Mobile No					
Email ID			Aadhaar*					
Married	Yes No If married, Spou	use name is mandatory. Spouse w	rill be the default nominee	under APY				
Name of Spouse			Aadhaar					
Nominee's Name*			Aadhaar					
Nominee's relations	hip with the subscriber							
Additional Details	in case nominee is a Minor							
Date of Birth*	d d / m m / y y y y							
Guardian's Name*								
	of other statutory social security scheme	es (PF) Yes No						
Whether Income Ta	x Payer (ITD)	Yes No						
Is FATCA/CRS* app		Yes No						
	cable for US Persons/Tax Residents other renship / Country of Residence for Tax Pur			nitted if you are an US person or your Country				
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3. PENSION DETAILS	3. PENSION DETAILS							
Frequency of Contribution (Please tick(√)) * Monthly Quarterly Half Yearly								
Frequency of Contributio	n (Please tick(√)) * Monthly	Qı	uarterly	Half Yearly				
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*Atal Pension Yojana has now been included under the Section 7 of the Aadhaar (Targeted Delivery of Financial and Other Subsidies, Benefits and Services) Act 2016. As per the provisions of the act, any individual who is eligible to receive benefits under the scheme will have to furnish proof of possession of Aadhaar number or undergo enrolment under Aadhaar authentication. All new APY registrations will have to comply with the above directives.

Self-Certification for Individual - FATCA/CRS Declaration Form

Name of Subscriber:

FATCA/CRS Declaration Form						
Par	Part I- Please fill in the country for each of the following:					
1	Country of:					
a)	Birth					
b)	Citizenship					
c)	Residence for Tax Purposes					
2	US Person (Yes / No)					
Par	t II- Please note:					
	person status, please proceed to Part l	entioned by you is India and if you do not have US III for signature.				
b.	if for any of the above field, the cour	ntry mentioned by you is not India and/or if your US				
b.	person status is Yes, please provid	ntry mentioned by you is not India and/or if your US le the Tax Payer Identification Number (TIN) or specific country in the table below:				
b.		de the Tax Payer Identification Number (TIN) or				
	person status is Yes, please provio functional equivalent as issued in the	de the Tax Payer Identification Number (TIN) or				
	person status is Yes, please provious functional equivalent as issued in the STIN	de the Tax Payer Identification Number (TIN) or				
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i)	person status is Yes, please provide functional equivalent as issued in the state of TIN Country of Issue TIN	de the Tax Payer Identification Number (TIN) or				
i) ii)	person status is Yes, please provide functional equivalent as issued in the state of TIN Country of Issue TIN Country of Issue	de the Tax Payer Identification Number (TIN) or				

	atus as 'No' but your Country of Birth is US, please quishment of Citizenship. If not available provide having relinquishment certificate				
Please also fill Part IV Self-Certificate	ion.				
Part III- Customer Declaration (Applicable for all customers)					
States of America ("U.S.") or an including the District of Columb income of which is subject to U. thereof. (This clause is applicate person) 2. The applicant is an applicant tax	that: taxable as a US person under the laws of the United y state or political subdivision thereof or therein, ia or any other states of the U.S., (ii) an estate the S. federal income tax regardless of the source ble only if the account holder is identified as a US able as a tax resident under the laws of country plicable only if the account holder Is a tax				
 (ii) I/We understand that the NPS Trust is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. The NPS Trust is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions. (iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect. (iv) I/We agree that as may be required by domestic regulators/tax authorities the NPS Trust may also be required to report, reportable details to CBDT or close or suspend my account. (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the 					
 (vi) I/We permit/authorise NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by NPS Trust and any of its affiliates 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. (vii) I / We hereby accept and acknowledge that 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 / us to NPS Trust. (viii) I/We shall indemnify NPS Trust for any loss that may arise to NPS Trust on account of providing incorrect or incomplete information. 					
Signature :					
Name:					
Date (DD/MM/YYYY):					

To be filled only if-						
(a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or						
(b) US person is mentioned as Yes in Part I, and TIN is not available						
I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.		Si	gnature			
Document Proof submitted (Pls tick document being submitted)						
☐ Passport	☐ Election Id	d Card	☐ PAN Card			
☐ Driving License	☐ UIDAI Le	etter	☐ NREGA Job Card			
Govt. Issued ID Card						

Part IV- Self-Certification: