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Request For Change/Correction in Subscribe (To avoid mistake(s), please read the ac	er Master details And/Or Reissue of I-Pin/T-Pin/PRAN Card ecompanying instructions carefully before filling up the form)				
For DDO Use:	For PAO use:				
Date of Receipt:	Date of Receipt : PAO Stamp:				
	Entered By : Date:				
Signature and Stamp of DDO	Verified By: Date:				
Acknowledgement No. (To be filled by PAO as generated by NPSCAN system)					
I hereby request for the following details for the change. (Please ticl	s)				
A) Changes or Correction in Personal details C) Reissue of T Pin or I PIN					
B) Changes or corrections in Nomination Details	D) Reissue of PRAN Card				
Permanent Retirement Account Number *:					
I hereby submit the following details of change. (Please tick the box the details in the corresponding rows.)	on left margin of appropriate row where change/correction is required and provide				
	Andrew Esta				
Section A – Change in Personal Details (* Indicates M	Mandatory Field)				
1. Full Name (Full expanded name : initials are not permitted) Please Tick as applicable, Shri	Smt . Kumari				
First Name *					
Middle Name					
Last Name *					
2. PAN No.					
3. Father's Full Name: First Name *					
Middle Name					
Last Name *					
Would you like to have a reprint of the card on account of chang	es in point 1 or 3 (Please tick) Yes No				
4. Present Address:	point I of 5 (Freude den)				
Flat/Unit No, Block no. *					
Name of Premise/Building/Village					
Area/Locality/Taluka					
District/Town/City *					
State / Union Territory *					
Country *					
Pin Code *					
5. Permanent Address: If same as above, Please Tick Flat/Unit No, Block no. *	else,				
Name of Premise/Building/Village					
Area/Locality/Taluka					
District/Town/City *					

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State / Union Territory *						
Country *				7		
Pin Code *						
6. Phone No. (STD code)		Phone No.				
7. Mobile No.						
0 Family ID						
8. Email ID]		
9. Subscribers Bank Details: Savings A/c Current A/c Bank A/c Number *						
Bank Name *						
Bank Branch *				<u> </u>		
Bank Address *						
Pin Code *						
Bank MICR Code		(Wherever application)	cable)			
10. Value Added Service	i) SMS Alert	Yes No				
	ii) Email Alert:	Yes No				
Section B - Subscriber's Nomin						
		neo mandatory riora for non	,			
1. Name of the Nominee *: 1st Nominee		2nd Nominee	3rd Nominee			
First Name *	First Name *	Ziid i toliililee	First Name *			
Middle Name	Middle Name					
Windie Name	Wildle Name		Widdle Name			
Last Name *	Last Name *		Last Name *			
				+		
2. Date of Birth (In case of minor)*:						
1st Nominee	2nd Nominee		3rd Nominee			
3. Relationship with the Nominee*:						
1st Nominee	2nd Nominee		3rd Nominee			
4. Percentage Share *: 1st Nominee	% 2nd Nominee		% 3rd Nominee	%		
	- I - I - I					
5. Nominee's Guardian Details (in case of min 1st Nominee's Guardian Details	2nd Nominee's	Guardian Details	3rd Nominee's Guardian Details			
First Name *			First Name *			
	First Name *			, ,		
	First Name *			+		
Middle Name	First Name * Middle Name		Middle Name			
			Middle Name			
Middle Name	Middle Name					
			Middle Name Last Name *			

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. Conditions rendering nomination invalid:	
1st Nominee 2nd Nominee 3rd Nomin	nee
Section C –Request for Reissue of I-PIN/T-PIN I hereby, request you to reissue the following	
T-PIN I-PIN	
Section D –Request for Reissue of PRAN card.	
I hereby request for reissue of PRAN card on account of	
Loss of PRAN card Damage to old card	
I, the applicant, do hereby declare that what is stated above is true to the best of my information & belief. Date:	
D D M M Y Y Y Y	Signature/Left Thumb Impression of Subscriber

INSTRUCTIONS FOR FILLING FORM

- 1. This form is to be used for the purpose of change/correction in subscriber personal details, nominee details, reissue of I-Pin /T-Pin or reissue of PRAN card.
- 2. The form is to be submitted at the Nodal office for carrying out the necessary changes
- 3. Please tick the box on the left margin of appropriate row where change/correction is required' and provide the details in the corresponding row. Please strike off the remaining blank rows for which no change is requested.
- 4. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- 5. Details Marked with (*) are the mandatory fields.
- 6. Mention 12 digits PRAN correctly.
- 7. All Dates Should be in "DDMMYYYY" Format
- 8. If permanent address & present address is are different, all future communications will be sent to present address.
- 9. **Nomination:** Subscriber can nominate maximum 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, nomination will be rejected.

10. Reissue of T-Pin, I-Pin and reissue of PRAN card will be chargeable by the CRA.