

### Composite Declaration Form -11

(To be retained by the employer for future reference)

#### EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	RAHUL KUMARRAMPAL SINGH						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	RAMPAL SINGH						
3.	Date of Birth: (DD/MM/YYYY)	24.09.1992						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	05.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
	(d) Permanent Account Number (PAN), if available							
9.	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

**UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

- Have not been uploaded.
- Have been uploaded but not approved
- Have been uploaded and approved with DSC

C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

- The KYC details of the above member In the UAN database have been approved with Digital Signature Certificate and transfer request has been generated on portal.
- The Previous Account of the member is not Aadhar verified and hence physical transfer form shall be initiated.

Date:

Signature of Employer with Seal of Establishment

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1 Auto Transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.

### Composite Declaration Form -11

(To be retained by the employer for future reference)

#### EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	VIKAS CHANDSHYAMACHARAN						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	SHYAMACHARAN						
3.	Date of Birth: (DD/MM/YYYY)	10.05.1990						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	06.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
9.	(d) Permanent Account Number (PAN), if available							
	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

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- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

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C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

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Date:

Signature of Employer with Seal of Establishment

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1 Auto Transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.

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(To be retained by the employer for future reference)

#### EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	VIJAY BADANARAJBIR SINGH						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	RAJBIR SINGH						
3.	Date of Birth: (DD/MM/YYYY)	04.01.1997						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	06.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
9.	(d) Permanent Account Number (PAN), if available							
	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

**UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member



**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

- Have not been uploaded.
- Have been uploaded but not approved
- Have been uploaded and approved with DSC

C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

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Date:

Signature of Employer with Seal of Establishment

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#### EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	ANNU SINGHSGHRWAN SINGH						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	SGHRWAN SINGH						
3.	Date of Birth: (DD/MM/YYYY)	02.10.1997						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	08.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
	(d) Permanent Account Number (PAN), if available							
9.	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

**UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

- Have not been uploaded.
- Have been uploaded but not approved
- Have been uploaded and approved with DSC

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Signature of Employer with Seal of Establishment

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**EMPLOYEES' PROVIDENT FUND ORGANISATION**

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	SHIVAM PANWARRAJU PANWAR
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	RAJU PANWAR
3.	Date of Birth: (DD/MM/YYYY)	18.05.1995
4.	Gender: (Male / Female /Transgender)	Male
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)	
6.	(a) Email ID:	
	(b) Mobile No:	
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	09.10.2022
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)	
	(a) Bank Account No.:	
	(b) IFS Code of the branch:	
	(c) AADHAR Number	
	(d) Permanent Account Number (PAN), if available	
9.	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)	
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)	

11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

12.	Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts						
	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

### **UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

Have not been uploaded.

Have been uploaded but not approved

Have been uploaded and approved with DSC

C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

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The Previous Account of the member is not Aadhar verified and hence physical transfer form shall be initiated.

Date:

Signature of Employer with Seal of Establishment

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1 Auto Transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.

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**EMPLOYEES' PROVIDENT FUND ORGANISATION**

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	SUBHASH KASHYAPRAM KHILADI
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	RAM KHILADI
3.	Date of Birth: (DD/MM/YYYY)	15.04.1995
4.	Gender: (Male / Female /Transgender)	Male
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)	
6.	(a) Email ID:	
	(b) Mobile No:	
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	09.10.2022
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)	
	(a) Bank Account No.:	
	(b) IFS Code of the branch:	
	(c) AADHAR Number	
	(d) Permanent Account Number (PAN), if available	
9.	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)	
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)	



11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

12.	Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts						
	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

### **UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

Have not been uploaded.

Have been uploaded but not approved

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Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	AJAY KUMARMUKESH KUMAR						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	MUKESH KUMAR						
3.	Date of Birth: (DD/MM/YYYY)	10.05.2002						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	13.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
	(d) Permanent Account Number (PAN), if available							
9.	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
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**UNDERTAKING**

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Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

- Have not been uploaded.
- Have been uploaded but not approved
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Signature of Employer with Seal of Establishment

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(To be retained by the employer for future reference)

#### EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 and 57) and

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1.	Name of the Member	ROHITRAJ SINGH						
2.	Father's Name <input type="checkbox"/> (or) Spouse Name <input type="checkbox"/> (Please Tick Appropriate Option)	RAJ SINGH						
3.	Date of Birth: (DD/MM/YYYY)	18.12.2000						
4.	Gender: (Male / Female /Transgender)	Male						
5.	Marital Status: (Married/ Unmarried/Widow/ Widower/ Divorcee)							
6.	(a) Email ID:							
	(b) Mobile No:							
7.	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)	13.10.2022						
8.	<b>KYC Details:</b> (attach self-attested copies of following KYCs)							
	(a) Bank Account No.:							
	(b) IFS Code of the branch:							
	(c) AADHAR Number							
9.	(d) Permanent Account Number (PAN), if available							
	Whether earlier a member of Employees' Provident Fund Scheme,1952 (Yes/No)							
10.	Whether earlier a member of Employees' Pension Scheme, 1995 (Yes/No)							
11.	Previous employment details: (if Yes to 9 AND/OR 10 above I - Un-exempted)							
	Establishment Name and Address	Universal Account Number	PF Account Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non-Contributory Period (NCP) Days

Previous employment details: (if Yes to 9 AND/OR 10 above) - For Exempted Trusts							
12.	Name and Address of the Trust	UAN	Member EPS A/c Number	Date of Joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non-Contributory Period (NCP) Days
13.	(a) International Worker: (Yes/No)						
	(b) If yes, state country of origin (India/Name of other country)						
	(c) Passport No.						
	(d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]						

**UNDERTAKING**

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification / authentication/ e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.<sup>1</sup>
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:

Place:

Signature of Member

**DECLARATION BY PRESENT EMPLOYER**

A. The member Mr. /Ms. /Mrs..... has joined on.....and has been allotted PF Number.....and UAN.....

B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

The KYC details of the above member in the UAN database

- Have not been uploaded.
- Have been uploaded but not approved
- Have been uploaded and approved with DSC

C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

- Please Tick the Appropriate Option:

- The KYC details of the above member In the UAN database have been approved with Digital Signature Certificate and transfer request has been generated on portal.
- The Previous Account of the member is not Aadhar verified and hence physical transfer form shall be initiated.

Date:

Signature of Employer with Seal of Establishment

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1 Auto Transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.