

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

SUBSCRIBER REGISTRATION FORM

To The	Branch Manager/Officer, <u>Th</u>	HE AHMEDABAD ME	RCANTILE CO-OPERAT	TIVE BANK I	<u>LTD</u>	-			Bran	ich,
Dear Sir/Madam,										
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:										
В	Bank A/c Number*									
В	ank Name*				Ва	ank Branch*				
2. PE	2. PERSONAL DETAILS:									
N	ame of Applicant in full*	Shri	Smt. Kun	nari 🔃						
Fu	ıll Name*									
D	ate of Birth*	<u> </u>	y y Age		Mobile No					
Eı	nail ID				Aadha	aar*				
М	arried Yes	No If marri	ed , spouse name is ma	andatory. Spo	ouse will l	be the defa	ult nom	inee under	APY.	
N	ame of Spouse				Aadh	naar				
N	ominee's Name*				Aadh	aar				
N	ominee's relationship with th	ne subscriber								
A	dditional Details in case n	ominee is a Minor								
D	ate of Birth*	/ m m / y y	уу							
G	uardian's Name*									
W	hether beneficiary of other s	statutory social securi	y schemes Yes	No]					
W	hether Income Tax Payer		Yes	No]					
Is	FATCA/CRS* applicable \$		Yes	No						
	FATCA/CRS is applicable for US th / Country of Citizenship / Cou				orm needs t	to be submitte	d if you a	re an US pers	on or your (Country of
3. PE	NSION DETAILS									
F	requency of Contribution (Plea	setick(√))* Monthly		Quarte	erly			Half Yearly		
F	ension Amount (Please tick		2000	300	, ,	400			5000	
	Contribution Amount	,,,	I hereby authoria	ze the bank to	debit my ab	ove mentione	ed bank a	ccount till the	age of 60 fo	
	(in Rs.)		payment under the transaction							
L	(To be filled by the Ban	ık)	responsible. I als	so undertake to	deposit the	additional am	ount toge	ther with over	due interest	thereon.
Declaration & Authorization by all subscribers I meet the prescribed eligibility criteria for assistance under APY and I have read and understood the terms and conditions of the Scheme. I hereby agree to the same and declare that the information furnished by me is true and correct, to the best of my knowledge and belief. I undertake to immediately inform the bank of any change in the above information furnished by me. Further, I do not hold any pre-existing account under APY. I understand that I shall be fully liable for submission of any false or incorrect information or documents. I have read/been explained and have understood the APY guidelines. I further agree to be bound by the terms and conditions of provision of services under the										
scheme as approved by PFRDA/Govt. of India. I hereby authorize PFRDA to use my Aadhaar details for APY and authenticate my identity through the Aadhaar Authentication system in accordance with the provisions of the Aadhaar (Targeted Delivery of Financial and other subsidies, Benefits and Services) Act, 2016 and rules and regulations notified thereunder. I have been given to understand that my information submitted to PFRDA herewith shall not be used for any other purpose other than mentioned above, or as per requirement of law.										
Date	d d / m m /		Signature/Thumb Impre							
Place			* LTI in case of male and	RTI in case	of female)					
	ACKNOWI	FDGFMFNT - SUI	SCRIBER REGISTRA	ATION FOR	Ρ ΔΤΔΙ Ε	PENSION	ΥΟ.ΙΔΝ	Δ (ΔΡΥ)		
	Admitain	EDOLINENT OO	(To be filled by		(AIALI	LIVOIOIV	OUAI	IA (AI 1)		
Name	of the Subscriber:									
PRAN Number										
Guaranteed Pension Amount Periodicity of Contribution										
Contribution Amount under APY (in Rs.)										
Nam	e of the Bank:	T	-	Ī						
-	Branch:	+								
-										
	eiving Officer's Name:	1				Stamp and	l Sianet	ure of the I	Rank	
Date	of Receipt of Application:			[Junip and	a Gigilal	are or tile i	Jank	

*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.

BRIEF OF ATAL PENSION YOJANA

- The Government of India is concerned about the old age income security of the working poor and is focused on encouraging and enabling them to save for their retirement. To address the longevity risks among the workers in unorganized sector and to encourage the workers in unorganized sector to voluntarily save for their retirement.
- The GOI has therefore announced a new scheme called Atal Pension Yojana (APY) in 2015-16 budget. The APY is focused on all citizens in the unorganized sector.
- The scheme is administered by the Pension Fund Regulatory and Development Authority (PFRDA) through NPS architecture.

HIGHLIGHTS OF ATAL PENSION YOJANA

- Under the APY, there is guaranteed minimum monthly pension for the subscribers ranging between Rs.1000 and Rs.5000 per month.
- The benefit for minimum pension would be guaranteed by the GOI.
- All bank account holders may join APY.

Eligibility

 APY is applicable to all citizen of India aged between 18-40 years.

Aadhar will be the primary KYC. Aadhar and mobile number are recommended to be obtained from subscribers for the case of operation of the scheme. If not available at the time of registration. Aadhar details may also be submitted later stage.

Charges for default

Banks are required to collect additional amount for delayed payments, such amount will vary from minimum Rs. 1 per month to Rs.10 per month as shown below:

- Rs.1 per month for contribution up to Rs.100/-per month.
- Rs.2 per month for contribution between Rs.101/to 500/- per month.
- Rs.5 per month for contribution between Rs.501/- to 1000/- per month.
- Rs.10 per month for contribution beyond
 Rs.1001/- per month.

The fixed amount of interest / penalty will remain as part of the pension corpus of the subscriber.

Important information for subscriber:

Discontinuation of payments of contribution amount shall lead to following:

- After 6 months account will be frozen.
- After 12 months account will be deactivated.
- After 24 months account will be closed.

Subscriber should ensure that the Bank account to be funded enough for auto debit of contribution amount.

Exit:

On attaining the age of 60 years:

The exit from APY is permitted at the age with 100% annuitisation of pension wealth. On exit, pension would be available to the subscriber.

In case of death of the subscriber due to any cause:

In case of death of subscriber pension would be available to the spouse and on the death of both of them (subscriber and spouse), the pension corpus would be returned to his nominee.

Exit before the age of 60 years:

Exit before 60 years of age is not permitted however it is permitted only in exceptional circumstances, i.e., in the event of the death of beneficiary of terminal disease.

Self-Certification for Individual - FATCA/CRS Declaration Form

Permanent Retirement Account Number (PRAN):

Name of Subscriber:

Date of Birth:						
FATCA/CRS Declaration Form						
Part	I- Please fill in the country for each or	f the following:				
1	Country of:					
a)	Birth					
b)	Citizenship					
c)	Residence for Tax Purposes					
2	US Person (Yes / No)					
 Part II- Please note: a. If in all fields above, the country mentioned by you is India and if you do not have US person status, please proceed to Part III for signature. b. if for any of the above field, the country mentioned by you is not India and/or if your US person status is Yes, please provide the Tax Payer Identification Number (TIN) or functional equivalent as issued in the specific country in the table below: i) TIN 						
ii)	Country of Issue TIN					
	Country of Issue					
iii)	TIN					
	Country of Issue					
a. In case any of the parameters in Part I indicates that you are a US person or a person resident outside of India for tax purpose and you do not have Taxpayer Identification Numbers/functional equivalent, please complete and sign the Self-Certification section given in Part IV .						

pı	b. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reasons for not having relinquishment certificate						
Please also fill Part IV Self-Certification.							
Part I	Part III- Customer Declaration (Applicable for all customers)						
(i) ¹	Inder penalty of perjury, I/we certify that: 1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)						
	2. The applicant is an applicant taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the account holder Is a tax resident outside of India)						
(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 taxpayer identification number of the applicant.						
(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.						
Signa	ture:						
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. Signature			Signature			
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: