

## હિસાબ નિયામકશ્રીની કચેરી નવસારી કૃષિ યુનિવર્સિટી નવસારી

(NPS) નવા CSRF (VER 1.4) ફોર્મમાં દરખાસ્ત કરવા બાબત..

# ઃ પરિપત્ર ઃ

આથી નવસારી કૃષિ યુનિવર્સિટી, નવસારીના તમામ કચેરીના વડાશ્રીઓને જણાવવાનું કે, 0૧.૦૪.૨૦૦૫ પછી નવી નિમણુંક પામીને યુનિવર્સિટીની સેવામાં દાખલ થતા તમામ અધિકારીશ્રીઓ/કર્મચારીશ્રીઓને સરકારશ્રીની નવી વર્ધિત પેન્શન યોજના (NPS) લાગુ પડતી હોય, આ યુનિવર્સિટીમાં તા. ૦૧.૦૪.૨૦૦૫ પછી નવી નિમણુંક પામેલ અધિકારીશ્રીઓ/કર્મચારીશ્રીઓના નિયમિત પગાર ધોરણના હુકમો થયા બાદ સામેલ નવા CSRF (VER 1.4) ફોર્મની દરખાસ્ત આ કચેરીને અચુક રજુ કરી આપવાની રહશે. જેથી તેઓના ખાતા ખોલાવવા અંગેની કાર્યવાહી સમયસર થઈ શકે.

નિયત સમય મર્યાદા બાદ વિલંબથી મોકલેલ દરખાસ્તના કારણે ખાતા ખોલાવવામાં વિલંબ થશે અને જે કાંઈ પ્રશ્નો ઉપસ્થિત થશે, તો તેની જવાબદારી જે તે કચેરીના વડાશ્રીની રહશે. જે જાણ સારૂ.

જા.નં./નકૃયુહિ.નિ./NPS/ ૪૭૨૫ તા. ૨૮૧૮/૧૯ હિ<del>સાબ નિ</del>યામક

નકલ જયભારત સાથ રવાના :

આ યુનિવર્સિટીના તમામ નાંણા ઉપાડ અને ચુકવણાં અધિકારીશ્રીઓ તરફ અમલ થવા સારૂ.

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(iii) ACTIVE CHOICE - ASSET ALLOCATION	Ito he filled up only in case you have color	tod (Active Chains) the investment aution
(III) NOTITE OFFICIAL ACCOUNTING	to be lined up offly in case you have select	ted Active Unoice the investment option

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Government Bonds and related instruments; Asset Class A-Alternative Investment Funds
Specify %					100%	including instruments like CMBS, MBS, REITS, AIFs, Invits etc.
Choices in Govt sector	Not ava	ilable	Available	Not available	In case	of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only

#### Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- 3. The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

## (iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.

Life Cycle (LC) Funds	Please Tick (✓) Only One	Choices in Govt sector
LC 75		Not available
LC 50	Annia	A
LC 25	Contract of the Contract of th	Available

Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset

3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset

4. Govt. employee can exercice Auto Choice of Asset Allocation for LC 25 & LC 50 only

11. DECLARATION ON FATCA* (Foreign A	ccount Tax Complianc	e Act) COMPLIANC	E (Please refer to Sr no. 7 of the instr	uctions):
Section I*				
US Person* Yes No	-			
Section II*				
For the purposes of taxation, I am a resident out below or I have indicated that a TIN/function	in the following countrie	es and my Tax Identific ailable (kindly fill deta	cation Number (TIN)/functional edits of all countries of tax residence	quivalent in each country is set to if more than one):
Particulars	A Commence of the Commence of	Country (1)	Country (2)	Country (3)
Country/countries of tax residency	The state of the s			
	Address Line 1			
Address in the jurisdiction for Tax	City/Town/Village			
Residence	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional	equivalent Number			Manufacture de acusta de carbonos como arrespondo como corda coloque Proprio acusto da desegnaciones de carbonos de contracto en describer de contracto de contra
TIN/ Functional equivalent Number Issuing	Country			
Validity of documentary evidence provided (W	/herever applicable)	6d I bm I yyyy	dá <b>l</b> mer lyvy	dd I sam I yeyy
"I certify that: a) It shall be my responsibility to educate myse Rules 114F to 114H of the Income tax Rules b) the information provided by me in the Form, correct and complete and that I have not with or otherwise. c) I permit/authorise the NPS Trust to collect, and any of NPS intermediaries wherever sit confidential information for compliance with I undertake the responsibility to declare and the Form, its supporting Annexures as well certification along with documentary evidence) I also agree that in case of my failure to discidesignated by the Government of India (GOI deficiency is not remedied by me within the story of the confirming the information provided by mg) I also agree to furnish such information and abroad in the subject matter herein. h) I shall indemnify NPS Trust for any loss that	, 1962 thereunder and the its supporting Annexures wheld any material informations, communicate and puated including sharing, to any law or regulation where the including sharing to as in the documentary events, lose any material fact known (NRBI/IRDA/PFRDA for the stipulated period. PS Trust shall have the rige to the NPS Trust //or documents as the NP	a information provided as well as in the docur tion that may affect the process information related and disclosure ther domestic or foreign from the date of changidence provided by me wento me, now or in fut the purpose or take any ght and authority to carress.	in the Form is in accordance with the mentary evidence are, to the best of assessment/categorization of the atting to the Account and all transabetween them and to the authorition.  The control of the account and the authorition and the authorition are any changes that may take place or if any certification becomes incourse, the NPS Trust may report to another action as may be deemed appropriate out investigations from the informal time to time on account of any	ne aforesaid rules, of my knowledge and belief, true, account as a Reportable account ctions therein, by the NPS Trust es in and/or outside India of any be in the information provided in correct and to provide fresh self-my regulator and/or any authority propriate by the NPS Trust if the nation available in public domain change in law either in India or
	-	hazanazaran		
Date 6 6 1 m m 1 y y y	V V			
Place:		Transfer de la constant de la consta	Signature/Thumb Impression	
Name of subscriber	1	e deservation dese	(* LTI in case of male and	KITIN case of females)
THE OF SUDSVIEWS				

12. DECLARATION BY SUBSCRIBER* (Pisses net by 50° no. 2 of the internations) Declaration & Authorisation by all subscribers I have read and understood the terms and conditions of the National Persists System and Horsely agree to the same along with the PPEDAAC, regulations Famulal thereon and colicitions of internations and connections of the internation and connections of the internation and connections that includes the Central Authorities to inform immediately the Central Centra					925085040866		10000000000	dia Autoro de d		EMELINE CO	Che di Mario No	nicination rec		t ellergessetene		WWW.c.t-cuin						assi dalah		
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I futfire agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any mannerment thereof as approved by PFRDA, wickled complete or small without any new declaration being furnished by mil. I shall be bound by the terms and conditions for the usage of LPRN (to access CRA webstea and we declared by EFRDA. without official by LPRNA (to access CRA webstea and we declared by EFRDA. without official by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and we declared by LPRNA (to access CRA webstea and webstea) (to access CRA webstea)	Record Keeping Agency/National Pe	documer ension Sy	nts furnish ystem Tru	ed by st, of	me an any ch	e true nange	and o	correct e abo	t, to th	e best	of my	know	vledae	and b	pelief	Luni	dertal	ce to	infor	m imr	nedia	ately	the C	Centra
Declaration under the Prevention of Money Laundering Act, 2022  I hereby decire that the contribution gold by mole on yellow flax be been derived from legably declared and assessed sources of income. I understand that NPS Trust has the right to glosse my PRAN in case I as found violating be provisions of any my installing to prevention of money laundering.  Date	I further agree to be bound by the te complete or partial without any new d	erms and	condition	s of pr	ovisio	n of s	ervice	s by	CRA,	rom ti	ime to	time	and a	ny am s for th	endn ne us	nent t	hered	of as N (to	appi acc	roved ess C	by P	FRD	A, w	hethe
I hereby declare that the contribution paid by medion my behalf has been derived from legally declared and assessed sources of incomic. I understand than NRS from the right to premy financial profice of a three this financian, with other powerms authorities. I further agree that NRS from the site right to close my PRAN in case I as found visiting the provisions of any law relating to prevention of money journeling.  Date   I   I   I   I   I   I   I   I   I		of Money	, I aunde	ring A	~+ 200	13																		
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Signature/Thumb Impression* of Subscriber in black ink (*LTI in case of male and RTI in case of females)   13. DECLARATION BY EMPLOYER   Applicable to Government Subscribers only (Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory)   Date of Joining			y y								objectivation bear laterated pro-	*		mengentian et dentical month.	ni estanujuu saa	Principle of the Control of the Cont	MUNICIPIE DE PRESIDENT					U.		pminut hyddiniad husbarnin, bod
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15. DECLARATION BY THE AGGREGA	ATOR			
	Applicable to NPS	Lite Sub	scribers	
Authorisation by Aggregator's offic	e (NL - AO)			
Certified that the subscriber is registered	ed with the aggregator and he/she has	s opted to j	oin NPS, I hereby	declare that the subscriber is eligible to join NPS
and the above declaration has been si	gned /thumb impressed before me by	·		after (s)he has read the entries/ entries have
been read over to her/him by me.				
BANGGALA				
Signature of the Authorised	person (In the box above)		Rubber Stamp of	the Aggregator (in the box above)
Name of the Aggregator		1		
NPS Lite Account Office (NL-AO) Registration	on Number NDS	El ita Callas	tion Centre (NL - CC) R	
Membership No. allotted by Aggregator (if a	have considered and the consideration of the consid	Lite - Collec	uon centre (NL - CC) R	egistration Number
Place Place			Statement Statem	
riace	Date of at / or to / y		30 consequence (100 con	
16. TO BE FILLED BY POP-SP				
Receipt No. (17 digits)		TTT	POP SP Pogir	stration Number
International In			r Or -Or Negis	suation Number
Document accepted for date of Birth P	roof:			
Copy of PAN card submitted YES	bearing but the second	'C Complia	ance YES	NO
	(Originals Verified) Self Certified	(Atteste	d) True Copies	
Augitoria constitui que esta de la constitui d	Done			
Existing Customer:	. 11.2			
The above applicant is having an one	nt/Kum		agust /anglifu na	is an existing KYC verified customer, ture of the account) having account number/
cilent iD maintaine	ed at branch/off	ice. The K	YC documents ava	illable with us for this customer/client matches
the requirement for opening NPS acc	ount and are in compliance with PML	A Rules.		
Bank Deposit Account (applicable in ca	ase of Bank PoP).	***************************************		is not a 'Basic Savings
Adhaar Based KYC Certificate:				
I/we hereby certify that Aadhaar Numb	perof Sh/Smt/	/Kum		has been checked and the name
and address mentioned on the original	Additional card are matching with that	mentione	d on NPS applicati	on form.
To be filled by POP-SP			Name:	and the state of t
			Designation:	Place:
POP-SP Seal	Signature of Authorized Signato	ry	Date a	1 m m 1 y y y y
	[To be filled by CRA - Facili	tation Cer	ntre (CRA-FC)]	
Received by	CRA-FC	Registratio	n Number	
Received at		The second secon		
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Acknowledgement Number (by CRA-FC)				
PRAN Alloted				
	ACKNOWLED	GEMENT		
Name of the Subscriber:				
Contribution Amount Remitted:	₹			
Date of Receipt of Application and Conti	ribution Amount:	1 7		
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### INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

#### **General Guidelines**

(a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word.

In case, you mention the KYC number submission of proof for the same is necessary.

Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back

The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted.

Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.

Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.

S. No	Item No.	Item Details	and a second	Instr	uctio	ons
		Personal Details	ii. Cı	nis Form is applicable only for Resident Indians. There is a sepa arrently, Foreign Nationals and Persons of Indian Origin (PIO) a ne applicant shall mention father's name and mother's name ar	are no	ot allowed to open PRAN under Private Sector.
		Spouse Name	If mai	rried, spouse name is mandatory.	•	
1	1	Father's Name	ii. If	tther's name is mandatory. father's name has more than 30 digits, you may fill Annexure II	for th	ie same.
		Mother's Name	ii. If	other's name is mandatory Mother's name has more than 30 digits, you may fill Annexure		
		Date of Birth	Pleas	e ensure that the date of birth matches as indicated in the doc	ument	t provided in the support.
			S.No		S.No	
			1	Passport issued by Government of India.	1	Passport issued by Government of India
			2	Ration card with photograph.	2	Ration card with photograph and residential address
			3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residenti address
			4	Certificate of the POP for an existing customer.	4	Certificate of the POP for an existing customer.
			5	Voters Identity card with photograph and residential address.	5	Voters Identity card with photograph and residential address
			6	Valid Driving license with photograph	6	Valid Driving license with photograph and residential address
			7	Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly		Letter from any recognized public authority at the level Gazetted officer like District Magistrate, Divisional commissione BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate et
			8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Member Parliament or Member of Legislative Assembly
		Identity, Correspondence &	9	Aadhar Card / letter issued by Unique Identification Authority of India	9	Aadhar Card / letter issued by Unique Identification Authority India clearly showing the address
		Permanent address details	10	Job cards issued by NREGA duly signed by an officer of the State Government	10	Job cards issued by NREGA duly signed by an officer of th State Government
2	2, 3 & 4		11	Identity card issued by Central/State government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commerciat Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.		The identity card/document with address or letter of allotment of accomodation issued by any of the following: Central/State Government and its Departments, Statutor, Regulatory Authorities, Public Sector Undertakings, Schedule Commercial Banks, Financial Institutions and listed companise for their employees.Pension or Family Pension Payment Order issued by Govt. Departments or PSU containing address.
	a		and a second	Photo. Identity Card issued by Defence, Paramilitary and Police department's	The state of the s	Latest Electricity/water/piped gas bill in the name of the Subscribe / Claimant and showing the address (less than 2 months old)
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill (landline & postpaid mobile) in the name of the Subscriber / Claimant and showing the address (less than months old)
			14	Photo Credit card.	14	Latest Property/house Tax receipt (not more than one year old)
					15	Existing valid registered lease agreement of the house on stampaper (in case of rented/leased accommodation)
3	6	Politically Exposed	(ii) If (iii) If (iii) TI Politic exam	the address on the document submitted for identity proof by the bening form, the document may be accepted as a valid proof of the address indicated on the document submitted for identity p trm, a separate proof of address should be obtained. All future cor Permanent address are different, then proof for both have to be the KYC documents may be submitted within a period of 30 day cally Exposed Persons' (PEPs) are individuals who are or have ple heads of state or of the government, senior politicians, sei	roof d mmun e subres afte been	differs from the current address mentioned in the account openin nications will be sent to correspondence address. If correspondence mitted.
		Person	owne	d corporations, important political party officials.		
4	7	Subscriber's Bank Details	conta	ining Subscriber Name, Bank Name, Bank Account Number at	nd IFS	pported by a documentary proof. Please attach a cancelled chequ S Code. If cheque is not available or cheque is not preprinted wit certificate or letter from Bank mentioning Subscriber Name, Ban
5	8	Subscriber's Nomination Details	accer 100,	oted in the nomination(s). Sum of percentage share across all tentire nomination will be rejected.	he no	ominees must be integer. Decimals/Fractional values shall not b minees must be equal to 100. If sum of percentage is not equal t
6	10	Pension Fund (PF) Selection and Investment Option	Actice the cl Pens	e Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto C hoices of Pension Fund, their contributions will be allocated a ion Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd.	mong	nds and allocate their investments either in Asset Class'G' unde g'. In case a Government employee/subscribers does not exercise g 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SI
7	11	Declaration by subscriber on FATCA Compliance	• July for Tails of re	r tax purpose in USA. ax identification Number (TIN): TIN need not be reported if it has sued a high integrity number with an equivalent level of identific that type of number for individual include, a social security/insu sident registration number) applicant residence for tax purpose in jurisdiction(s) within India, Perm.	not be cation arance	poses in jurisdiction(s) outside India ts citizen, every US citizen of whatever nationality, is also a reside been issued by the jurisdiction. However, if the said jurisdiction had to (a "Functional equivalent"), the same may be reported. Example e number, citizen/personal identification/services code/number are Account Number (PAN) to be provided as Tax Identification Number (TIN Country of Birth is US, document evidencing Relinquishment
8	12	Declaration by Subscriber	Signa	tizenship should be provided or reasons for not having relinqui	shme ded in	

### **General Information for Subscribers**

Impression in case of females.

The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.

Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.

For more information / clarifications, contact CRA:

Website: https://www.npscra.nsdl.co.in Call: 022-4090 4242

Call: 022-4090 4242
Address: Central Recordkeeping Agency (CRA)
NSDL e-Governance Infrastructure Limited
1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
Lower Parel (W), Mumbai - 400013

## **Equity Allocation Matrix for Active Choice**

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

### Please note:

- 1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- 2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.