



Baba Farid University of Health Sciences, Faridkot

(Established by Govt. of Punjab vide Punjab Act No. 18 of 1998)

Letter No:- BFUHS/ Accounts/ 2019/ _____

Date:- 03/07/2019

To

- 1) Principals/ Medical Superintendent/ Director/ Senior Medical Officers of all Constituent Colleges and Institutions of BFUHS, Faridkot.
- 2) All Branch / Departmental Heads of the BFUHS, Faridkot.

Subject:- **Regarding allotment of Permanent Retirement Account Number (PRAN).**

The Department of Finance, Govt. of Punjab vide its letter No. 5/44/2012-5/VPPT/727 dated 04.10.2018 has made it mandatory to all Autonomous Bodies of the State to adopt New Defined Contributory Pension Scheme/ NPS for its employees recruited after 01.01.2004 on regular basis. Accordingly, the University is in a process to start the New Defined Contributory Pension Scheme / NPS for its Regular employees appointed at the University as well as Its constituent colleges after 01.01.2004 (*Excluding the employees who have opted the GPF Scheme in compliance to the decision of the Hon'ble Board of Management during the 22nd meeting held on 09.01.2007*). Hence, a proforma on Annexure S1 for allotment of Permanent Retirement Account Number (PRAN) is being attached with a request that the same may be got duly filled from the concerned employees working on regular basis, in your office/ department, and, the same may be forwarded to the undersigned (along with necessary supporting documents) within a period of 15 days from the date of this letter so that further necessary action may be taken, accordingly.

In case any employee is already having his/ her PRAN Card then a copy of the same (along with necessary supporting documents) may be provided to this office.

In case of any further clarification, Sh. Sarabjit Singh, Senior Assistant (Accounts) may be contacted on his mobile No. 9780008633.

This may please be treated as Urgent.

Encls:- As above
(Proforma for issue of PRAN)

Sd/-

Registrar

Endst No:- 13060 - 61
Copy of the above to:-

Dated:- 03/07/2019
Registrar,
Baba Farid University of
Health Sciences, Faridkot

- A) SVC for kind information of the Hon'ble Vice Chancellor.
- B) Incharge, IT Cell :- with an advise that the said letter may be displayed on the official website of the University and its constituent colleges for information to all concerned.
- C) Notice Board.

Registrar

Registrar,
Baba Farid University of
Health Sciences, Faridkot

Application for Allotment of Permanent Retirement Account Number (PRAN)

(To avoid mistake(s), please follow the accompanying instructions and examples carefully before filling up the form)

Acknowledgement No.
(To be filled by FC)

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Permanent Retirement Account Number :
(To be filled by FC after PRAN generation)

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To affix recent
Coloured photograph
(3.5 cm × 2.5 cm)

Sir/Madam,

I hereby request that a permanent retirement account number be allotted to me.

I give below necessary particulars :

Section A - Subscribers Personal Details (* Indicates Mandatory Field)Signature/Left Thumb Impression
of Subscriber in black ink

1. Full Name (Full expanded name: initials are not permitted)

Please Tick as applicable, Shri Smt. Kumari

First Name *

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Middle Name

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Last Name

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2. Gender * Please Tick as applicable, Male Female 3. Date of Birth * 4. PAN

D D M M Y Y Y Y (Date of Birth to be Certified by DDO)

5. Father's Full Name:

First Name *

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Middle Name

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Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

6. Present Address:

Flat/Unit No, Block no. *

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Name of Premise/Building/Village

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Area/Locality/Taluka

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District/Town/City *

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State / Union Territory *

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Country *

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Pin Code * 7. Permanent Address: If same as above, Please Tick else,

Flat/Unit No, Block no. *

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Name of Premise/Building/Village

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Area/Locality/Taluka

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District/Town/City *

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

State / Union Territory *

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Country *

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Pin Code * 8. Phone No.
STD Code Phone No.9. Mobile No.

10. Email ID

Grid for Email ID (20 columns)

11. Subscribers Bank Details : (Please refer instruction no. 4)

Savings A/c

Current A/c

Bank A/c Number*

Grid for Bank A/c Number (15 columns)

Bank Name*

Grid for Bank Name (15 columns)

Bank Branch*

Grid for Bank Branch (15 columns)

Bank Address*

Grid for Bank Address (15 columns)

Pin Code*

Grid for Pin Code (6 columns)

Bank IFS Code

Grid for Bank IFS Code (8 columns)

(If IFS code is not available, then provide MICR)

Bank MICR Code

Grid for Bank MICR Code (10 columns)

Declaration by subscriber for Bank details: At present, I do not have a Bank account. However, I confirm to provide the requisite Bank account details within six months or on opening of Bank account whichever is earlier to the associated nodal office for updating the same in CRA system. (Please tick (√) in case, Bank details are not available)

12. Value Added Services:

i) SMS Alert Yes No

ii) Email Alert: Yes No

I _____, the applicant, do hereby declare that what is stated above is true to the best of my information & belief.

Date :

Grid for Date (DDMMYY)

Signature/Left Thumb Impression of Subscriber

Section B - Subscribers Employment Details to be filled and attested by DDO (All Details are Mandatory)

1. Date of Joining

Grid for Date of Joining (DDMMYY)

2. Date of Retirement

Grid for Date of Retirement (DDMMYY)

Grid for Date of Retirement (DDMMYY)

3. PAN

Grid for PAN (10 columns)

(Please refer to instructions No.5.)

4. Group of the Employee (Please Tick)

Group A

Group B

Group C

Group D

5. Office

Grid for Office (15 columns)

6. Department

Grid for Department (15 columns)

7. Ministry

Grid for Ministry (15 columns)

8. DDO Registration Number

Grid for DDO Registration Number (10 columns)

9. PAO/CDDO Registration Number

Grid for PAO/CDDO Registration Number (10 columns)

(Please refer to instructions No.6.)

10. Basic Salary

Grid for Basic Salary (6 columns)

11. Pay Scale

Grid for Pay Scale (15 columns)

Certified that the above declaration has been signed / thumb impressed before me by _____ after he / she has read the entries / entries have been read over to him / her by me and got confirmed by him / her. Also certified that the date of birth and employment details is as per employee records available with the Department.

Signature of the Authorised Person

Signature of the Authorised Person

Designation of the Authorised Person :

Date : Grid (DDMMYY)

Grid for Date (DDMMYY)

Rubber Stamp of the DDO

Rubber Stamp of the DDO

Name of the DDO _____

Department / Ministry _____

Section C - Subscriber's Nomination Details (* Indicates Mandatory Field for nominee)

1. Name of the Nominee*:

1st Nominee										2nd Nominee										3rd Nominee									
First Name *										First Name *										First Name *									
Middle Name										Middle Name										Middle Name									
Last Name										Last Name										Last Name									

2. Date of Birth (In case of a minor)*:

1st Nominee					2nd Nominee					3rd Nominee				
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3. Relationship with the Nominee*:

1st Nominee										2nd Nominee										3rd Nominee									
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4. Percentage Share*:

1st Nominee					2nd Nominee					3rd Nominee				
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5. Nominee's Guardian Details (in case of a minor)*:

1st Nominee's Guardian Details										2nd Nominee's Guardian Details										3rd Nominee's Guardian Details									
First Name *										First Name *										First Name *									
Middle Name										Middle Name										Middle Name									
Last Name										Last Name										Last Name									

6. Conditions rendering nomination invalid:

1st Nominee										2nd Nominee										3rd Nominee									
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Section D - Subscriber Scheme Details

1st Scheme										2nd Scheme										3rd Scheme									
Pension Fund Managers Name/Code										Pension Fund Managers Name/Code										Pension Fund Managers Name/Code									
Scheme ID No./Name										Scheme ID No./Name										Scheme ID No./Name									
Percentage Share										Percentage Share										Percentage Share									

Section E - Declaration

I understand that there would be PFRDA approved *Terms and Conditions* for Subscribers on the CRA website *governing I-Pin (to access CRA/NPSCAN and view details) & T-pin*. I agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed.

I _____, the applicant, do hereby declare that what is stated above is true to the best of my information & belief.										Signature/Left Thumb Impression of Subscriber									
Date : <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> D D M M Y Y Y Y																			

INSTRUCTIONS FOR FILLING PRAN FORM

- Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- Details Marked with (*) are the mandatory fields.
- Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- 'Individual' Subscriber should affix a recent colour photograph (size 3.5 cm x 2.5 cm) in the space provided on the form. The photograph should not be stapled or clipped to the form. (The clarity of image on PRAN card will depend on the quality and clarity of photograph affixed on the form.)
- Signature /Left thumb impression should only be within the box provided in the form. The signature should not be on the photograph. If there is any mark on the photograph such that it hinders the clear visibility of the face of the Subscriber, the application will not be accepted.
- Thumb impression, if used, should be attested by a Magistrate or a Notary Public or a Gazetted Officer under official seal and stamp.

Sr. No.	Item No	Item Details	Guidelines for Filling the Form
Section A - Subscribers Personal Details			
1	3.	Date of Birth	All Dates Should be in "DDMMYYYY" Format
2	6.	Present Address	All future communications will be sent to present address.
3	8, 9, 10	Phone No., Mobile No, & Email ID	It is advisable to mention either "Telephone number" or "Mobile number" or "Email id" so that Subscriber can be contacted in future for any discrepancy.
4	11	Subscriber's Bank Details	For subscribers, the Bank details are mandatory. In case, Bank details are not available at the time of filling the form, subscriber has to accept the declaration for providing the Bank details within six months or on opening of Bank account whichever is earlier.
Section B - Subscribers Employment Details			
It is mandatory to fill the Subscriber's Employment details in the application. The employment details should be filled by the respective DDO of the Subscriber and should be verified by the Authorised Signatory. DDO should ratify Overwriting / Striking off of any of the employment details.			
5	3.	PPAN	Kindly provide the PPAN (Permanent Pension Account Number), if it has been allotted to the subscriber by the concerned PAO.
6	8 & 9	PAO/CDDO Reg. No. & DDO Reg. No.	PAO/CDDO Reg. No. and DDO Reg. No. are the unique Registration number allotted by Central Recordkeeping Agency. CDDOs will register as both PAOs and DDOs. NCDDOs will register only as DDOs and obtain the PAO Reg. No. from their respective PAOs.
Section C - Subscriber's Nomination Details			
7	4.	Percentage Share	Subscriber can nominate maximum of 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, entire nomination will be rejected.
8	5.	Nominee's Guardian Details	If a nominee is a minor, then nominee's guardian details will be mandatory.
Section D - Subscriber scheme details			
If the Subscriber is unable to mention the Scheme details i.e. PFM Name, Scheme Name & Percentage Allocation he can contact the nearest Facilitation Centre (FC) for information or the Subscriber can also search for the scheme details on http://www.npskra.nsdli.co.in			
9	Scheme	Subscriber can select maximum three schemes. Details of the schemes are available on http://www.npskra.nsdli.co.in Subscriber can not fill the same scheme details more than once. If a scheme name is filled in the form for scheme setup there must be a PFM name and percentage contribution filled for that scheme. If the Scheme details are not filled, default scheme as approved by PFRDA will be applicable	
10	Percentage Share	Scheme Contribution Value will be in terms of percentage. It cannot be in terms of amount. Percentage contribution value for all the schemes must be integer. Fractional value will not be accepted. If the sum of contributions (in percentage) across all the schemes is not equal to 100, the balance will be allotted to the default scheme approved by PFRDA.	

GENERAL INFORMATION FOR PRAN SUBSCRIBERS

- Subscribers can obtain the application form for PRAN in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) from DDO or can freely download from the CRA website (<http://www.npskra.nsdli.co.in>).
- The request for a reprint of PRAN card with the same PRAN details or/and changes or correction in PRAN data can be made by filling up 'Request for change/correction in subscriber master details and/or re-issue of I-Pin/T-Pin/PRAN card' or/and 'Request For change in signature and/or change in photograph'. The form is available from the sources mentioned in (a) above.
- The Subscriber can obtain the status of his/her application from the CRA website or through the respective PAO/CDDO.
- For more information
Visit us at <http://www.npskra.nsdli.co.in>
Call us at 022-24994200
e-mail us at info.cra@nsdl.co.in
Write to: Central Recordkeeping Agency, NSDL e-Governance Infrastructure Limited, 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.