KCRA003-1.0

## **National Pension System**

## DDO Registration Form

|   | DDO Registration Number : (To be allotted by CRA) |                              |           |                           |  |        |        |   |        |      |         |    |
|---|---|------------------------------|-----------|---------------------------|--|--------|--------|---|--------|------|---------|----|
| Ve are pleased to inform you<br>ystem. The details required t |   | _                            |           | _                         |  |        |        | - | he Nat | iona | l Pens  | ic |
| DDO TAN (Optional): (Refer to instruction no.11)              |   |                              |           |                           |  |        |        |   |        |      |         |    |
| . Are you a Cheque Drawing DE                                 | OO *: Yes   | No                           | (Refer    | (Refer instruction no. 6) |  |        |        |   |        |      |         |    |
| . Name of the DDO Office*:                                    |   |                              |           |                           |  |        |        |   |        |      |         |    |
| . DDO Address :<br>lat/Unit No/Block no. *                    |   |                              |           |                           |  |        |        |   |        |      |         |    |
| lame of Premise/Building/Villag                               | ge  |                              |           |                           |  |        |        |   |        |      |         |    |
| rea/Locality/Taluka   |   |                              |           |                           |  |        |        |   |        |      |         |    |
| vistrict/Town/City *  |   |                              |           |                           |  |        |        |   |        |      |         |    |
| tate / Union Territory *                                      |   |                              |           |                           |  |        |        |   |        |      |         |    |
| ountry *  |   |                              |           |                           |  |        |        |   |        |      |         |    |
| in Code *   | Phone I   |                              |           |                           |  |        |        |   |        |      |         |    |
|   |   |                              | (STD code | :)                        |  | (Phone | e No.) |   |        |      |         |    |
| Iternate Phone No:  |   |                              |           | Fax:                      |  |        |        |   |        |      |         |    |
| (STD co<br>Official Email ID* (Email ID shou                  |   | (Phone No.<br>ID & not of an |           | person)                   |  | (STD   | code)  |   |        | (Pho | ne No.) |    |
|   |   |                              |           |                           |  |        |        |   |        |      |         |    |
| . Authorised contact person's d                               | esignation *:                                     |                              |           |                           |  |        |        |   |        |      |         |    |
|   |   |                              |           |                           |  |        |        |   |        |      |         |    |
|   |   |                              |           |                           |  |        |        |   |        |      |         |    |
| . Name of the Department:                                     |   |                              |           |                           |  |        |        |   |        |      |         |    |
|   |   |                              |           |                           |  |        |        |   |        |      |         |    |

## Form N3 CG

| (b). Existing DDO Code*:                                |                 |         |        | (Re   | fer ins | truc  | tion no. 7)            |            |                          |
|---|-----------------|---------|--------|-------|---------|-------|------------------------|------------|--------------------------|
| 8. PAO/CDDO Registration Nu<br>(To be filled by PAO/CDD |                 |         |        |       |         |       | (Refer instruction no. | . 8)       |                          |
| I/We hereby agree and declar                            | e that the info | ormatic | n pro  | ovide | ed in t | he a  | oplication, is complet | e and tru  | ie.                      |
|   |                 |         |        |       |         |       |                        |            | Date:                    |
|   |                 |         |        |       |         |       |                        |            | Place:                   |
|   |                 |         |        |       |         |       |                        |            |                          |
| DDO Stamp   | Si              | gnatur  | e of A | Auth  | orised  | l Sig | natory of DDO          |            |                          |
| Name of Authorised Signate                              | ory:            |         |        |       |         |       |                        |            | ,                        |
| To be attested by PAO                                   |                 |         |        |       |         |       |                        |            |                          |
|   |                 |         |        |       |         |       |                        | Date:      |                          |
|   |                 |         |        |       |         |       |                        | Place:     |                          |
|   |                 |         |        |       |         |       |                        | Name       | of Authorised Signatory: |
|   |                 | C: t.   |        | c     |         | l C:  |                        | -          |                          |
| PAO/CDDO Stamp  |                 | Signati | ire oi | r Aut | norise  | ea Si | gnatory                |            |                          |
| PAO/CDDOReg.No. (Allotte                                | d by CRA)       |         |        |       |         |       |                        |            |                          |
| To be filled at CRA (Refer insti                        | austionno (1)   |         |        |       |         |       |                        |            |                          |
| TO be filled at CKA (Refer filst)                       | uctionno.8)     |         |        |       |         |       | Possived on            |            |                          |
|   | Received of     |         |        |       |         |       |                        |            |                          |
|   |                 |         |        |       |         |       | Name of the            | e officer: |                          |
|   |                 |         |        |       |         |       | Signature of           | the offic  | cer:                     |
| CRA St  | amp             |         |        |       |         |       |                        |            |                          |

## Instructions for filling the form:

- 1. The form is to be submitted to the address Central Recordkeeping Agency, KFin Technologies Pvt. Ltd., Selenium Building, Tower-B, Plot No- 31 & 32, Financial District, Nanakramguda, Serilingampally, Hyderabad, Rangareddi, Telangana, India, 500032.
- 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- 3. The form should be filled up completely. Details marked with (\*) are mandatory fields.
- 4. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- 5. Kindly provide Name of the Ministry under which DDO office is functioning.
- 6. CDDOs requires to register both as DDO and PAO. CDDOs must also submit Form N2 (PAO registration form) for registration as a PAO.
- 7. Kindly mention the DDO code allotted by CGA (Controller General of Accounts) or respective accounting formations.
- 8. Kindly mention PAO/CDDO Registration No. allotted by CRA to the PAO/CDDO.
- 9. For NCDDO, form has to be duly authorised by PAO registered at CRA. CDDOs are required to directly submit the form to CRA. Till the concerned PAO/CDDO has been registered, it shall retain the DDO registration forms.
- 10. The application form in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) can be downloaded from the CRA website (https://nps.karvy.com/).
- 11. TAN is the Tax Deduction and Collection Account Number allotted. by Income Tax Department. New TAN is a ten character alphanumeric number with the following structure:

First four digits (Alphabets), Next Five digits (Numeric) and last digit (Alphabets) It is advisable that DDO verifies from the Income Tax website whether TAN has been allotted as per the new format.

12. For more information contact CRA atToll Free No:1800 208 1617 or write to Central Recordkeeping Agency ,KFin Technologies Pvt. Ltd., Selenium Building, Tower-B, Plot No- 31 & 32, Financial District, Nanakramguda, Serilingampally, Hyderabad, Rangareddi, Telangana, India, 500032.