	NATIONAL PENSION Exit from National Pension Sy	` '	
Claim ID To, NPS Trust. Sir/Madam			Affix recent colour photograph of 3.5 cm × 2.5 cm size / Passport size
1	hereby apply for the payment of the accumulate	ed pension wealth in NPS	
Tier-Laccou	unt of as per the relevant provisions of the PF		
		NDA (Exits and Withdrawais	
under NPS	) Regulations, 2015 as amended.		
Tier II:- The	entire accumulated pension wealth in Tier II account would be paid along	with lumpsum withdrawal of	
Tier I accou	ınt.		
-	give below the necessary details: female right thumb Impression and in case of male left thumb Impression	may be taken.	Signature / Thumb Impression* of the Claimant / Guardian
Sr.No	Particular	1	Remarks
Section	A - Details of the Subscriber & Claimant		
	Subscriber Sector*	Govt. Sector     All India citizens/corporat     NPS Lite / GDS	e
1.	Organisation Name* (PAO/DTO/CHO/NLAO Name)		
2.	PRAN*		
3.	Name of the Subscriber*	First	Middle Last
4.	Subscriber Gender*	Male	Female
5.	Maiden Name (In case of female married Subscriber)	First	Middle Last
6.	Father's Name*	First	Middle Last
-			
7.	Marital Status of the Subscriber*	Married	Unmarried/Others
8.	Spouse Name of the Subscriber (only if subscriber was married & Spouse is alive)	First	Middle Last
9.	Spouse Gender (only if subscriber was married & Spouse is alive)	Male	Female
10.	Date of Death of the Subscriber*	DD / MM / YYYY	
11.	Date of Birth of the Subscriber (As in PRAN Card)*	DD / MM / YYYY	
12.	Name of the Claimant*	First	Middle Last
13.	Aadhar/VID		
14.	PAN of claimant*		
15.	CKYC Number		
16.	Are you a Politically Exposed Person (PEP)*	Yes No No	
17.	Are you related to a Politically Exposed Person (PEP)*	Yes No	
18.	Do you have any history of conviction under any criminal proceedings in India or abroad?*	Yes No	
10.	If Yes, please provide details		
19.	Contact details of claimant*	Address:  Mobile No*: +91 Alternate Phone No: Email Id*: Date of Birth of Claimant (Onl Relationship With Subscriber Percentage Share: Guardian Name (Only in case Guardian DOB (Only in case	e of minor): First Middle Last

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Section	on B - Claimant's Ban	k Details - (	(Please refer instruction No. 6)					
20.	Bank Account Number* :	:						
21.	Bank Name*	A -   -   -   Th -	and the last and the same as a second to the same as the same as a second to the same as t					
22.	Bank Branch Name and Address : The monthly pension and lump sum amount would be deposited into this account and hence fill in all the details carefully.*							
23.	IFSC Code (attach a car /bank certificate containi	ncelled cheque ng IFSC code)	leaf or copy of bank passbook *					
Fields ma	arked with * are mandatory.							
Section	C - Claimant Withdra	awal Details	S - (Please refer instruction No	7)				
In event of	f death after / before supera	annuation or att	taining 60 / 65 years of age	,				
a) Would	d you like to withdraw full am or	nount (if less th	an or equal to 5 lakh for Goverr	ment Subscriber)	Υ	es No No		
b) Would	d you like to have normal Wi	ithdrawal (Lum	p sum & Annuity Withdrawal)#		Υ	es No No	]	
# Please	provide the Percentage of co	orpus that you	wish to opt for lump sum withdr	awals and purchase	of annuity:			
# Claiman	t can allocate any percentage	e of amounts to	be invested in annuity scheme.	not applicable in cas	e of Govern	ment Sector)		
1	rpus opted for lump sum wit % - for Government Subscri		Percentage of corpus opted for annuity (Min 80%- for Govern	•	Total (10	0%)		
Section	D - Subscriber's An	nuitv Detail	S - (Please refer instruction No	. 11 & 12) (Not to be	illed in ca	se of complete withdra	awal)	
		•	of the below options as per y	, ,		oo or oomproto minare		
	a Birla Sun Life Insurance C		Bajaj Allianz Life Insurance C	o. Ltd		BC Oriental Bank of C nce Co. Ltd	ommerce	
Edelw	veiss Tokio Life Insurance C	o. Ltd	HDFC Life Insurance Co. Ltd		ICICI Prude	ential Life Insurance Co	o. Ltd	
Indial	First Life Insurance Co. Ltd		Kotak Mahindra Life Insurance	e Co. Ltd	Life Insurar	nce Corporation of Indi	a	
Max I	ife Insurance Co. Ltd		Pnb Metlife India Insurance C	o. Ltd.	SBI Life Ins	surance Co. Ltd		
Shrira	m Life Insurance Company	Ltd	Star Union Dai-ichi Life Insura	nce Co. Ltd	ATA AIA L	ife Insurance Co. Ltd		
Select Ar	nuity Scheme (please tick	one of the be	elow options as per your choi	ce)				
Annu	ity for Life							
Annu	ity for Life with return of pure	chase price on	death					
Annu	ity payable for life with 100%	√ annuity payal	ble to spouse on death of annui	tant				
Annu	ity payable for life with 100%	% annuity payal	ble to spouse on death of annui	tant with return on p	urchase of	annuity		
NPS-	Family Income option (Defa	ult annuity)(Ma	andatory For Government Secto	r Subscriber)				
Othe	(Please Specify)							
Select Ar	nuity Frequency: Please ti	ick one of the b	pelow options as per your choice	e. (For Government	Subscriber,	annuity frequency is r	nonthly only)	
Mont	hly	Quarterly	☐ Half Yearly		Annual			
Date: Di	O / MM / YYYY					ımb Impression of th		
		sion and in cas	se of male left thumb Impression	, ,	e of Guard	ian in case the Claim	ant is a minor)	
and the second state of th								
Section E - Subscriber's Family Member Details* (To be filled in case claimant has selected NPS-Family Income option) Family Member Details for providing annuity as chosen by the subscriber.								
Sr.No	Details		Full Name	Aadhar/V	ID	PAN <sup>\$</sup>	Date of Birth	

П						
П	Sr.No	Details	Full Name	Aadhar/VID	PAN <sup>\$</sup>	Date of Birth
П	1.	Spouse <sup>\$</sup>				DD/MM/YYYY
П	2.	Dependent Mother (if living)				DD/MM/YYYY
П	3.	Dependent Father (if living)				DD/MM/YYYY
П	4.	Child 1 (if living)				DD/MM/YYYY
П	5.	Child 2 (if living)				DD/MM/YYYY
ľ	6.	Child 3 (if living)				DD/MM/YYYY

Note: In case of children being more than 3, please specify in an additional sheet.

\$Mandatory in case Claimant opts for NPS-Family Income option.

Declaration by the Claimant

Date: DD / MM / YYYY

I hereby declare and state that all the personal details provided by me in the form as above are true and correct to the best of my knowledge. I also agree that NPS Trust / CRA shall not be held responsible/liable for any losses or delays that may arise due to provision of incorrect details including details pertaining to bank account by me. Further, I authorize the National Pension System Trust(NPST)/ CRA to share informations pertaining to my withdrawal application with the Annuity Service Providers for facilitating the purchase of annuity in applicable cases as is required under NPS.

\*Signature/Thumb Impression of the Claimant (Signature of Guardian in case the Claimant is a minor)

\*In case of female right thumb Impression and in case of male left thumb Impression may be taken.

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Declaration by the Proposer: (Not to be filled in case of complete withdrawal)

I hereby declare that the foregoing statements and informations have been given by me after fully understanding the questions and the annuity options and the same are true, accurate and complete in every manner and respects and that I have not withheld or omitted to give any material information. I understand and agree that the

statements in this proposal constitute warranties. I do hereby agree and declare that these statements and this declaration shall be the basis of the contract of assurance between me and Annuity Service Provider (Company) and that if there be any misstatement or suppression of material information or if any untrue Statement is contained therein or in case of fraud by me, which comes to the knowledge of the company at any future point of time, the said contract shall be treated as per provisions of Section 45 of the Insurance Act 1938 or any other applicable provisions, as amended from time to time.

I also understand and agree that the company shall additionally levy or recover all the applicable taxes like service tax, surcharges, cess etc, from the premiums

which are necessitated by various enactments of central and/or state legislatures from time to time.

I understand that the contract will be governed by the provisions of the Insurance Act 1938, and other applicable laws in India and that the contract will not commence until a written acceptance of this proposal is issued by the company and that the benefits under the policy shall be subject to the terms and conditions contained in the contract. I also agree that the amount held in proposal/policy deposit shall not earn any interest.

I further state that the product features and terms and conditions of the policy have been thoroughly explained to me and having understood, I consent to the same.

I further understand that the final annuity amount would be subject to the actual corpus value to be utilised for purchase of annuity at the time of its issuance. I also acknowledge and agree that the funds will not be returned to me in case I choose to cancel the policy under free look period. These funds will be payable by company directly to any other annuity scheme chosen by me which is authorized and approved under the prevalent regulations and applicable rules. Further, no

interest will be payable to me on the funds held during this transition period.

Place

I hereby authorize company to send information and servicing related communication regarding this proposal or resulting policy through Email/SMS/Phone

I hereby authorize the company to provide me/our details to banks, financial institutions and third party service providers that the company may have tie-ups with, for verification of proposal details and for servicing of policies.

Signature of the w	vitness		Signature /	Left thumb Impression ( Proposer	of the	
						Affix a recent self signed photograph
Name and Address of witness	÷					
Place:						
Date:	DD / MM / YYYY	<u> </u>				
aration when Proposal form to be filled in case of complete v		n othe	er than propo	ser/proposer signs i	n a vernacul	ar language/proposer is illitera
cuments to the proposer in	same and agree to	la abide l	anguage, that h	e/she/they undertook th	this form fully expence, understo the prop	te that the product details, contents and relevant documents have bee lained to me/us and that I/We have bod them. I/We certify that the replicosal form have been recorded as pmation provided by me/us.
cuments to the proposer in	same and agree to	la abide l	anguage, that h	e/she/they undertook th	this form fully expence, understo the prop	n and relevant documents have bee lained to me/us and that I/We have bod them. I/We certify that the replic osal form have been recorded as p

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Date: DD / MM / YYYY



Section F - Declaration & Attestation by	Nodal Office		
by us. The complete information provided in this	vided in this application form ar	e matching with the inf	ormation available in the o <b>ffi</b> cial record maintaine re been provided by the Claimant
Sh /Smt/Ms. entries / entries have been read over to him / he	r by me and got confirmed by h	im / her.	after he / she having read the
T hat all the contributions with respect to the Subscriber and no further contributions are pend     T hat Identity of the Subscriber / Claimant is certification.	ling at Nodal O <b>ffi</b> cer level.(only	for government nodal	office)
withdrawal form has been verified and can be ac	ccepted as final.		
It is also certified that this office has not paid/rec any objection for release of accumulated pension	eived any family pension to the n wealth to his/her claimant. (A	legal heir(s)/nominee( pplicable for governme	s) of the deceased subscriber and we don't have ent Sector subscribers only)
The bank account details of the Claimant as prove payment.	ided in bank details section hav	ve been checked and v	rerified and the same can be accepted for
Rubber Stamp of the DDO/POP-SP/	NLCC	Signature	of the Authorised Person
		2.9	
DDO/POP-SP/NLCC Registration Number			
Designation of the Authorised Person :		_ DDO/POP-SP/NLCC	Office Name:
Date DDIIMMIIYYYYY			
Rubber Stamp of the DTO/PAO/POP/Ao	ggregator	Signature	of the Authorised Person
DTO/PAO/POP/ Aggregator Registration Numbe	er	-	
Designation of the Authorised Person.:			ce Name:
Date D D / M M / Y Y Y Y			
[As per Regulation Request cum under taking form for withdrawal of or less than Rs. 5,00, 000/- in case of government		lete withdrawal)	-
I	por apply for the payment of the	accumulated pageion	being a nominee/legal heir/guardian of
and do hereby solemnly affirm and declare as under:		e accumulated pension	wealth of the deceased subscriber under the NF
1. T hat I have been nominated as a nominee/is legal Sh/Smt/Ku, und			of deceased subscriber
<ol> <li>That since the total amount receivable as benefits         Rs. 5,00,000/-, I/we understand that I am eligibl         subscriber as per the provisions of the PFRDA (E.         <ol> <li>I/we accordingly hereby opt to withdraw complete             receivable by me/us.</li> <li>I al so understand that with the aforesaid withdrawal,             under the National Pension System (NPS) as stip</li> </ol> </li> </ol>	e to opt for withdrawal of the to xits and withdrawls from NPS) e pension wealth lying in the afo I or my family members shall r	tal pension wealth in the Regulations, 2015 as a presaid PRAN account not be entitled to receive	ne individual pension account of the deceased imended.  The as admissible and being the full and final benefit eany other or further benefits including annuities
amended.			
Date:		40.	and the Children of the Children
Place:			nature/Thumb Impression of the Claimant of Guardian in case the Claimant is a minor)
*In case of female right thumb Impression and in case	e of male left thumb Impression	may be taken.	
			Date DD / MM / Y Y Y
Rubber Stamp of the DDO/POP-SP/NLCC	Signature of the DDO/P	OP-SP/NLCC	Registration No. of DDO/POP-SP /NLCC
			Date DD / MM / YYYY
Rubber Stamp of the DTO/PAO/POP/Aggregator	Signature of DTO/PAO/POP/Ac		Registration No. of DTO/PAO/POP/ Aggregator
*In case of female right thumb Impression and in cas	e of male left thumb Impression	n may be taken.	

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KFINTECH

## INSTRUCTIONS FOR FILLING UP FORM

This application should be filled by the nominee/claimant seeking to withdraw pension wealth benefits due to death of the NPS subscriber

### **General Instructions:**

- 1. A s per amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2017, withdrawal of benefits from NPS Account will not be allowed if Aadhaar and PAN of the claimant is not provided at the time of initiation of online withdrawal request (Aadhaar not mandatory till Hon'ble supreme court order)
- 2. T he claimant has to submit the physical form to the subscriber's nodal office. The nodal office has to compulsorily submit the form in online mode only. Physical form submitted to CRA will not be processed
- A II the columns in the form should be filled with black ink pen without any overwriting.
- 4. Fields marked with (\*) are mandatory.
- 5. Correct postal address, including the pin code should be provided.
- 6. Documents to be enclosed with withdrawal application form:
  - Original Death Certificate of deceased subscriber. In case of NPS
     Lite and Government Sector subscriber copy of death certificate duly
     attested by Nodal Office is required.
  - ii. Copy of the Address proof of nominee/claimant attested by the Nodal Office in support of the address provided on the withdrawal form. The address given on the withdrawal form should match with address present on the address proof.
  - Copy of the Identity proof of nominee/claimant attested by the Nodal Office.
  - iv. Copy of PRAN card (Not required in case of Government Sector Subscriber)If Copy of PRAN Card is not available, print out of ePRAN or submit a duly notarized Affidavit as to the reasons of nonsubmission of the PRAN card.
  - v. Cancelled cheque (containing Nominee/claimant's Name, Bank Account Number and IFS Code) or Bank Certificate/Bank Passbook Containing Name, Bank Account Number and IFSC code, for direct credit or electronic transfer.

### 7. Withdrawal preference:

- i. The entire accumulated NPS wealth in the individual pension account of the deceased subscriber shall be paid as lump sum to the nominee(s)/legal heir(s).
- ii. C laimant is not required to fill Section D, Section E and Declaration by Proposer if Claimant opts for Complete Withdrawal or Claimant opts for Lump Sum Withdrawal only.
- iii. In case nominee is a minor, the form shall be filled up by the guardian.
- iv. T he nominee or family member of the deceased subscriber have the option to purchase any of the annuities available with the empanelled Annuity Service Providers (ASPs).
- v. If the nomination is not registered by the deceased subscriber before his/her death, the accumulated pension wealth shall be paid to the family members on the basis of the legal heir certificate issued by the Revenue Authorities of the State concerned or the Succession Certificate issued by a court of competent jurisdiction.
- 8. T he nominee(s)/legal heir(s) need to provide his/her complete bank details like name of the bank, branch, complete address of branch, account type and IFSC otherwise the form may get rejected by CRA. Please make sure there is no cutting or overwriting in this section. The lump sum paymen shall be directly credited to the bank account of the nominee(s)/legal heir(s)thorough electronic mode of payment.

 List of documents acceptable as Proof Identity and Address for exit unde NPS (for all variants):-

SI. No.	Proof of Identity (Copy of any one of the given below documents)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
а	Passport issued by Government of India.	Passport issued by Government of India.
b	Ration Card with Photograph.	Ration card with photograph and residential address.
С	Bank pass book or Certificate with Photograph	Bank Pass book or certificate with photograph and residential address.
d	Voters Identity card with photograph and residential address.	,
е	Valid Driving license with photograph.	Valid Driving license with photograph and residential address.
f	PAN Card issued by income tax department.	Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional Commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judical Magistrate etc.
g	Certificate of identify with photograph signed by a Member of Parliament or Member of Legislative Assembly.	photograph signed by a Member
h	Aadhar Card/letter issued by Unique identification Authority of India.	Aadhar Card/letter issued by Unique identification Authority of India. Clearly showing the address.
i	Job Cards issued by NREGA duly signed by an Officer of the State Government.	Job Cards issued by NREGA duly signed by an Officer
		of the State Government.
j	Photo Identity card issued by Defence, Paramilitary and Police Departments.	Latest Electricity/Water bill in the name of the subscriber / Claimant and showing the address (Less than 6 months old).
k	Ex-Service Man Card issued by Ministry of Defence to their employees.	Latest Telephone bill in the name of the subscriber/ Claimant and showing the address (less than 6 months old).
I	Photo credit Card.	Latest property/house Tax Receipt (not more than one year old).
m	_	Existing Valid registered lease agreement of the house on stamp paper (in case agreement of the house on stamp paper (in case of rented/leased accommodation).
n	Identity card issued by Central / State government and its Departments, Statuary Regulatory Authorities, Public	The identity card/document with address, issued by any of the following:
t	Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.	Central/State Government and its Departments, Statuary/Regulatory Authorities, Public Sector Undertakings, Schedules Commercial Banks, Public Financial Institution for their Employees.

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10. The Nodal Office after verifying the completeness of the Withdrawal Form and supporting documents in all respects after signature/thumb impression of nominee/ legal heir and declaration and attestation of the authorised person at Nodal Office shall send at below mentioned address for processing of the withdrawal claim for recordkeeping within 90 days from the date of approval:

# Central Recordkeeping Agency,

#### **KFintech**

Selenuim Building, Tower – B, Plot No 31 & 32, Financial District, Nanakramguda, Gachibowli, Hyderabad – 500 032

### 11. Annuity Service Providers

There are 15 Annuity Service Providers empanelled by PFRDA for providing the annuity services to NPS subscribers as per the list provided below (Name of the ASPs are given in an alphabetical order). Name of the ASPs, minimum age and minimum corpus required for annuity purchase

S.		Defaul	t annuity	Other than Default annuity		
No.	ASP Name	Minimum Age	Minimum Corpus (Rs.)	Minimum Age	Minimum Corpus (Rs.)	
1.	Aditya Birla Sun Life Insurance Co. Ltd	45	2,50,000	45	2,50,000	
2.	Bajaj Allianz Life Insurance Co. Ltd.	37	25,000	37	25,000	
3.	Canara HSBC Life Insurance Co. Ltd.	30	2,00,000	30	2,00,000	
4.	Edelweiss Tokio Life Insurance Co. Ltd.	NA	NA	40	2,00,000	
5.	HDFC Life Insurance Co. Ltd.	30	Any Amount	20	Any Amount	
6.	ICICI Prudential Life Insurance Co. Ltd.	18	Any Amount	30	Any Amount	
7.	IndiaFirst Life Insurance Co. Ltd.	40	10,000	40	10,000	
8.	Kotak Mahindra Life Insurance Co. Ltd.	18	2,05,000	18	2,05,000	
9.	Life Insurance Corporation of India	20	50,000	30	50,000	
10.	Max Life Insurance Co. Ltd.	18	Any Amount	18	Any Amount	
11.	PnB MetLife Insurance Co. Ltd.	18	3,00,000	18	3,00,000	
12.	SBI Life Insurance Co. Ltd.	18	50,000	18	50,000	
13.	Shriram Life Insurance Company Ltd.	18	2,00,000	18	2,00,000	
14.	Star Union Dai-ichi Life Insurance Co. Ltd.	45	1,00,000	45	1,00,000	
15.	TATA AIA Life Insurance Co. Ltd.	NA	NA	40	2,24,200	

The following are the variants that are available in India and with most of the ASPs. Subscriber needs to select any of the below mentioned option on the withdrawal form:

- 1. Annuity for life On death of the annuitant, payment of annuity ceases
- Annuity for life with return of purchase price on death On death
  of the annuitant, payment of annuity ceases and the purchase price is
  returned to the nominee
- 3. Annuity payable for life with 100% annuity payable to spouse on death of annuitant On death of the annuitant, annuity is paid to the spouse during his/her life time. If the spouse predeceases the annuitant, payment of annuity will cease after the death of the annuitant.
- 4. Annuity payable for life with 100% annuity payable to spouse on death of annuitant with return on purchase of annuity. On death of the annuitant, annuity is paid to the spouse during his/her life time and purchase price is returned to the nominee after the death of the spouse If the spouse predeceases the annuitant, payment of annuity will cease after the death of the annuitant and purchase price is paid to the nominee

Note:

Please note the exit from NPS and purchase of annuity from empanelled ASP are two separate processes. It is mandatory for subscribers to purchase annuity scheme from Annuity Service Providers (ASP) empanelled by PFRDA. Post receipt of the form by ASP and completely satisfying themselves of completeness of the form and KYC requirements, annuity shall be issued to subscriber (applicable to government sector subscriber)

The more details on the availability of particular annuity scheme with an ASP and annuity quotes etc. are available on the CRA's website as per link below:

https://nps.kfintech.com/annuityserviceprovider.aspx

ASP Scheme Details and Annuity Selection Matrix may change. Please visit CRA website before filling Annuity Details. The list of empanelment of ASPs may undergo changes depending upon new empanelment of ASPs by PFRDA from time to time.

### For Government Sector Subscriber only

- 12. As per regulation 3 (c), at least 80% out of the total accumulated pension wealth of the subscriber shall be mandatorily utilised for purchase of annuity and the Annuity contract shall provide for annuity for life of the spouse of the subscriber (if any) with the provision of return of purchase price. Further details of the annuity scheme are described under Regulation 3(c) provides that the annuity contract shall provide annuity for life of the spouse of the subscriber (if any) with provision for return of purchase price of the annuity and upon the demise of such spouse be re-issued to the family members in the order specified hereunder at the premium rate prevalent at the time of purchase of the annuity, utilizing the purchase price required to be returned under the contract (until all the members given below are covered):
- (a) living dependent mother of the deceased subscriber;
- (b) living dependent father of the deceased subscriber .

After the coverage of all such members, the purchase price shall be returned to the surviving children of the subscriber and in absence of children, to the legal heirs of the subscriber as applicable.

- 13. The balance of the accumulated amount shall be paid as lump sum to the nominee(s) or legal heirs, as the case may be, of such subscriber.
- 14. If the accumulated pension wealth in the permanent retirement account of the subscriber at the time of his death is equal to or less than two lakh rupees, the nominee/legal heirs, has the option to withdraw the entire accumulated pension wealth by submitting request come undertaking form without purchase of annuity. Upon exercise of this option the right of the family members to receive any pension or other amounts under the National Pension System shall extinguish.
- 15. The nominee/claimant claiming the lump sum amount needs to provide his/her complete bank details like name of the bank, branch, complete address of branch, account type and IFSC otherwise the form may get rejected by CRA. Please make sure there is no cutting attempt on and overwriting in this section. The lump sum payment shall be directly credited to the bank account of the nominee/claimant through electronic mode of payment.