Form N2 AC

National Pension System

POP-SP/SE Registration Form

(Please fill all the details in CAPITAL LETTERS & in BLACK INK only. All Fields mark with * are mandatory.)

POP-SP/SE Registration Number :
(To be allotted by CRA)

Sir/Madam,

We hereby submit a request to be registered as a POP-SP/SE. The necessary details are provided below:

1.Name of the POP-SP/SE *:

2. POP Registration Number (Allotted by CRA)*:

3. POP -SE Code :

4. PFRDA Approval Date*:

D D M M Y Y Y Y

5. POP-SP/SE Address *:

Flat/Unit No/Block no*.

Name of Premise /Building /Village

Area /Locality/Taluka

District/Town/City*

State/Union Territory*

Country*

Pin Code*

6. Authorised Contact Person's Name & Designation *:

7. Phone No. *:

(STD code) (Phone No.)

8. Alternate Phone No :

(STD code) (Phone No.)

9. Fax No:

(STD code) (Phone No.)

10. Email ID*: *(Email ID should be of Official Person)*

11.Mobile No. : + 9 1

KFINTECH
EXPERIENCE TRANSFORMATION

Form N2 AC

12. POP-SP/SE Bank Details

Bank Account Type* Savings A/c ☐ Current A/c ☐

Bank A/c Number *

Bank Name*

Bank Branch*

Bank Branch Address*

Pin Code*

Bank Branch MICR Code

Bank Branch IFS Code* (Indian Financial Systems Code)

We hereby agree and declare that the information supplied in the application, is complete and true. We further agree that, we will notify Central RecordKeeping Agency (CRA) immediately about any change in the information provided in the application.

	Signature of Authorised Signatory Name : Place : Designation : Date : D D M M Y Y Y Y Department :
POP-SP/SE Stamp	

Authorization by POP:

	Signature of Authorised Signatory Name : Place : Designation : Date : D D M M Y Y Y Y Department :
POP Stamp	

Following Documents to be submitted along with the form:

- ☐ Certified Copy of PFRDA Approval Letter for POP appointment.
- ☐ Form should be accompanied with the covering letter of POP duly signed by authorised signatory.

Any change in the information provided should be intimated to CRA with proper authorization.