

8. Permanent Address*: If same as above, Please Tick else,
 Flat/Unit No, Block no.

 Name of Premise/Building/Village

 Area/Locality/Taluka

 District/Town/City

 State / Union Territory

 Country

 Pin Code _____

9. Phone No. _____

 STD Code Phone No.

10. Mobile No. _____

11. Email ID

12. Do you want to subscribe to SMS Alerts (To be made available later, on a chargeable basis): Yes No

13. Subscribers Bank Details: (Please refer to Sr. No. 6 of the instructions)
 You want to change Bank details of: Tier I Tier II

(In case you want to change bank details in both Tier I & Tier II Account, tick both check box)

Tier I Account : Savings A/c Current A/c
 Bank A/c Number

 Bank Name

 Bank Branch

 Bank Address

 Pin Code _____
 Bank MICR Code _____
 IFS code (Wherever applicable) _____

Tier II Account: If same as above for Tier I Yes else,
 Savings A/c Current A/c
 Bank A/c Number

 Bank Name

 Bank Branch

 Bank Address

 Pin Code _____
 Bank MICR Code _____
 IFS code (Wherever applicable) _____

Section B - Subscriber's Nomination Details (Please refer to Sr. No.7 of the instructions)

You want to change Nomination details of: Tier I Tier II

(In case you want to change nomination details in both Tier I & Tier II Account, tick both check box)

Tier I Account :

1. Name of the Nominee:

1st Nominee	2nd Nominee	3rd Nominee
First Name*	First Name *	First Name*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Middle Name	Middle Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Last Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

1st Nominee	<input type="text"/>	2nd Nominee	<input type="text"/>	3rd Nominee	<input type="text"/>
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3. Relationship with the Nominee:

1st Nominee*	2nd Nominee*	3rd Nominee *
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Percentage Share:

1st Nominee*	<input type="text"/>	%	2nd Nominee *	<input type="text"/>	%	3rd Nominee*	<input type="text"/>	%
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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
<input type="text"/>	<input type="text"/>	<input type="text"/>
Middle Name	Middle Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Last Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Tier II Account : If same as above for Tier I Yes else,

1. Name of the Nominee:

1st Nominee	2nd Nominee	3rd Nominee
First Name*	First Name *	First Name*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Middle Name	Middle Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Last Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

1st Nominee	<input type="text"/>	2nd Nominee	<input type="text"/>	3rd Nominee	<input type="text"/>
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3. Relationship with the Nominee:

1st Nominee*	2nd Nominee*	3rd Nominee *
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Percentage Share:

1st Nominee*	<input type="text"/>	%	2nd Nominee *	<input type="text"/>	%	3rd Nominee*	<input type="text"/>	%
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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 [Grid]	First Name [Grid]	First Name [Grid]
Middle Name [Grid]	Middle Name [Grid]	Middle Name [Grid]
Last Name [Grid]	Last Name [Grid]	Last Name [Grid]

Section C –Request for Reissue of I-PIN/T-PIN

I hereby request you to reissue the following

T-PIN I-PIN

Section D –Request for Reissue of PRAN card.

Reissue of T-Pin, I-Pin and reissue of PRAN card will be chargeable by the CRA.

I _____, the applicant, do hereby declare that the information provided above is true to the best of my knowledge & belief. Date : [Grid] D D M M Y Y Y Y	Signature/Thumb Impression* of the Subscriber
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To be filled by POP-SP

KYC Compliance (Section A – 1,2,3, 7, & 8) : Yes

KYC document accepted for identify proof : _____

KYC document accepted for address proof : _____

Document accepted for date of birth proof : _____

Copy of PAN card submitted : Yes No (In case submitted as identity proof or date of birth proof or/and for updation of PAN)

PAN Compliance : Yes

POP-SP Seal	[Signature Box]
	Signature of Authorized Signatory
	Name : _____ Place : _____ Designation : _____ Date : [Grid] D D M M Y Y

[To be filled by CRA - Facilitation Centre (CRA-FC)]

Received by: _____ CRA-FC Registration Number: _____

Received at: _____ Date: _____

Acknowledgement Number (To be provided by CRA-FC) [Grid]

INSTRUCTIONS FOR FILLING THE FORM

- a. This form is to be used for the purpose of change/correction in subscriber personal details, nominee details, reissue of I-Pin /T-Pin or reissue of PRAN card.
- b. The form is to be submitted at the POP-SP for carrying out the necessary changes.
- c. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only. 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.
- d. Please tick the box on the left margin of appropriate row where change/correction is required' and provide the details in the corresponding row. Please strike off the remaining blank rows for which no change is requested. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- e. **Details Marked with (*) are the mandatory fields.**
- f. **Mention 12 digits PRAN correctly.**
- g. All dates Should be in "DDMMYYYY" Format
- h. Application incomplete in any respect and/or not accompanied by required documents is liable to be rejected. The application is liable to be rejected if mandatory fields are left blank.
- i. **Reissue of T-Pin, I-Pin and reissue of PRAN card will be chargeable by the CRA.**
- j. **Subscribers are advised to retain the acknowledgement slip signed/ stamped by the POP-SP where they submit the application**

Section A - Subscriber's Personal Details					
Sr. No.	Item No.	Item Details	Guidelines for Filling the Form		
Section A – Subscriber's Personal Details					
1.	1.	Full Name	In case of change in name please provide the requisite proof such as marriage certificate or Gazette copy of name change.		
2.	2.	Gender	Please provide a copy of Gazette Notification supporting the change		
3.	3.	Date of Birth	Please ensure that this matches with the Date of Birth as indicated in the document provided in support.		
4.	5.	Category	Fund transfers by NRIs would be subject to regulatory requirements as prescribed by RBI from time to time and FEMA requirements.		
5.	7 & 8.	Present Address & Permanent Address	An NRI subscriber would need to furnish an Indian address as present address for communication and bank details within India. All future communications will be sent to present address. List of documents accepted as proof of address is given below.		
6.	13	Bank Details	If subscriber mentions any of the bank details (except MICR code), all the bank details shall be mandatory. In case of bank details for Tier II, it is mandatory for the Subscriber to provide a cancelled cheque , the details of which should match with the details provided for change.		
Section B - Subscriber's Nomination Details					
7	1 to 4.	Nomination Details	1) Subscriber can nominate a maximum of three nominees. 2) Subscriber cannot fill the same nominee details more than once for same tier. 3) Percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). 4) 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 shall be mandatory.		
Illustrative list of documents acceptable as proof of identity and address					
No.	Proof of Identity (Copy of any one)		No.	Proof of Address (Copy of any one)	
1	School Leaving Certificate		1	Electricity bill [^]	
2	Matriculation Certificate		2	Telephone bill [^]	
3	Degree of Recognized Educational Institution		3	Depository Account Statement [^]	
4	Depository Account Statement		4	Credit Card Statement [^]	
5	Bank Account Statement / Passbook		5	Bank Account Statement / Passbook [^]	
6	Credit Card		6	Employer Certificate [^]	
7	Water Bill		7	Rent Receipt [^]	
8	Ration Card		8	Ration Card	
9	Property Tax Assessment Order		9	Property Tax Assessment Order	
10	Passport		10	Passport	
11	Voter's Identity Card		11	Voter's Identity Card	
12	Driving License		12	Driving License	
13	PAN Card		13	Certificate of address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.	
14	Certificate of identity signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer.				
Note: 1) Proof of Address mentioned in Sr. No. 1 to 7 (^) should not be more than six months old on the date of application. 2) You are required to bring original documents & two self-attested photocopies (Originals will be returned over-the-counter after verification)					

GENERAL INFORMATION FOR SUBSCRIBERS

For more information

Visit us at <http://www.npscra.nsdil.co.in>

Call us at 022-24994200

e-mail us at info.cra@nsdl.co.in

Write to: Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

Details for printing PRAN card in Hindi (please provide the details in Devnagri script):

Please note that the manner in which the names are provided in this annexure will be displayed on the PRAN card. However, date of birth will be printed in English only.

Subscriber's Full Name:

First Name * : _____

Middle Name : _____

Last Name : _____

Father's Full Name:

First Name * : _____

Middle Name : _____

Last Name : _____

(* Indicates Mandatory Field)

Signature/Thumb Impression* of Subscriber

Name of the Subscriber: _____