

**NATIONAL PENSION SYSTEM (NPS) - MINOR SUBSCRIBER REGISTRATION FORM for NRI / OCI**

To National Pension System Trust, I hereby request that an NPS account be opened in my ward's name as per the particulars given below:  
 \* indicates mandatory fields. Please fill the form in English and BLOCK letters (Refer general guidelines at instructions page).

**1. Minor Subscriber Details:** (Refer Sr. No. 2 of the instructions) *Use Annexure I if name exceeds the space provided below*

Subscriber Name\* F i r s t M i d d l e L a s t  
 Date of Birth\* d d m m y y y y DOB Proof\*  Birth Certificate  Passport  PAN  Matriculation/School Certificate  
 Gender\*  Male  Female  Transgender Nationality\*  
**Minor Bank Account Details** (Refer Sr no. 6 of the instructions) Bank Account Type\*  NRE  NRO  
 Bank A/c Number\*  
 Bank Name\* IFSC / Swift Code\*  
 NRIs/OCIs should make contributions through NRE/NRO account only and fund transfers should comply to regulatory requirements of RBI / Govt and FEMA, as applicable.

**2. Selection of Pension Fund and Investment Choice\*** (Refer Sr no. 7 of the instructions)

Pension Fund* (Please Tick (v) any one)		Investment Choice (Please Tick (v) any one)				
<input type="checkbox"/> Aditya Birla Sunlife Pension Mgmt Ltd	<input type="checkbox"/> LIC Pension Fund Ltd	(Auto) => <input type="checkbox"/> (Default) Moderate - LC50				
<input type="checkbox"/> Axis Pension Fund Mgmt Ltd	<input type="checkbox"/> Max Life Pension Fund Mgmt Ltd	OR				
<input type="checkbox"/> DSP Pension Fund Managers Pvt Ltd	<input type="checkbox"/> SBI Pension Funds Pvt Ltd	<input type="checkbox"/> Conservative - LC25	or	<input type="checkbox"/> Aggressive - LC75		
<input type="checkbox"/> HDFC Pension Mgmt Co Ltd	<input type="checkbox"/> Tata Pension Mgmt Pvt Ltd	OR				
<input type="checkbox"/> ICICI Prudential Pension Funds Mgmt Co Ltd	<input type="checkbox"/> UTI Retirement Solutions Ltd	(Active) => <input type="checkbox"/> mention the % share in each asset class below				
<input type="checkbox"/> Kotak Mahindra Pension Fund Ltd		E (Upto 75%)	C (Upto 100%)	G (Upto 100%)	A (Upto 5%)	Total
		% Equity	% Corp Bonds	% Govt Sec	% Alt Assets	100%

\* Selection of one Pension Fund is mandatory, else the form is liable to be rejected.

**GUARDIAN'S DETAILS**

**3. Personal Details:** (Refer Sr. No. 1 to 3 of the instructions) *Use Annexure I if name exceeds the space provided below*

CKYC Identifier RA Code  
 Guardian's Name\* F i r s t M i d d l e L a s t  
 Relationship with the minor\*  Mother  Father  Legal Guardian  
 Date of Birth\* d d m m y y y y Place of Birth\*  
 Gender\*  Male  Female  Transgender Nationality\*  
 PAN Card\* or Form 60 furnished  
 Annual Income Range\* upto 1 lac 1 lac-5 lac 5 lac-10 lac 10 lac-25 lac 25 lac-1 Cr Above 1 Cr  
 Occupation Details\*  Public Sector  Private Sector  Professional  Self Employed  Homemaker  Others .....  
 Please Tick If Applicable  Politically exposed person  Related to Politically exposed person (Please refer instruction no. 1)

Paste recent  
passport size  
photograph of the  
Guardian  
(3.5 cm x 2.5 cm size)

Do not sign across  
Do not staple / clip

**4. Proof of Identity and Address\*** (All Fields are mandatory, please refer instruction no. 5 and 6)

Non-Resident Indian		Overseas Citizen of India	
Passport No.		OCI Card No.	
Passport Expiry	d d m m y y y y	Date of Issue	d d m m y y y y
Visa / Work Permit No.		Place of Issue	
Expiry	d d m m y y y y	Foreign Passport No.	
Indian Address Proof (copy to be provided)	<input type="checkbox"/> Passport <input type="checkbox"/> Aadhaar <input type="checkbox"/> Driving License <input type="checkbox"/> Voter ID <input type="checkbox"/> NPR <input type="checkbox"/> POP Certificate (sec 10)	Overseas Address Proof (copy to be provided)	<input type="checkbox"/> OCI Card <input type="checkbox"/> Passport <input type="checkbox"/> Driving License (specify)

**5. Current Indian Address\*** (Proof of this address is mandatory for NRI)

Line 1  
 Line 2  
 District State/U.T.  
 Country PIN Code

**6. Current Overseas Address\*** (Proof of this address is mandatory for OCI)

Line 1  
 Line 2  
 District State / Province  
 Country Zip / PIN

**7. Contact Details\***

Mobile\* Telephone with STD code)  
 Email ID\*

**8. FATCA\* (Foreign Account Tax Compliance Act) & CRS Declaration** (Refer Sr no. 8 of the instructions) :

I am a tax resident of India and not resident of any other country  Yes  No (Please fill the Annexure - II)

**9. Declaration by the Guardian\*** (Refer Sr no. 9 of the instructions)

I have read and understood the terms and conditions of the National Pension System. The information and documents furnished by me for myself and my ward are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to POP / CRA / NPS Trust. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

**Declaration under the Prevention of Money Laundering Act, 2002**  
 I hereby declare that the contribution paid by me/on my ward's behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my ward's PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

**10. To be filled by the POP**

POP Registration Number  
 POP-SP Registration Number

**Existing Customer:** I/we hereby certify/confirm that Mr. / Ms. .... and his/her guardian ..... are our existing customer. The above subscriber & his/her guardian are having operative Bank/ Demat/ Folio / ..... account (specify nature of the account) with account number /client ID ..... & ..... The KYC documents of the guardian and DOB proof of the subscriber are available with us which matches the requirement for opening the said account and are in compliance with PMLA Rules. I/We further confirm that the said a/c of the guardian is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP).

Signature / Thumb Impression* of Guardian (*LTI in case of males and RTI in case of females to be provided. Toe impression in case no hands)	Signature of Authorised person	Rubber Stamp of the POP
Date ..... Place .....	Name of the Authorised Person .....	Designation of the Authorised Person .....
	Date .....	Place .....

**Acknowledgement**

Name of the Subscriber: .....  
 Application Receipt Date: ..... Initial contribution amount .....  
 Signature and Stamp of POP

**INSTRUCTIONS FOR FILLING THE MINOR SUBSCRIBER REGISTRATION FORM for NRI / OCI**

**General Guidelines**

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected.  
 (b) Copies of documents submitted by the applicant should be self-attested.  
 (c) Applicant is advised to retain the acknowledgement slip signed/ stamped by the PoP/PoP-SP office.

Sr	Heading	Instruction
1	Eligibility / Applicability	(a) This Form is applicable only to guardians who are either Non Resident Indians (NRIs) or Overseas Citizen of India (OCIs). Foreign Nationals and Persons of Indian Origin (PIO) are not allowed to open NPS account. When an OCI guardian comes to India with an intention to stay for an indefinite period and stays more than 182 days, he/she loses the privileges available to NRIs/OCIs and thus such OCI may open an NPS account applicable to resident Indians.
2	PRAN Card and Kit	The english e-PRAN card and welcome kit would be sent to the applicant vide email. In case the applicant wish to have a physical or hindi PRAN Card / welcome kit, special request may be sent to the POP / CRA. Higher charges may be applicable on such requests.
3	Subscriber's / Guardian's Name	(a) Guardian's Name should match with the PAN. (b) If the name has more than 30 characters, please fill Annexure II for the same.
4	Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions such as heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.
5	Proof of Identity and Address	If the guardian is submitting Aadhaar as proof of Identity and Address, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
6	Current Address	Providing current address is mandatory. The submitted address proof should contain the current address as provided in the form.
7	DOB and Bank A/c	(a) DoB proof is mandatory. (b) Minor's Bank a/c or joint account with guardian (NRE/ NRO) is mandatory. PoPs/CRA's to verify the Bank details. (c) The guardian shall make contributions through NRE/NRO account only and fund transfers should comply to regulatory requirements of RBI / Govt and FEMA, as applicable.
8	Investment Choices	(a) Selection of one Pension fund is mandatory, else the form is liable to be rejected. (b) Moderate LC50 (Default): 50% allocation into Equity; (c) Conservative LC25: 25% allocation into equity; (c) Aggressive LC75: 75% allocation into equity (d) Active Choice: Subscriber can actively decide the allocation into Equity / Corporate Debt / G-Sec / Alternate assets.
9	FATCA & CRS Declaration	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India: • Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA. • Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number) • In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided. • In case applicant is declaring US person status as 'Yes', provide FATCA declaration as per Annexure II.
10	Declaration / Signature by the Guardian	In case the guardian is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the authorised official of PoP attesting the same under his/her official seal and stamp.

Applicable CRA charges:	NSDL	Kfintech	CAMS
Account Opening charges	₹	₹	₹
Account Maintenance Charges (p.a.)	₹	₹	₹
Charge per transaction	₹	₹	₹

**ANNEXURES TO THE MINOR SUBSCRIBER REGISTRATION FORM for NRI / OCI**

**Annexure I - If characters of name exceeded the space provided**

Subscriber's First Name																														
Middle Name																														
Last Name																														
Guardian's First Name																														
Middle Name																														
Last Name																														

**Annexure II - FATCA (Foreign Account Tax Compliance Act) & CRS Declaration (Refer Sr no. 9 of the instructions):**

US Person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Father's Name																																
Country of Birth			Place & City of Birth																																
Particulars	Country 1						Country 2						Country 3																						
Country/countries of Tax Residency																																			
Address in the jurisdiction for Tax Residence	Address Line 1																																		
	City/Town/Village																																		
	State																																		
	ZIP/Post Code																																		
Tax Identification Number (TIN)/Functional equivalent Number																																			
TIN/ Functional equivalent Number Issuing Country																																			
Validity of documentary evidence provided (Wherever applicable)																																			
																														ddmmyyyy		ddmmyyyy		ddmmyyyy	
I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete and hereby accept the same.																														Signature / Thumb Impression* of Guardian (refer instruction 10)					