



ATAL PENSION YOJANA (APY)

(Administered by Pension Fund Regulatory and Development Authority)

Application for Modification/Addition of details in APY & Change of APY Service Provider (APY-SP)

Application for Change of APY Service Provider (APY-SP)

To,
The Branch Manager, _____ Bank, _____ Branch _____

Sir/Madam,

I would like to transfer my PRAN account under APY as per the details given below:

* Indicates mandatory fields. Please fill the form in English and BLOCK letters

PRAN (Permanent Retirement Account Number)* _____ Please attach copy of e PRAN

1. BANK DETAILS:

Bank A/c Number* _____
Bank Name* _____ Bank Branch* _____

2. PERSONAL DETAILS:

Name of Applicant * Shri Smt. Kumari
Full Name* _____
Date of Birth* (As Register under APY) | d | d | / | m | m | / | y | y | y | y | Mobile No | _____
Email ID _____
Married Yes No If married , spouse name is mandatory. Spouse will be the default nominee under APY.
Name of Spouse _____
Nominee's Name* _____
Nominee's Relationship with the Subscriber _____
Additional Details in case nominee is a Minor
Date of Birth* | d | d | / | m | m | / | y | y | y | y |
Guardian's Name* _____
Whether beneficiary of other statutory social security schemes Yes No
Whether Income Tax Payer Yes No

3. PENSION DETAILS (As registered under APY)

Pension Amount (Please tick(✓)) * 1000 2000 3000 4000 5000
Frequency of Contribution (Please tick(✓)) * Monthly Quarterly Half Yearly
Contribution Amount (Monthly) (in Rs.) _____
I hereby authorize the bank to debit my above mentioned bank account till the age of 60 for making payment under APY as applicable based on my age and the Pension Amount selected by me. If the transaction is delayed or not effected at all for insufficient balance, I would not hold the bank responsible. I also undertake to deposit the additional amount together with overdue interest thereon.

I the applicant, do hereby declare that the information provided above is true to the best of my knowledge & belief.

Date | d | d | / | m | m | / | y | y | y | y |
Place _____
Signature/Thumb Impression* of Subscriber
(* LTI in case of male and RTI in case of female)

ACKNOWLEDGEMENT - Application for Change of APY Service Provider (APY-SP) (To be filled by the Bank)

Name of the Subscriber: _____
PRAN Number _____
Guaranteed Pension Amount _____ Periodicity of Contribution _____
Monthly Contribution Amount under APY (in Rs.) _____

Name of the Bank: _____
Bank Branch: _____
Receiving Officer's Name: _____
Date of Receipt of Application: _____
Stamp and Signature of the Bank

INSTRUCTIONS FOR FILLING THE FORM:

1. Please quote the correct PRAN and fill the correct details
2. The request will be processed by the target APY-SP (Bank / Post Office) to which subscriber wants to shift his/her APY Account.
3. The personal details (except date of birth) given in the form will get registered afresh under APY.
4. Date of Birth and Pension details in the form are to be filled up as per the existing APY scheme details.