



EMPLOYEES' PROVIDENT FUND ORGANIZATION
Pension Claim Form (Aadhaar)
(Form 10 D)

(To be used only by Employees/members where complete details in Form 11(New), Aadhaar Number, Nomination details and Pension Bank Account are available in UAN Portal and UAN has been activated]

Mobile Number:

1. Universal Account Number :

2. Aadhaar Number :

3. Full Name (in capital letters) :

4. Full Postal Address :

5. Date of superannuation (58 years)/Exit (DD/MM/YEAR)

6. Option for Drawing Pension

<input type="checkbox"/>	Superannuation (on attaining 58 years)
<input type="checkbox"/>	Short Service/Reduced pension (before 58 years)

	Date of commencement of Pension for Short Service Pension
<input type="checkbox"/>	Date of claim
<input type="checkbox"/>	Date attained 50 years
<input type="checkbox"/>	From the Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

7. Please sanction release of pension to my pension bank account mentioned below. This account has been seeded in the UAN Portal

Name of Bank	Branch	Bank Postal Address	Account Number	IFSC code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. I certify that I have filed my nomination form with Aadhaar details of all family members online through member portal. It is also certified that I have verified the data seeded in UAN Portal and found all data including Form 11(new), pension bank account details and Aadhaar number of myself and my family members and found them to be correct.

9. I am enclosing self attested copies of the following documents (in duplicate)

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Passport size photograph of self and spouse(in duplicate) |
| <input type="checkbox"/> | Copies of Aadhaar Card for each member of family (in duplicate) |
| <input type="checkbox"/> | Copy of first page of Bank passbook having details of pension bank account |
| <input type="checkbox"/> | One cancelled cheque containing member's name, bank account number and IFSC code |

Date:

(Signature of Member)

Place: