Request For Change/Correction in Subscriber Master details And/Or Reissue of I-Pin/T-Pin/PRAN Card
(To avoid mistake(s), please read the accompanying instructions carefully before filling up the form)

<table>
<thead>
<tr>
<th>For DDO Use:</th>
<th>For PAO use:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Receipt: ____________</td>
<td>Date of Receipt: ____________ PAO Stamp:</td>
</tr>
<tr>
<td>Signature and Stamp of DDO</td>
<td>Entered By: ____________ Date: ____________</td>
</tr>
<tr>
<td>Acknowledgement No.</td>
<td>Verified By: ____________ Date: ____________</td>
</tr>
</tbody>
</table>

I hereby request the following details for the change. *(Please tick)*

**A) Changes or Correction in Personal details**

**B) Changes or corrections in Nomination Details**

Permanent Retirement Account Number *

I hereby submit the following details of change. *(Please tick the box on left margin of appropriate row where change/correction is required and provide the details in the corresponding rows.)*

**Section A – Change in Personal Details** *( * Indicates Mandatory Field)*

1. Full Name (Full expanded name : initials are not permitted)
   - Please Tick as applicable,
     - Shri
     - Smt.
     - Kumari
   - First Name *
   - Middle Name
   - Last Name *

2. PAN No.
   - [ ]

3. Father’s Full Name:
   - First Name *
   - Middle Name
   - Last Name *

Would you like to have a reprint of the card on account of changes in point 1 or 3 *(Please tick)*

- Yes [ ]
- No [ ]

4. Present Address:
   - Flat/Unit No, Block no. *
   - Name of Premise/Building/Village
   - Area/Locality/Taluka
   - District/Town/City *
   - State / Union Territory *
   - Country *
   - Pin Code *

5. 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 *
   - [ ]

For DDO Use: Date of Receipt: ____________
Signature and Stamp of DDO

For PAO use: Date of Receipt: ____________ PAO Stamp:
Entered By: ____________ Date: ____________
Verified By: ____________ Date: ____________
State / Union Territory *

Country *

Pin Code *

6. Phone No. (STD code) 

Phone No. 

7. Mobile No. 

8. Email ID 

9. Subscribers Bank Details: 
   Savings A/c 
   Current A/c 
   Bank A/c Number *
   Bank Name *
   Bank Branch *
   Bank Address *
   Pin Code *
   Bank MICR Code (Wherever applicable) 

10. Value Added Service 
   i) SMS Alert: Yes  No 
   ii) Email Alert:  Yes  No 

Section B - Subscriber’s Nomination Details (* Indicates Mandatory Field for nominee)

1. Name of the Nominee *:
   1st Nominee 
   2nd Nominee 
   3rd Nominee 
   First Name * 
   First Name * 
   First Name * 
   Middle Name 
   Middle Name 
   Middle Name 
   Last Name * 
   Last Name * 
   Last Name * 

2. Date of Birth (In case of minor)*: 
   1st Nominee 
   2nd Nominee 
   3rd Nominee 

3. Relationship with the Nominee*: 
   1st Nominee 
   2nd Nominee 
   3rd Nominee 

4. Percentage Share *:
   1st Nominee 
   2nd Nominee 
   3rd Nominee 

5. Nominee’s Guardian Details (in case of minor)*:
   1st Nominee’s Guardian Details 
   2nd Nominee’s Guardian Details 
   3rd Nominee’s Guardian Details 
   First Name * 
   First Name * 
   First Name * 
   Middle Name 
   Middle Name 
   Middle Name 
   Last Name * 
   Last Name * 
   Last Name * 

   1st Nominee 
   2nd Nominee 
   3rd Nominee 
   % 
   % 
   %
Annexure S2

6. Conditions rendering nomination invalid:

<table>
<thead>
<tr>
<th>1st Nominee</th>
<th>2nd Nominee</th>
<th>3rd Nominee</th>
</tr>
</thead>
</table>

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.

I hereby request for reissue of PRAN card on account of:

- [ ] Loss of PRAN card
- [ ] Damage to old card

INSTRUCTIONS FOR FILLING FORM

1. 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.
2. The form is to be submitted at the Nodal office for carrying out the necessary changes.
3. 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.
4. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
5. Details Marked with (*) are the mandatory fields.
6. Mention 12 digits PRAN correctly.
7. All Dates Should be in “DDMMYYYY” Format
8. If permanent address & present address are different, all future communications will be sent to present address.
9. Nomination: Subscriber can nominate maximum three nominees. Subscriber can not fill the same nominee details more than once. Percentage share value for all the nominees must be integer. Fractional value will not be accepted. Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, nomination will be rejected.
10. Reissue of T-Pin, I-Pin and reissue of PRAN card will be chargeable by the CRA.