



# 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) (version1.0)

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 <input type="checkbox"/>	2000 <input type="checkbox"/>	3000 <input type="checkbox"/>	4000 <input type="checkbox"/>	5000 <input type="checkbox"/>
Frequency of Contribution (Please tick(✓)) *	Monthly <input type="checkbox"/>	Quarterly <input type="checkbox"/>	Half Yearly <input type="checkbox"/>		

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

## 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.