**Form: 601PW** 

## **National Pension System**

(Under regulation 8 of PFRDA (Exist & withdrawal) regulations, 2015)

Partial Withdrawal Form for Tier I account under NPS

(Please fill the details in CAPITAL LETTERS & in BLACK INK only)

For Nodal Office use											
PAO/DTO/POP/POP-SP/N	LAO Reg.no.										
Receipt No (in case of PO	P/POP-SP):										
PRAN											
Acknowledgment Numbe	er										
(Generated by CRA Syste	·m)										
Entered By:					Da	ate: _					
Verified By:					Da	ate:			_		
Please se	elect your Cate	egory (p	olease tio	ck)							
Government Se	ector		Corpo	orate Se	ector						
All Citizen of In	ıdia		NPS li	ite /Swa	avalamb	an					
To,											
NPS Trust											
Sir/Madam,											
l hereby submit partial withd	rawal request		_							Inder National Pens  below the necessa	
Section A- Subscriber's Pe	•			,					6		<b>,</b>
	13011ai Details										
PRAN*											
Name of the Subscriber*											
Mobile No#											
Email ID#											
#Subscribers Mobile No and	d Email ID provi	ded her	e will not	be upda	ted in CF	RA reco	ords. Fo	or upo	latior	n of mobile No. and	Email ID in
CRA records, subscriber is re	equired to subr	nit S2 Fo	rm.								
a. % of Partial Withdrawa		%									
{maximum 25% of own contribu	tion (without accru	ued incom	e earned the	ereon) onl	y}						
b. Purpose of Withdrawa	l* (Please tick	on box	below v	vith rea	son app	olicab	le & sı	ubmit	t the	supporting docu	ments)
1. For Higher education	of children incl	uding a l	egally ado	pted ch	ild						
2. For the marriage of ch	ildren, includin	ig a legal	lly adopte	d child;							
3. For the purchase or co						ame o	r in a jo	oint na	ame v	with legally wedded	spouse

**Form: 601PW**K a. Cancer b. Kidney Failure (End Stage Renal Failure) c. Primary Pulmonary Arterial Hypertension d. Multiple Sclerosis e. Major Organ Transplant f. Coronary Artery Bypass Graft g. Aorta Graft Surgery h. Heart Valve Surgery i. Stroke j. Myocardial Infarction k. Coma I. Total Blindness m. Paralysis n. Accident of serious/life threatening nature c.Bank account details of the subscriber (please provide the details of the bank where the withdrawal amount shall be credited, tick as applicable & submit the bank proof) Same bank account already registered under NPS Another bank account, please provide the details below Bank Account Number **Bank Name** Type of Bank Account Savings account Current account **Branch Name & Address** IFS Code **Section B-Declarations** Declaration by the Subscriber\*: 1. I hereby declare that information stated above is true and correct to the best of my knowledge & belief and that I have completed minimum of ten years in to the NPS as required for partial withdrawal and eligible to withdraw the amount requested above due to the urgent need of funds to support the reason mentioned above. \_\_\_\_(Name) with PRAN\_\_\_ \_\_\_\_\_ agree that in case of any failure of direct credit, for any reason whatsoever, NPS trust/CRA shall not be responsible. I also agree that NPS trust/CRA shall not be responsible /liable for any losses that may arise due to incorrect bank account details provided here in above. Place: Signature/Thumb Impression of the Subscriber\*\* \*\*Left thumb impression in case of illiterate male claimant and right thumb incase of illiterate female Declaration by Nodal Office(for Government Sector Subscribers):\* I / We hereby declare that the subscriber Shri/Smt/Kumari \_\_\_\_\_ is employed with us and I have verified the genuineness of the reason for his/her withdrawal request and bank details submitted by him/her request for partial withdrawal are correct. Signature & Stamp of DDO Registration No. of DDO

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Date: Registration No. of PAO/DTO Signature & Stamp of the DTO/PAO/DDO Declaration by POP/CHO/Aggregator (for Non government sector subscribers): I hereby declare that the subscriber Shri/Smt/Kumari with PRAN has signed /thumb impressed before me after he/she has read the entries/have been read over by him/her for the request of partial withdrawal under NPS. I have verified the genuineness of the reason for his/her withdrawal request and bank details submitted by him/her in respect of his/her request for partial withdrawal are correct. D D M M Y Y Y Y Signature & Stamp of the Authorized Person at POP-SP/CBO/NL-CC Registration no. of POP-SP/CBO/NL-CC Date : D D M M Y Signature & Stamp of the Authorized Person at POP/CHO/NL-AO Registration No.of POP/CHO/NL-AO **ACKNOWLEDGMENT RECEIPT** Acknowledgement slip to the NPS Subscriber on receipt of partial withdrawal application form (To be filled by DDO/PAO/DTO/CHO/CBO/POP/Aggregator) Received from PRAN: Date: DDO/POP-SP/NL-CC Registration Number: PAO/CDDO/DTO/POP/NL-AO Registration Number: Received at \_\_\_\_\_

Acknowledgment Number

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**Form: 601PW**K

## **Instructions page**

## Instructions for filling up the form:

- 1. All fields marked with \* are mandatory. All dates should be in DD/MM/YYYY format.
- 2. The Subscriber shall submit the application to the respective Nodal Office/POP/Aggregator for processing o request.
- 3. Before submitting the withdrawal form ,Subscriber should ensure that the bank account details are matched from the bank passbook/bank statement or cheque etc to ensure that the details are correct. Subscriber should also attach the bank proof (Cancelled Cheque/Copy of bank certificate) with the Partial Withdrawal Form submitted.
- 4. Subscriber should specify the purpose of partial withdrawal and a proof need to be submitted for the same.
- 5. Subscriber should be in the NPS atleast for a period of 3 years.
- 6. A Subscriber shall be permitted to withdraw not exceeding 25% of the contributions made by such subscriber to his/her individual pension account,
- 7. The Nodal Officer /POP/Aggregator must verify the details of the bank account of subscriber.
- 8. Withdrawal amount received after the execution of the withdrawal request can be different from the requested Amount to the extent of difference in NAV of two different days.
- 9. The withdrawal amount shall directly be credited to the bank account of the Subscriber as mentioned in the withdrawal form.
- 10. Incase, the subscriber already owns either individually or in the joint name a residential house or flat, other than ancestral property, no withdrawal under PFRDA regulations is permitted.
- 11. Treatment of specific illness covers the subscribers, his legally wedded spouse, children, including a legally adopted child or dependent parents suffer from the specified illness, which shall comprise of hospitalization and treatment.
- 12. The permitted withdrawal shall be allowed only if the eligibility criteria and limit for availing the benefits are complied with by the Subscriber.
- 13. Frequency: the subscriber shall be allowed to withdraw only a maximum of three times during the entire tenure of subscription under the National Pension System and not less than a period of five years shall have elapsed from the last date of each of such withdrawal. Five years should have elapsed between two withdrawals shall not apply in case of treatment for specified illnesses or in case of withdrawal arising out of exist from National Pension System due to the death of the Subscriber.
- 14. For more detailed description of partial withdrawal option under NPS, please refer Regulation 8 of PFRDA (Exist & withdrawals) Regulations, 2015.
- 15. Funds will be transferred to Subscriber's bank account on authorization of withdrawal request by office and documents are required to be forwarded to CRA for recordkeeping within 60 days of authorization of request