

West Bengal State Electricity Distribution Company Ltd.

(A Govt. of West Bengal Enterprise)

Employee Services & Employee Relations-II
Registered office: Vidyut Bhavan (8th floor, "C" Block)
DJ Block, Karunamoyee, Salt Lake, Kolkata - 91

CIN: U40109WB2007SGC113473

Email: eser2 @wbsedcl.in , Website of the Company: www.wbsedcl.in

2 (033) 23197655, (033)23197829

OFFER OF APPOINTMENT FOR THE POST OF JOT CUM TA (2nd PHASE)

REF: NOTIFICATION NO. MPP/2018/05(ii)

Appointment order in favour of enlisted candidates have been issued vide O.O. No ES&ER-II/Recruitment/App/ JOT cum TA/2018-05(ii)/04 Date: 26.09.2022 and sent by Speed Post & Email. Candidates are advised to report on scheduled date & time, as mentioned in the enclosed list, at Seminar Hall-I,7th Floor,'D' Block,Vidyut Bhavan, Bidhannagar, Kolkata-91 for submission of documents & upon successful submission of documents, they will be allowed to join in the post of JOT Cum TA under WBSEDCL.

Candidates are advised to bring the following documents in original and self-attested photocopies positively:

- 1. Admit Card of Secondary Level Examination as age proof.
- 2. All Mark sheets and Certificates
- 3. Caste Certificate (if applicable)
- 4. Service Bond and Agreement (Proforma enclosed) in non-judicial stamp paper of ₹ 100/- each.
- 5. Release Order (in Original) of previous employer (if applicable).
- 6. Family Declaration & Nationality Declaration (Proforma enclosed).
- 7. Police Verification Roll (in duplicate)- Proforma Enclosed.
- 8. Personal Information for ERP Module (Proforma Enclosed).
- 9. Data Collection Format for SAP HR Module (Proforma enclosed).
- 10. Declaration for Information Security Management System.
- 11. Composite Declaration Form-11.

The candidates may download the formats from the website and submit the same on date as mentioned below.

Enclo: List of the candidates & Proforma.

U.Sarkar)

Appointing Authority & General Manager (HR&A)

WBSEDCL

LIST OF THE CANDIDATES FOR THE POST OF JOT Cum TA OFFERED APPOINTMENT VIDE O.O. NO: ES&ER-II/Recruitment/App/ JOT cum TA/2018-05(ii)/04 26.09.2022

SI NO	REGN. NO	NAME	FATHER'S NAME	DATE OF BIRTH	DATE OF SUBMISSION OF DOCUMENTS & JOINING
1	1814368	SWETA DHAR	SUSANTA BIKASH DHAR	25-12-96	a soliting
2	1863801	ABHIK MANDAL	CHANDRA SEKHAR MANDAL	11-02-97	
3	1828709	TAPAS LOHAR	SADHAN LOHAR	01-02-93	17.10.2022
4	1802973	SUBHASIS MONDAL	ASHOK KUMAR MONDAL	01-06-93	

(U.Sarkar)
Appointing Authority &
General Manager (HR&A)
WBSEDCL

AGREEMENT

THIS AGREEMENT is made on of the Christian Era BETWE	
Company Limited having its registered office at Vi (hereinafter referred to as 'The Employer') of the FIR	dyut Bhavan, Bidhannagar, Block-DĴ, Kolkata-91
	AND
Shri/Smt	aged aboutyears having(herein
WHEREAS on the basis of an application and the Company has decided to appoint Shri/Smt	through Orderunder WBSEDCL in regular Pay with initial endable by assessing spell of six months and on

NOW THIS AGREEMENT WITNESSES and the parties here to hereby agree as follows:-

- 1. The period of probation shall be for a period of 12 months to 18 months unless this agreement is determined and hereafter provided. The place of posting may be at any unit of the Company existing or future or at any part of **State of West Bengal**.
- 2. That the Employer will pay the Appointee so long as he/she shall remain in the Company, as per prevailing rules in force.
- 3. That the Appointee will submit himself/herself to the order of the Employer and of the Officer and Authorities under whom he/she may from time to time be placed by the Employer and will at all times obey the rules lawfully prescribed for the time being by the Employer regarding the duties to be performed by the appointee.
- **4.** That the Appointee will employ himself/herself efficiently and diligently and to the best of his/her ability and devote his/her whole time to the duties of the service and will not engage, directly or indirectly, in any trade, business, occupation or streams of study on his/her own account without getting prior permission from the Employer.
- 5. The Appointee shall not, at any time, during the continuance of his/her probation or service with the employer as aforesaid or even after the determination thereof, except by the direction of the Employer, divulge or disclose any matters of the Company and/or its business and/or other affairs and/or other secrets regarding processes, records, formulae, specifications, technical and other know-how which in the option of the Company, are deemed to be kept confidential and which may be confined to him/her or become known to him/her as such or otherwise in the course of his/her employment with the Company to any other individual/company/body corporate.
- **6.** That in the interest of organization, the Appointee may be transferred to any job to any of the units, Power Stations of the Employer/or allied concerned of the Employer/any part of the State of West Bengal.
- 7. That if the Appointee is found at any time guilty of gross misconduct or persistent unpunctuality or neglect of his/her duties, the Employer may determine his/her tenure of service during probation under this Agreement without notice or with one Month's Pay+DA in lieu thereof.
- 8. That if the Appointee leaves the Company during the period of tenure with the Company or does not serve the Company, notice as required under Clause 9 hereinafter, the Appointee shall be liable to refund an amount of Rs 1,00,000/- (One Lakh only) being the cost of training and other incidental charges with the Company.
- **9.** That besides clause 8 herein before the Appointee agree and binds himself/herself to serve the Company at any of the units and at such place as the Company may determine from time to time for a

minimum period of four years from the date of his/her appointment, in supersession of any provision for a minimum period of service made in any instrument, agreement or writing previously executed provided, however, nothing herein contained shall prejudice or affect the right of the Company in respect of any money due to the Company under or by virtue of the said agreement. The Appointee also specifically undertakes not to take up employment directly or indirectly in any other Firm/Company engaged in the same or similar product for a period of 4(four) years from the date of his/her joining duties in the Company or 2(two) years from the date of leaving the Company whichever is longer.

- 11. Should the Appointee commit any breach of this agreement or leave the service of the Company for any reason whatsoever or the Company terminates his/her services before the expiry of the said period of 3(three) years from the date of his/her completion of probation for disobedience, insubordination on misconduct or any kind or any such reason, he/she shall pay to Company the sum of Rs. 1,00,000/-(One lakh only) as mentioned in Clause 8 hereof by way of liquidated damages representing expenses incurred by the Company during the period of his/her training. The Appointee shall also execute a service Bond in respect of Clauses 9, 10 & 11 of this agreement.
- 12. That subject to Clause 9,10 & 11 above the tenure of the employment is determinable from either side by giving one month's notice in case of probation and three months' notice in case of permanent employee of the Company or Pay & D.A. in lieu thereof as per service rules of the Company.
- 13. That in respect of any other matter not provided for in the Agreement, the Appointee shall be governed by convention, Rules, Circulars, Orders, Letters of Appointment & Regulations of the Company in force or may be in force from time to time.

IN WITNESS WHEREOF the parties hereto have signed this Agreement on the day and the year first above written

(Full signature of witness)	(Signature of the Employer)
Address:	
	(Signature of the Appointee)

SERVICE BOND

	KNOW	ALL	MEN	by	these	presents	that	I	
								Son/Daugh	ter of
								residir	ng at
								shall here	eby be
held and firm	nly bound	unto -	The We	st Be	ngal Sta	ate Electrici	ty Dist	tribution Co	mpany
Limited having	ng Registe	red Of	fice at \	√idyut	t Bhavar	n, Bidhanna	gar, B	lock-DJ, K	olkata-
700 091 in th	e sum of	Rs. 1,0	00,000/-	(One	Lakh or	<u>nly)</u> of lawfu	l good	money to b	e paid
to the West	Bengal Sta	ate Ele	ctricity	Distrik	oution Co	ompany Lim	nited o	r their succ	essors
and assignee	for which	payme	ent is to	be tru	ıly and fa	aithfully mad	le we b	oind ourselv	es and
also our resp	ective heir	s, exec	cutors, a	dmini	strators	and represe	ntative	es.	
	Sianed 1	his			do	ay of		20	

WHEREAS the above named Company has	ad appointed Shri/Smt	the
post of by a contra	act of Employment vide Office	Order No.
	dated	AND
WHEREAS, as per said contract dated	dit was stip	ulated that
appointee will have to execute a bond to	serve the above named Company	for at least
three years after completion of period of	probation and on absorption at an	y unit(s) of
the Company.		

NOW THESE CONDITIONS of the above written Bond is such that if the said employee while in employment whether in the original or in any promotion or transferred post under the said Company shall duly faithfully devote to and execute, perform and discharge all the duties of his/ her office without causing any injury, loss or damage by reason of any act, default, negligence or error in judgement to the employer and shall serve above named Company for a period of at least complete three years after probation and all times hereafter indemnify and keep indemnified the said Company against all loss, damage, costs, charges and expenses by reasons of any act, default, misconduct, negligence, error in judgement, breach of duty, embezzlement and mismanagement on the part of the said appointee, then and in such event the above CONTRACT OF EMPLOYMENT shall stand void and cancelled and be of no effects, otherwise the same shall remain in full force.

- 1. Full Signature of the appointee:
- 2. Full Signature of Surety and full address:

In presence of

Witness: Signature:

Name:

Designation:

Full Address:

(With Seal of the Gazetted Officer)

FORM-I

(T	To be used where the year, month and da	ate of birth are known
	I, Shri/ Smt. / Miss	
	been selected for appointment in Company's Serv was born at	
'	was born at(date, month & year).	(birth place)
-	· , ,	
а	do further declare that the year, month and date on the control of	
P	Place:	
D	Pate:	(Signature)
. 0	Order of the Appointing Authority.	
	FORM-II	
	(To be used where only the year and mo birth are or is know	
	I, Shri/ Smt. / Miss	having
	been selected for appointment in Company's Ser	
	was born at	
	the year/ in (month) of	
	also annex herewith the following documents in statement:	original in support of the
	I do also declare that the month and date of birt	h / date of birth are / is not
	known to me, the reasons where of are briefly st	cated below:
	I do further declare that the year / year and mor	nth of birth as declared here
	is/are binding on me and I shall not ask for any	modification thereof at any
	subsequent date.	
	Place:	
	Date:	
		(Signature)
4.	Order of the Appointing Authority.	(3.3)

N.B. Portion are applicable in this form shall be scored under the signature of the applicant

A school leaving certificate with specific mention of age therein / certificate
from the Registrar of birth for those who are not matriculate / Certificate of
matriculation /School Final Examination or its equivalent (for those who have
passed Matriculation/ School Final Examination or its equivalent) will only be
acceptable as an adequate document for this purpose.

FORM OF DECLARATION OF NATIONALITY

A.	I do hereby declare that I am a Citizen of the Indian Republic and my present
	residence is
	Or
B.	I do hereby declare that I am a migrant and I have registered my name as Indian Citizen under Section 5(1) (a) of the Citizenship Act, 1955 and the certificate of registration in original / attested copy is furnished herewith.
C.	I also hereby declare that I am / am not a member of the Scheduled Caste/ $\mbox{\footnote{Tribe}}.$
Pla	ce:
Dat	te:
	(Signature of Declarant)
N.B.	Delete Sub-Para A or B not applicable under Para-1, strike out words not

applicable in Para-C.

Personal Information to be gathered for new appointees for ERP- Module

1.	. Name of the appointee (in Block Lett	er):
2.	. Designation on initial joining in service	e:
3.	. Initial Date of Joining :	
4.	. Reference of Appointment Order No and date	:
5.	. Date of Birth of the appointee :	
6.	. Nationality :	
7.	. Name of father with date of birth:	
8.	. Name of mother with date of birth:	
9.	. Permanent Address:	
	Building / Flat/ Premises No:	
	Village/Town:	Post Office:
	Police Station:	
	District and State:	
	Pin:	
10	0. Present Address:	
	Building / Flat/ Premises No:	
	Village/Town:	Post Office:
	Police Station:	
	District and State:	
	Pin:	
11	1. Sex (Please ✓ whichever is applicable) :	Male Female Others
12	2. Caste (Please ✓ whichever is applicable)	: SC ST OBC (A) OBC-B
		Unreserved
13	3. Religion:	
14	4. Weight & Height	
15	5. Identification Marks:	
16	6. Physique(Please ✓ whichever is applicab	le) : Physically Handicapped
		Low Medical Category
		Permanent incapacitated
17	7. Blood Group :	
18	8. Driving License No.:	
		D. Voter I.D. Card No:
21	1. Aadhar Card No:	
22	2. Phone No: 23	. Email id:

24. Language Known:

Language	Read	Write	Speak
Bengali			
English			
Hindi			
Nepali			
Others			

25. Educational Qualification of Employee:

SI. No.	Examination Passed	Name of the Institute	Board / recognition/ University	Year of passing	% of marks obtained

(Full name of the appointee)	(Signature of the appointee with date)

INFORMATION ON FAMILY BACKGROUND

1. a) Name of father:
b) Educational Qualification of Father :(Please ✓whichever is applicable)
Non-Matriculate Matriculate Graduate Post Graduate
c) Occupation of father: (Please √whichever is applicable):
Service(Central Govt. State Govt. PSU Private Sector)
Self Employed Other (please Specify
d) Monthly income of father from all sources:
2. a) Name of Mother :
b) Educational Qualification of Mother:(Please √whichever is applicable)
Non-Matriculate Matriculate Graduate Post Graduate
c) Occupation of mother: (Please √whichever is applicable):
Service(Central Govt. State Govt. PSU Private Sector)
Self Employed Other(please Specify)
d) Monthly income of Mother from all sources:
3. Monthly Income of family from all sources
(including agriculture, house rent, interest from deposit, etc.):
4. Are you residing with your parents: `Yes / No.
5. Number of unmarried brothers/sisters:
6. How many of your unmarried brothers/
sisters have independent income :
7. Marital status of the appointee:(Please √whichever is applicable
Married Unmarried Divorcee Widow Widower If married:
a) Date of Marriage :
b) Name of Spouse:

c)Date of birth of spouse :
d) Educational Qualification of spouse: (Please √whichever is applicable)
Non-Matriculate Matriculate Graduate Post Graduate
e) Occupation of spouse: ((Please √whichever is applicable)
Service(Central Govt. State Govt PSU Private Sector Self Employed
Other(please Specify)
f) Monthly income of spouse from all sources:
g) Number of children:
1. Name and date of birth of 1st child:
2. Name and date of birth of 2 rd Child:
(Full name of the appointee) (Signature of the appointee with date)



West Bengal State Electricity Distribution Company Ltd.

(A Govt. of West Bengal Enterprise)
পশ্চিমবঙ্গ রাজ্য বিদ্যুৎ বন্টন কোম্পানী লিমিটেড
পশ্চিমবঙ্গ সরকারের একটি উদ্যোগ
Vidyut Bhavan, DJ Block
Karunamoyee, Salt Lake, Kol - 91
CIN: U40109WB2007SGC113473

Passport size photograph

VERIFICATION ROLL

1	Name in full (in block capital) with aliases if any (Please indicate if you have added or dropped, at any stage, any part of your name or surname.	Last Name	Middle Name	First Name
2	The name of the post and the service applied for			
3	Present address in full (i.e. village, thana & district or house number, lane/street and road, PIN)			
	a) Home address in full (i.e. village, thana & district or house number, lane/street & road, PIN).	a)		
4	b) If originally a resident of Pakistan, Bangladesh, Nepal or			
	any other country, the address in that dominion of migration to Indian Union.	b)		

5. Particulars of places where you have resided for more than one year during the preceding five years :

From	То	Residential address in full (i.e. village, thana & district or house number, land/street & road, PIN.)

6. (a) Father's name in full with aliases, if any :					
(b) Present posta	l address (if dead, give l	ast address):			
(c) Permanent ho	me address	:			
(d) Profession		:			
(e) If in service, g	ive designation & officia	il address :			
7. Nationality of					
(a) Father		:			
(b) Mother		:			
(c) Husband/	Wife	:			
8. (a) Exact date of		:			
`	ted by birth registration Imit Card of West Benga				
	Education/any other				
(b) Present age		:			
(c) Age of Matric	ulation/School Final	:			
9. (a) Place of bir Situated	th, district & state in wh	nich it is :			
	state to which you belong	g :			
10. (a) State your	religion	:			
(b) Are you a	member of scheduled ca	nste/ :			

scheduled tribes/ OBC: Answer 'Yes' or `No` and if the answer is 'Yes' state the name thereof

(copy of certificate to be attached)

11. Educational of	aualifications sho	owing places o	f education with	years of schools 8	colleges:

Name of school/College with full Date of joining address	Date of joining	Date of leaving	Examination passed	
12. If you have at any time been employed give details:				

Designation of post	Period		Full address of the office/firm or
held or description of work	From	То	Institution & reasons for leaving previous service.

13. Have you ever been convicted by a Court for any offence or : Charge sheeted by the police in connection with any criminal proceeding? If so, the full particulars of the case should be given

14. Names of two responsible persons of your locality or two referees: (1) to whom you are known

(2)

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might inquire my fairness for employment under Government. I understand that submission of false information will make me ineligible for employment.

Date:	
Place:	Signature of the Candidate
	zetted Officer or Member of Legislature bed by the appointing authority)
Certified that I have known Shri/Shrimati	
Son/daughter of Shri	for the lastyears
months and that to the be	st of my knowledge and belief the particulars furnished by
him/her are correct.	
Date:	
Place:	Signature of the Gazatted Officer/MLA
	Designation or status & address with official seal

(Following portion to be filled in by WBSEDCL Authority)

Memo. No. forwarded:		
Date:		



West Bengal State Electricity Distribution Company Ltd.

(A Govt. of West Bengal Enterprise)
পশ্চিমবঙ্গ রাজ্য বিদ্যুৎ বন্টন কোম্পানী লিমিটেড
পশ্চিমবঙ্গ সরকারের একটি উদ্যোগ
Vidyut Bhavan, DJ Block
Karunamoyee, Salt Lake, Kol - 91
CIN: U40109WB2007SGC113473

Passport size photograph

VERIFICATION ROLL

1	Name in full (in block capital) with aliases if any (Please indicate if you have added or dropped, at any stage, any part of your name or surname.	Last Name	Middle Name	First Name
2	The name of the post and the service applied for			
3	Present address in full (i.e. village, thana & district or house number, lane/street and road, PIN)			
	a) Home address in full (i.e. village, thana & district or house number, lane/street & road, PIN).	a)		
4	b) If originally a resident of Pakistan, Bangladesh, Nepal or			
	any other country, the address in that dominion of migration to Indian Union.	b)		

5. Particulars of places where you have resided for more than one year during the preceding five years :

From	То	Residential address in full (i.e. village, thana & district or house number, land/street & road, PIN.)

6. (a) Father's name in full with aliases, if any :					
(b) Present posta	l address (if dead, give l	ast address):			
(c) Permanent ho	me address	:			
(d) Profession		:			
(e) If in service, g	ive designation & officia	il address :			
7. Nationality of					
(a) Father		:			
(b) Mother		:			
(c) Husband/	Wife	:			
8. (a) Exact date of		:			
`	ted by birth registration Imit Card of West Benga				
	Education/any other				
(b) Present age		:			
(c) Age of Matric	ulation/School Final	:			
9. (a) Place of bir Situated	th, district & state in wh	nich it is :			
	state to which you belong	g :			
10. (a) State your	religion	:			
(b) Are you a	member of scheduled ca	nste/ :			

scheduled tribes/ OBC: Answer 'Yes' or `No` and if the answer is 'Yes' state the name thereof

(copy of certificate to be attached)

11. Educational of	qualifications sho	wing places of	f education with '	years of schools 8	k colleges:

Name of school/College with full Date of joining address	Date of joining	Date of leaving	Examination passed	
12. If you have at any time been employed give details:				

Designation of post	Period		Full address of the office/firm or	
held or description of work	From	То	Institution & reasons for leaving previous service.	

13. Have you ever been convicted by a Court for any offence or : Charge sheeted by the police in connection with any criminal proceeding? If so, the full particulars of the case should be given

14. Names of two responsible persons of your locality or two referees: (1) to whom you are known

(2)

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might inquire my fairness for employment under Government. I understand that submission of false information will make me ineligible for employment.

Date:	
Place:	Signature of the Candidate
	zetted Officer or Member of Legislature bed by the appointing authority)
Certified that I have known Shri/Shrimati	
Son/daughter of Shri	for the lastyears
months and that to the be	est of my knowledge and belief the particulars furnished by
him/her are correct.	
Date:	
Place:	Signature of the Gazatted Officer/MLA
	Designation or status & address with official seal

(Following portion to be filled in by WBSEDCL Authority)

Memo. No. forwarded:		
Date:		

Data-collection format for SAP HR-Module

1.	Name o	f the employee	:	
2.	Desig na	ation	:	
3.	Employ	ee No. (For office use or	ıly):	
4. Date of Birth		Birth	:	
5.	Mobile	No.	:	
6.	Email Id	d	:	
7.	Salar y I	Information	: As mentioned below	
	i.	Salary Account No	:	
	ii.	Bank	:	
	iii.	Branch (with Pincode)	:	
	iv.	Branch IFSC Code	:	
	v.	PF Account No.	:	
	vi.	PAN NO.	:	
(Full name of the appointee)			(Signature of the appointee with date)	

	SELF DE CLARA Informati	SELF DE CLARATION with respect to Human Resource Policy for Information Security Management System (ISMS)	
Name:	ne:	SAP ERP ID:	Employee No:
Deps	Department:	Designation:	
Unit	11		
	I,	_, have read and a gree to the policies and procedures as outlined and hereby declare that:	s outlined and hereby declare that:
	(Name of the declarant)		
•	I understood the information of security practices follo	I understood the information of security practices followed at WBSEDCL and shall adhere to the policies and procedures.	orocedures.
•	I shall not engage in abusive or improper use of informat	Ishall not engage in abusive or improper use of information resources, which includes, but is not limited to, misuse of resources/privileges, tampering	f resources/privileges, tampering
	with resources and unauthorized removal of resources components.	com po nents.	
•	Ishall protect such equipment in accordance with Company's guidelines.	ompany's gui delines.	
•	Ishall protect the Company's computer and communicati	Ishall protect the Company's computer and communication systems from any damages caused by, but not limited to, virus and malicious software.	o, virus and malicious software.
•	I shall prevent unauthorized access to the above-mention	Ishall prevent unauthorized access to the above-mentioned assets and systems by third parties, including family members and others.	embers and others.
_			

Signature of the ${\bf E}$ mployee with Date:

EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 & 57) &

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

	(Decidiation by a person taking up employment in any establishment o	Which Err Scheme, 1932 and for Ers, 1993 is applicable)
1.	Name of the member	
2.	Father's Name Spouse's Name	
۷.	(Please tick whichever is applicable)	
3.	Date of Birth: (DD / MM / YYYY)	
4	Gender: (Male/Female/Transgender)	
	Marital Status: (Married/Unmarried/Widow/Widower/Divorce-)	
5 6	(a) Email ID:	
O	(b) Mobile Nc.:	
7	Whether earlier a member of Employees' Provident Fund Scheme, 1952	Yes / No
8	Whether earlier a member of Employees' Pension Scheme, 1995	Yes / No
	Previous employment details: [if Yes to 7 AND/OR 8 above] a) Universal Account Number:	
0	b) Previous PF Account Number:	
9	c) Date of exit from previous employment: (DD/MM/YYYY)	
	d) Scheme Certificate No. (if issued)	
	e) Pension Payment Order (PPO) No. (if issued)	
	a) International Worker:	Yes / No
	b) If yes, state country of origin (India/Name of other country)	
10	c) Passport No.	
	d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]	
	KYC Details: (attach self attested copies of following KYCs)	
44	a) Bank Account No. & IFS Code	
11	a) bank/icesaite no. a ii s code	
	b) AADHAR Number	
	c) Permanent Account Number (PAN), if available	
	Und	ERTAKING
	 Certified that the particulars are true to the best of my knowledge. I authorize EPFO to use my Aadhar for verification/authentication/eKYO Kindly transfer the funds and service details, if applicable, from the pre (The transfer would be possible only if the identified KYC detail approve using his Digital Signature Certificate) In case of changes in above details, the same will be intimated to empl 	vious PF account as declared above to the present P.F. Account. ed by previous employer has been verified by present employer
	Date: Place:	Signature of Member
	DECLARATION B	Y PRESENT EMPLOYER
	A. The member Mr./Ms./Mrs has joined	on and has been allotted PF Number
	B. In case the person was earlier not a member of EPF Scheme, 1952	and EPS, 1995:
	(Post allotment of UAN) The UAN allotted for the member of Please Tick the Appropriate Option:	base
	The KYC details of the above member in the UAN data transfer request has been generated on portal.	abase have been approved with Digital Signature Certificate an

As the DSC of establishment are not registered with EPFO, the member has been informed to file physical claim (Form-

13) for transfer of funds from his previous establishment.