CENTRAL RECORDKEEPING AGENCY

ATAL PENSION YOJANA (APY)

Form For Registration of Banks/FIs as service providers for APY

Registration Number of Bank/FI
(To be allotted by CRA)

(Please fill all the details in CAPITAL LETTERS & in BLACK INK only. All Fields are mandatory.)

Sir/Madam,

We hereby submit a request to be registered as service providers for APY. The necessary details are provided below:

1. Name of the Bank:

2. Head Office address:

Flat/Room/Door/Block no.

Premises/Building/Village

Area/Locality/Taluk

City/Town/District **PIN CODE**

State/U.T. **Country**

3. Website address:

4. Compliance Officer's details: **(One point contact for APY related issues)**

Name:

Designation:

Phone No: **Mobile No.**

STD Code **Phone number**

Email id:

5. Grievance Redressal Officer's details:

Name:

Designation:

Phone No: **Mobile No.**

STD Code **Phone number**

Email id:

6. Bank's Details: **(Designated Bank account for accepting APY contributions only)** **Bank Account Type** Saving A/c ☐ Current A/c ☐

Bank A/c Number:

IFS Code **MICR Code**

7. We hereby agree and declare that the information supplied in the application is complete and true AND we further agree that, we will notify CRA immediately about any change in the information provided in the application with proper authorisation.

Signature of Authorised Signatory

Name:---------- **Place:** ----------

Designation:---------- **Date:** **D D** **M M** **Y Y**

Bank Seal

Following document to be submitted along with the form:

1.Attested copy of the Registration Certificate issued by RBI.