GOVERNMENT OF ODISHA FINANCE DEPARTMENT

No. Pen-250/12 36690***,

Bhubaneswar, dated

1/11/12

OFFICE MEMORANDUM

Sub: Operational guidelines for implementation of New Pension System (NPS) for State Autonomous Bodies (SABs) and State Public Sector Undertakings (SPSUs).

The restructured defined contribution pension scheme was introduced by the State Government for the employees who have joined the State Government services w.e.f. 01.01.2005 in Pensionable Establishments as per the Finance Department Notification No.44451/F., dt.17.09.2005. In order to operationalize the New Pension System, guidelines were issued by the Finance Department vide O.M.No.30132/F Dt.13.07.06, Letter No.16950 (255)/F Dt.02.04.07 and Director of Treasuries and Inspection, Odisha, Bhubaneswar vide Letter No.Pen-II-89/11-3612/DTI dt.10.02.2011.

2. Scheme in Brief:

(i) The New Pension Scheme works on defined contribution basis and have two tiers namely: Tier – I and Tier – II. The contribution to Tier – I is mandatory for all the employees of the Government joining the pensionable establishment on or after 01.01.2005 where as Tier – II contribution is optional and at the discretion of the Government servant.

(ii)

(a) In Tier – I, each employee will subscribe a monthly contribution of 10% of Basic Pay + Dearness Allowance + Grade Pay from his salary to the contribution pension scheme and equal matching contribution will be made by the Employer for each employee who contributes to the scheme. The contribution towards the pension scheme shall be recovered from the salary of the employee every month. The said recoveries will start from the salary of the month following the month in which the Government servant has joined service. Therefore, no recovery will be effective from the month of joining. For example, for employees joining service in the month of January 2005, deductions to Tier – I contribution will start from the salary bill of February 2005. No deduction will be made from his salary earned in

- January 2005. Similarly, deductions for those joining service in the month of February 2005 will start from the salary bill of March 2005 and so on.
- (b) At the time of retirement, Government servant will receive a lump sum amount of 60% deposited in Tier-I account as pension wealth and it is mandatory for the Government servant to invest remaining 40% of his pension wealth to purchase an annuity from Insurance Regulatory and Development Authority (IRDA)-regulated Life Insurance Company. The annuity shall provide for pension during the life time of the employee/dependants as per the option availed at the time of selecting the annuity scheme.
- 3. To operationalize the new pension scheme, the Government of India has established a Pension Fund Regulatory and Development Authority (PFRDA) to lay down the architecture, regulate the pension system and related matters and to protect the interest of the subscribers. The PFRDA has appointed National Securities Depository Limited (NSDL), Mumbai as the Central Record Keeping Agency (CRA) to maintain the records of contribution and its distribution in various pension fund schemes. NPS Trust has been set up by the PFRDA as the Trustee for NPS funds who will monitor the activities of the Pension Fund Managers (PFMs). The Bank of India has been appointed as the Trustee Bank. Any clarification in respect of implementation of New Pension Scheme shall be guided by PFRDA norms.
- 4. The State Government have decided to implement the restructured defined contribution scheme as per the architecture and guidelines issued by the PFRDA and entered into separate agreement with National Securities Depository Limited (NSDL), Mumbai as the Central Record Keeping Agency (CRA) & NPS Trust, New Delhi for smooth management of the new pension scheme. Directorate of Treasuries and Inspection, Odisha has been declared as State Nodal Agency for implementation of New Pension Scheme in State Government.

5. NPS for State Autonomous Bodies (SABs) and State Public Sector Undertakings (SPSUs):

After the implementation of the PFRDA guided NPS in State Government, some State Autonomous Bodies and State Public Sector Undertakings (SPSUs) have also expressed their interest to join the new system. It is now clarified that the SABs and SPSUs desirous of joining PFRDA guided defined contribution pension system may also implement the same for their employees who have joined in the service on or after 01.01.2005 following

the principle and procedure laid down by PFRDA and also in conformity with the rules & procedures applicable to them.

6. The operational procedure for implementation of New Pension Scheme (NPS) for the State Autonomous Bodies (SABs) and State Public Sector Undertakings (SPSUs):

(i) Letter of Consent:

The SABs and SPSUs do not need to sign separate agreement with NSDL and NPS Trust, as the same has already been signed by the State Government with the above authorities. The SABs and SPSUs those desirous of joining NPS are required to submit the duly authorized "Letter of Consent" to PFRDA with copy to CRA (NSDL), NPS Trust, Head of the concerned Administrative Department and the Nodal Officer designated by the State Government for NPS (DT&I). Format of the consent letter is enclosed in Annexure - I and can also be downloaded from the NSDL website www.npscra.nsdl.co.in.

(ii) Appointment of Designated Office:

The SABs and SPSUs may also appoint a designated office as a 'Single point contact' to interface with NSDL (CRA) for all the issues relating to operationalisation of NPS architecture. The SABs and SPSUs shall also submit Master Creation Form (MCF) to CRA at the time of joining. The MCF can be downloaded from the aforesaid NSDL website.

(iii) Registration of Administrative Offices:

The SABs and SPSUs need to register the following entities with the CRA, NSDL by submitting duly filled in prescribed application forms in N1, N2 & N3. (Annexure –II,III & IV).

- (a) Nodal office of SAB and SPSU for oversight mechanism of NPS implementation.
- (b) The Administrative office to perform the day-to-day activities on behalf of the subscribers.
- (c) The Administrative office responsible for collection and forwarding subscriber's details like registration, maintenance and contribution.
- (d) All these offices shall be registered on the basis of submission of physical forms to CRA i.e. Form N1 for the Nodal Office, Form N2 for the Administrative Office responsible for day-to-day activities on behalf of the subscribers and Form N3 for Drawing & Disbursing Officers.

(e) The respective forms are annexed to the Notification and can also be downloaded from the website www.npscra.nsdl.co.in.

(iv) Model of Contribution Upload:

Each of SAB and SPSU shall have to intimate the CRA (NSDL) about the model of data and fund flow to be adopted i.e. Decentralized or Centralized.

- (a) **Decentralized:** This mode of upload is generally adopted if there are multiple locations/cities in the SAB and SPSU and Subscribers' Contribution (SC) details will be uploaded from all the multiple locations and funds will be transferred from these multiple locations to the Trustee Bank.
- (b) Centralized: This model is generally adopted if there is a single designated location/city in a SAB and SPSU and subscriber contribution (SC) details will be uploaded to CRA and funds will be transferred to Trustee Bank from a centralized point.

(v) Registration of Subscribers:

All the employees of SAB and SPSU covered under NPS shall be registered on the basis of submission of physical application forms (Form S1) to the CRA which has Facilitation Centers (FC) located at the State Capital. The details regarding process of registration of the Nodal Offices and their functions in the CRA system and registration of Subscribers is provided in the 'Standard Operating Procedures' (SOP) published by the NSDL. The same can be downloaded from the above mentioned website of NSDL.

(vi) Upload of Monthly Contribution:

Once the subscribers are registered, SAB and SPSU shall commence upload of the monthly subscriber's contribution (SC) in the CRA system as per the model selected.

(vii) Accounting Procedure:

The Accounting Procedure for recovery of employee contribution and drawal of the employers contribution may be decided by the SABs and SPSUs based on the process of the salary drawal and accounting system. This may be decided by SABs in consultation with PFRDA, New Delhi and NSDL, Mumbai.

(viii) Payment of CRA charges:

As mentioned in the contract agreement executed between PFRDA and CRA, the bill for the CRA charges with regard to the services rendered for the employees of SAB and

SPSU shall be raised against the Chief Executive Officer (CEO) / Nodal Officer. The SABs and SPSUs may decide as to whether the service charges of CRA on account of registration and transaction are to be borne by the employees or SAB and SPSU. In case of State Government, it has been decided that the service charge of CRA will be borne by the Government.

- 7. All State funded Universities may follow these guidelines for their employees coming under the coverage of NPS who have joined in the service on or after 01.01.2005.
- 8. The respective Administrative Departments shall oversee the implementation mechanism of NPS in SABs and SPSUs under their administrative control.
- 9. User Manuals and prescribed registration forms such as S1, N1, N2 & N3 are available in the NSDL and Odisha Treasury website.
- 10. Clarifications, if any, for implementing the NPS may be sought from Director of Treasuries and Inspection, 5th Floor, Treasury and Accounts Bhawan, Kharavela Nagar, Bhubaneswar 751 001.

By order of the Governor

Additional Secretary to Government

Memo No. 36691 (10)
Proposed 1/11/12 Copy forwarded to the Secretary to Governor, Odisha/ Secretary to Chief Minister, Odisha/ Private Secretary to Minister, Finance, Odisha/ Secretary to OLA, Bhubaneswar/ All R.D.Cs/ Secretary to O.P.S.C, Cuttack/ Accountant General (A&E), Odisha, Bhubaneswar/ A.G (Audit), Odisha, Bhubaneswar for information and necessary action. Under Secretary to Government Memo No. 36692 (395)
Copy forwarded to All Departments of Govt.,/All Heads of Departments for information and necessary action. They are requested to circulate this office memorandum among the sub-ordinate offices working under their administrative control immediately. Under Secretary to Government Memo No. 36693 /F Dated /////2 Under Secretary to Government Copy forwarded to the Director of Treasuries and Inspection, Odisha for information and necessary action. Under Secretary to Government Memo No. 36694 (315)
/F Dated 1/11/12 Copy forwarded to All Collectors/ All District and Session Judges/All Financial Advisors and Addl. Financial Advisers/ All Sub-Collectors/ All Treasury, Special Treasury and Sub-Officers/Director General, Gopabandhu Academy Administration, of Chandrasekharpur, Bhubaneswar/ Director, Madhusudan Das Regional Academy of Financial Management, Chandrasekharpur, Bhubaneswar / Principal, Secretariat Training Institute, Bhubaneswar for information and necessary action. Memo No. 36695 (150)
Copy forwarded to all Officers and all Branches of Finance Department/Deputy Under Secretary to Government Examiner, Local Fund Audit, Finance Department/ Efficiency Audit Organization, Finance Department for information and necessary action. Memo No. 366 96 /F Dated /////2 Under Secretary to Government 30 Copy forwarded to the Principal System Analyst and Portal Head, C.C.F., Secretariat for information and necessary action.

He/She is requested to host this office memorandum in the Odisha Government Web site for wide circulation.

Under Secretary to Government

ON THE LETTER HEAD OF STATE AUTONOMOUS BODY

File No	Dated:
To PFRDA New Delhi	
Sub: Operationalisation of the	ne New Pension System (NPS)
Sir,	
on or after (date Architecture, and that we shal	we hereby undertake to ensure that our employees recruited of adoption of NPS) would be brought over to the NPS I be governed by all the directions and scheme of things as er the NPS Architecture, from time to time.
comply with and honour all th by PFRDA/NPS Trust with all by the terms and conditions o	NPS architecture as operationalised by PFRDA. We shall be requirements in regard to the various arrangements made the NPS intermediaries including the CRA. We shall abide f the agreement executed by the State of
The appointment of NSDL as State of Trust as well as NSDL, as exte	CRA for NPS shall be co-terminus with the agreement the (name of concerned State Government) had with NPS ended from time to time.
of (name billing by CRA, as already pro	pattern and scheme preference options adopted by the State e of concerned State Government). We agree for the direct ovided for in PFRDA's existing contract with CRA, as also under the NPS Architecture and to be bound by the entire e, from time to time.
those presently followed by St	ss flow in respect of our organization would be identical to tate Government, and that NSDL would engage in dialogue ther they would like to upload data centrally or through
Yours faithfully, Sd/- Authorised Signatory of the St	tate Autonomous Body
CC To- 1. NSDL 2. NPS Trust 3. Head of the concerned Depart 4. Nodal officer designated by	artment the State Government for NPS

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lease note that	any change i	n the infor	mation prov	vided should	d be intimat	ted to CR	A with pr	oper au	thorization	•

CENTRAL RECORDKEEPING AGENCY

Page 1

Points of Presence Service Providers (POP-SP) Registration Form (Please fill all the details in CAPITAL LETTERS & in BLACK INK only. All Fields mark with * are mandatory.)
POP-SP Registration Number: (To be allotted by CRA)
Sir/Madam,
We hereby submit a request to be registered as a Point of Presence - Service Provider (POP-SP). The necessary details are provided below:
1. Name of the POP-SP *:
1. Palme of the FOF-SF
2. POP Registration Number (Allotted by CRA)*:
3. PFRDA Approval Date*:
D D M M Y Y Y
4. POP-SP Address *: Flat/Unit No, Block no. *
Name of Premise/Building/Village
Area/Locality/Taluka
District/Town/City *
State / Union Territory *
Country *
Pin Code *
5. Authorised Contact Person's Name & Designation *:
6. Phone No. *:
STD Code Phone Number
7. Alternate Phone No. :
STD Code Phone Number
8. Fax No.:
9. Email ID *:
(Email ID should be official Email ID)
10. Mobile No.:

Type of Account*: Savings A/c Current A/c Bank A/c Number * Bank A/c Number * Bank A/c Number * Bank Branch* Bank Branch* Bank Branch Address* Bank Branch Address* Bank Branch IFSC (Indian Financial Systems Code) We hereby agree and declare that the information supplied in the application, is complete and ruse. AND we further agree that, we will notify Central Record/ceping Agency (CRA) immediately about any change in the information provided in the application. Bank Branch IFSC Signature of Authorised Signatory Name Designation Date D D M M Y POP-SF Seal Signature of Authorised Signatory Name Place Designation Designation Date D D M M Y Pop Seal Signature of Authorised Signatory Name Place Designation Designation Date D D M M Y Pop Seal Signature of Authorised Signatory Name Place Designation Designation Designation Designat	nnexure UOS-N2		Page 2
Bank A/c Number * Bank Name* Bank Branch* Bank Branch Address* Bank Branch Address* Bank Branch IFSC	1. POP-SP Bank Details*:		
Bank Name* Bank Branch Ba	Type of Account*:	Savings A/c Current A/c	
Bank Branch* Bank Branch Address*	Bank A/c Number *		
Bank Branch* Bank Branch Address*	Bank Name*		
Pin Code* Bank Branch Address* Bank MICR Code* Bank MICR Code* Bank Branch IPSC			
Pin Code* Bank MICR Code* Bank MICR Code* Bank Branch IFSC			
Bank MICR Code* Bank Branch IFSC	Bank Branch Address*		
Bank MICR Code* Bank Branch IFSC			
Bank Branch IFSC	Pin Code*		
We hereby agree and declare that the information supplied in the application, is complete and true. AND we further agree that, we will notify Central Recordkeeping Agency (CRA) immediately about any change in the information provided in the application. Signature of Authorised Signatory	Bank MICR Code*		
We hereby agree and declare that the information supplied in the application, is complete and true. AND we further agree that, we will notify Central Recordkeeping Agency (CRA) immediately about any change in the information provided in the application. Signature of Authorised Signatory	Bank Branch IFSC	(Indian	Financial Systems Code)
AND we further agree that, we will notify Central Recordkeeping Agency (CRA) immediately about any change in the information provided in the appliance of Authorised Signatory Name :		(moran	Thancial Systems Code)
Signature of Authorised Signatory Name: Place: Designation: Date: D D M M Y POP-SP Seal Signature of Authorised Signatory Withorization by POP: Signature of Authorised Signatory Name: Place: Designation: Date: D D M M Y Pop Seal Certified Copy of PFRDA Approval Letter. Form should be accompanied with the covering letter of POP duly signed by authorised signatory.	We hereby agree and declare that the infor	mation supplied in the application, is complete and true.	
Name:	AND we further agree that, we will notify	Central Recordkeeping Agency (CRA) immediately about	t any change in the information provided in the a
Name:			
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Name:		Signature of	Authorised Signatory
Designation: Department: Depar			
POP-SP Seal Signature of Authorised Signatory		Name:	Place :
POP-SP Seal Signature of Authorised Signatory			D D M M Y
Signature of Authorised Signatory Name: Place: Designation: Date: D D M M Y POP Seal POP Seal Designation: Date: D D M M Y Certified Copy of PFRDA Approval Letter. Form should be accompanied with the covering letter of POP duly signed by authorised signatory. Details of two Digital Signature Certificates (DSC) as per Annexure UOS-N2-A		Department :	
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Signature of Authorised Signatory			
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Details of two Digital Signature Certificates (DSC) as per Annexure UOS-N2-A		Designation :	
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□ Form should be accompanied with the covering letter of POP duly signed by authorised signatory. □ Details of two Digital Signature Certificates (DSC) as per Annexure UOS-N2-A			
Details of two Digital Signature Certificates (DSC) as per Annexure UOS-N2-A			
lease note that any change in the information	☐ Certified Copy of PFRDA Approval	Letter	tory
	 Certified Copy of PFRDA Approval Form should be accompanied with the 	Letter.	tory.

CENTRAL RECORDKEEPING AGENCY

(To avoid mistake)	s), please read t	O REGI	anying in	structio	ns care	fully b	efore fi	lling u	ip the	form)			
This form is to be used for the purpo. Governments and Union Territories.	se of registra	tion of D	rawing	and Di	sbursi	ing O	ffice (l	DDO)	and	equiva	ilent e	entitie:	s in State
DDO Registratio (To be allotted													
We are pleased to inform you that The details required for registration	t our Drawin on in the CRA	g and Di A system	sbursin are as j	g Offic	ee has	deci	ded to	join	the N	lew Pe	ension	Syst	em.
1. DDO TAN (Optional): (Refer to instruction no.11)													
2. Name of the DDO Office*:													
3. DDO Address: Flat/Unit No, Block no. *													
Name of Premise/Building/Vill	age												
Area/Locality/Taluka								<u> </u>					
District/Town/City *													
State / Union Territory *					_								
Country *												_	
Pin Code *	DI N												
	Phone No.	* LL (STD	code)			Phon	e No.)						
Alternate Phone No:							T T		T	7			
4. Official Email ID* (Refer to ins	struction no '	5)											
													
5. Authorised contact persons des	ignation *:			L					1				
					-							-	
6. Name of the Department:						1 1							7
7. (a) Name of the Ministry *: (R	Lefer to instru	iction no	.6)									•	
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						DDO	stamn a	nd Sio	natura	of Aut	horisa	1 Sinn	atom.

nnexure N3				9	Pag
(b) Existing DDO Code*:		Refer instruction	no. 7)		
DTO Registration Number (To be filled by DTO)	*:	(Re	fer instruction	n no.8)	
Name of the State Govt. / U	Jnion Territory*:		,		
We hereby agree and decla	re that the information provid	ed in the applica	tion, is compl	lete and true.	
				Date: Place:	
DDO Stamp	Signature of Author	rised Signatory	of DDO		
Name of Authorised Sign	natory:				
To be attested by DTO			Date:		
			Place: Name of A	uthorised Signatory :	
DTO Stamp	Signature of Authorised	d Signatory			
DTO Reg. No. (Allotted	by CRA)				
(Refer instruction no.9)	1				
	, ,	Received on			
		Name of the	officer:	y	
(To be filled at CRA)		Signature of	the officer: _		
	A Stamp				
structions for filling the form		acedkooning Acce	av National Co	ourities Denository Limito	d 4+1

- Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (
- 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
- The form should be filled up completely. Details marked with (*) are mandatory fields.
- Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- Email ID should be the official Email ID of the Drawing and Disbursing Officer & not of any individual person.
- 6. Kindly provide Name of the Ministry under which DDO office is functioning.
- Kindly mention the DDO code allotted by respective State Governments / Union Territories.
- 8. Kindly mention DTO Registration No. allotted by CRA to the District Treasury Office.
- 9. Form has to be duly authorised by DTO registered at CRA. Till it has been registered, it shall retain the forms.
- 10. The application form in the prescribed format can be freely downloaded from the CRA website (http://www.npscra.nsdl.co.in).
- 11. TAN is the Tax Deduction and Collection Account Number allotted. by Income Tax Department. New TAN is a ten character alphanumeric number with the following structure:
 - First four digits (Alphabets), Next Five digits (Numeric) and last digit (Alphabets).
 - It is advisable that DDO verifies from the Income Tax website whether TAN has been allotted as per the new format.
- 12. For more information contact CRA at 022-24994200 or write to CRA at Central Recordkeeping Agency, National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.