

CENTRAL RECORDKEEPING AGENCY

DIRECTORATE OF TREASURY AND ACCOUNTS REGISTRATION FORM

(To avoid mistake(s), please read the accompanying instructions carefully before filling up the form)

This form is to be used for the purpose of registration of Directorate of Treasury and Accounts (DTA) and equivalent entities in State Governments and Union Territories./State Autonomous Bodies

DTA Registration Number : [grid] (To be allotted by CRA)

We are pleased to inform you that our Directorate of Treasury and Accounts has decided to join the National Pension System. The details required for registration in the CRA system are provided below:

1. DTA AIN (Optional): [grid] (Refer to instruction No.5)

2. DTA Type: State Autonomous Body [checkbox checked]

3. Name of Office\*: [grid]

3. Office Address \*:

Flat/Unit No, Block no. \*

[grid]

Name of Premise/Building/Village

[grid]

Area/Locality/Taluka

[grid]

District/Town/City \*

[grid]

State / Union Territory \*

[grid]

Country \*

[grid]

Pin Code \*

[grid]

Phone No. \*

[grid]

[grid]

(STD code)

(Phone No.)

Alternate Phone No:

[grid]

[grid]

Fax No:

[grid]

[grid]

4. Official Email ID\* (Refer to instruction No.6)

[grid]

5. Authorised contact person's designation \*:

[grid]

6. No. of DTOs attached\*: [grid]

7. Name of the State Govt. / Union Territory\*: [grid]

Directorate of Treasury and Accounts Office stamp & signature of authorised signatory

**Annexure N1**

I/We hereby agree and declare that the information provided in the application, is complete and true.

I/We understand that there would be PFRDA approved *Terms and Conditions* on the CRA website *governing Nodal Office's use of I-Pin (to view and transact online) to access CRA / NPSCAN*. I/We agree to be bound by the said terms and conditions and understand that CRA may, as approved by PFRDA, amend any of the services completely or partially without any new Declaration/Undertaking being signed.

	<b>Signature of Authorised Signatory</b>
	<b>Name:</b> _____ <b>Place:</b> _____ <b>Designation:</b> _____ <b>Date:</b> _____
<b>Directorate of Treasury and Accounts Stamp</b>	

<b>(To be filled at CRA)</b>	<b>Received on</b> _____
	<b>Name of the officer:</b> _____
	<b>Signature of the officer:</b> _____
<b>CRA Stamp</b>	

**Instructions for filling the form:**

1. The form is to be submitted to the address – 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.
2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.
3. The form should be filled up completely. Details marked with (\*) are mandatory fields.
4. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
5. AIN is Account Office Identification Number allotted by Income Tax Department.
6. Email ID should be official Email ID of the Directorate of Treasury and Accounts office & not of any individual person.  
Eg: [xyzcompany@rediffmail.com](mailto:xyzcompany@rediffmail.com)  
[xyzcompany@yahoo.com](mailto:xyzcompany@yahoo.com)
7. Kindly mention the DTA code allotted by respective State Governments / Union Territories/State Autonomous Bodies.
8. The application form in the prescribed format can be freely downloaded from the CRA website (<http://www.npscra.nsdl.co.in>).
9. 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.