# 0

### GREATER HYDERABAD MUNICIPAL CORPORATION

Office of the Chief Financial Advisor Greater Hyderabad Municipal Corporation

### REMINDER - III

### CIRCULAR

No:100/FA/NCPC/GHMC/2012 - 원

Dt:11-10-2012

Sub: GHMC-- New Contributory Pension -- (NPS)-Operationalisation of (NPS) -- Registration process-- N3
Forms Called for -- Reg

Ref: 1.Go.Ms. No.655 Fin (Pen-I) Dept Dt:22-09-12.

- 2. UO Note No.14430/Pen.Cet/GHMC/12,Dt:07-07-12.
- 3. Cir.No.100/FA/NCPC/GFMC/12,Dt:13-09-12...
- 4. Cir.No.100/FA/NCPC/GFMC/12,Dt:26-09-12.

 $((\ ()\ ))$ 

In the circulars 2<sup>nd</sup> to 4<sup>th</sup> cited all the DDO's were requested to furnish Annexure N3 in full shape for allotrnent of DDO Code.

But out of 45 DDO's 25 DDO's have submitted N3 forms and the balance 20 DDO's particulars are to be received.

Therefore the DDO's noted in the address entry are once again requested to take necessary action for filling up of N3 forms and furnishing the same immediately.

CHIEF FINANCIAL ADVISOR
GHMC

То

The A.C. (Admn), GHMC

The A.C. (H&S), GHMC

The A.C. (Sports & Parks), GHMC

The A.C. (UCD), GHMC

The Chief Examiner of Accounts.

The Addl. Chief City Planner, GHMC

The Zonal Examiner of Accounts (EZ, WZ, NZ, CZ)

The Financial Advisors (WZ,SZ),GHMC

Dy.Commissioner's of (7,8,9,10,12,13,14,15 & 17)

Copy submitted to the All Zonal Commissioners with a request to instruct DDO's who are not furnished the Annexure N3 forms immediately for allotment of DDO Code.

Copy to the A.C. (Fin), GHMC Copy to the Commissioner's table.

DDO stamp and Signature of Authorised Signatury

| CENTRAL RECORDKEEPING  | AGENCY  |
|--|---|
| DDO REGISTRATION FORM  |   |
| (To avoid mistake(s), please read the accompanying instructions carefully This form is to be used for the purpose of registration of Drawing and Disbursing Governments and Union Territories. | observe tilling up the form)  Office (LDO) and equivalent entities in Sta |
| DDO Registration Number :  |   |
| (To be allotted by CRA)  |   |
| We are pleased to inform you that our Drawing and Disbursing Office has dec  | cided to join the New Pension System.                                     |
| The details required for registration in the CRA system are as provided below:   |   |
| 1. DDO TAN (Optional): (Refer to instruction no.11)  |   |
| 2. Name of the DDO Office*:  |   |
|  |   |
| 3. DDO Address: Flat/Unit No, Block no. *  |   |
| Trad Offict No. Block No.  |   |
| Name of Premise/Building/Village   |   |
| Area/Locality/Taluka   |   |
| Area Locality/Taitika  |   |
| District/Town/City *   |   |
| State / IV.  |   |
| State / Union Territory *  |   |
| Country *  |   |
| Die data   |   |
| Pin Code * Phone No. *   |   |
|  | N. S.   |
| Alternate Phone No: (STD code) (Phone No.  | ne No.)   |
| Atternate Phone No:  |   |
| 4. Official Email ID* (Refer to instruction no.5)  |   |
|  |   |
| 5. Authorised contact persons designation *:   |   |
| 3. Authorised contact persons designation *:   |   |
|  |   |
|  |   |
| 6. Name of the Department:   |   |
| STANDED THE BOPAL MITCH.   |   |
|  |   |
| 7. (a) Name of the Ministry *: (Refer to instruction no.6)   |   |
| (a) reade of the fringery. (Roter to instruction no.0)   |   |
|  |   |

|   | , market                        | (3                        |  |                   |   |
|---|---------------------------------|---------------------------|--|-------------------|---|
|   | 2.75                            | 400                       | and the same of th |                   |   |
| Code*:  |                                 | Refer instruction         | on no. 7)  |                   | + |
| Numbe   |                                 |                           | efer instruction n   | 10 P)             | 7 |
| anied by DTO)                                       |                                 | , n                       | erer mstruction n  | 10.6)             |   |
| Name of the State Govt. /                           | Union Territory*:               |                           |  |                   |   |
|   |                                 | 4:41                      |  | 1.                |   |
| ve hereby agree and deep                            | are that the information provid | ed in the applic          | ation, is complete   | e and true.       |   |
|   |                                 |                           |  | Date:             |   |
|   |                                 |                           |  | Place:            |   |
|   | •                               |                           |  |                   |   |
|   | Signature of Author             | sed Signatory             | of DDO   |                   |   |
| DDO Stamp   |                                 |                           |  |                   |   |
| Name of Authorised Sig                              | natory:                         |                           |  |                   |   |
| To be attested by DTO                               |                                 |                           | Date:  |                   |   |
|   |                                 |                           | Die  |                   |   |
|   |                                 |                           | Place:   |                   |   |
|   |                                 |                           | Name of Auth   | orised Signatory: |   |
|   | Signature of Authorised         | Signatory                 |  |                   |   |
| DTO Stamp   |                                 |                           |  |                   |   |
| OTO Reg. No. (Allotted I<br>Refer instruction no.9) | by CRA)                         |                           |  |                   |   |
| 120711101111011111111111111111111111111             |                                 |                           |  |                   |   |
|   |                                 | Received on               |  |                   |   |
|   |                                 | Name of the               | officer:   |                   |   |
| To be filled at CRA)                                |                                 | Signature of the officer: |  | -                 |   |

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, Genapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.

Form to be filled legibly in FLOCK LETTERS and in BLACK INK only.

**CRA Stamp** 

- 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) eaving a blank box after each word.
- 5. Email ID should be the offic al Email ID of the Drawing and Disbursing Officer & not of any individual person.

6. Kindly provide Name of the Ministry under which DDO of ice is functioning.

7. 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.

 For more information contact CRA at 022-24994200 or write to CRA at Central Records seping Agency. National Securities Depository Limited, 4th Floor, 'A' Wing, Trade World, Kimala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400 013.



# GREATER HYDERABAD MUNICIPAL CORPORATION

Office of the Chief Financial Advisor Greater Hyderabad Municipal Corporation

REMINDER - II

## CIRCULAR:

No:100/FA/NCPC/GHMC/2012 - 9

Dt:11-10-2012

Sub: GHMC – Contributory Pension Scheme – Formation of CPC in Head Office – Submission of details of employees – Reg

Ref: 1.Office Order No.100/E&A/Try/12 Dt:23-08-12 of CFA.GHMC.

- 2.Cir No.14430/Pen.Cont/GHMC/12,Dt:27-08-12 of A.C(Fin),GHMC
- 3.Cir. No.100/Pen.Cont.GHMC/12,Dt:04-09-12, of CFA,GHMC.
- 4.Cir.No.100/NCP/GHMC/12,Dt:13-09-12, of CFA,GHMC.
- 5.Cir No,100/NPC/GHMC/12,Dt:26-09-12, of CFA,GHMC. ((()))

In the circular 3<sup>rd</sup> to 5<sup>th</sup> cited all the Drawing Officer's were requested to furnish the details of the employees who were appointed on or after 01-09-2004 in the proforama I & II mentioned therein for updation of accounts and allotment of A/c. No's to the employees regarding details of employees only CH & EA (HO), CHMC have submitted the information.

The DDO's are once again requested to furnish the details of employees in profrm—I for allotment of A/c. Nos and Proforma (II) for deduction details of Pension Contribution amount every month.

They are also requested to instruct the concerned accountants to watch the Web Site frequently and follow the instructions issued in the reference 5<sup>th</sup> cited.

Chief Financial Advisor,
GHMC

To All the DDO's All the ZC's All the Zonal FA's

Copy of the A.C (Fin), GHMC Copy to the Commissioner's table