

<https://unifiedportal-mem.epfindia.gov.in/memberInterfacePohw/>

The screenshot shows a web browser window with the following elements:

- Browser Tabs:** "You are signed in as 40735" and "Member Home".
- Address Bar:** unifiedportal-mem.epfindia.gov.in/memberInterfacePohw/
- Header:** EPFO logo and text: "EMPLOYEES' PROVIDENT FUND ORGANISATION, INDIA" and "MINISTRY OF LABOUR & EMPLOYMENT, GOVERNMENT OF INDIA".
- Breadcrumbs:** Unified Member Portal / Pension On Higher Wages
- Main Content:**
 - Left Box:** "Validation of joint options for the employees who had retired before 01.09.2014 and exercised joint option under para 11(3) of EPS Scheme prior to 01.09.2014" with a "Click Here" link.
 - Right Box:** "Exercise of joint option for the Employees who were in service prior to 01.09.2014 and continued to be in service on or after 01.09.2014 but could not exercise joint option under erstwhile proviso to para 11(3) of EPS-1995" with a "Click Here" link.
- Instructional Boxes:**
 - INSTRUCTIONS FOR PPO BASED:** Information to be entered should be as per EPFO records:
 - PPO No. in the full eg. DLCPM00012345 without any special character.
 - Member's Aadhaar number, Name and Date of birth should be as available in EPFO records.Member should have a valid Aadhaar linked mobile number which is as per UIDAI records.
 - INSTRUCTIONS FOR UAN BASED:** Information to be entered should be as per EPFO records:
 - UAN of member
 - Member's Aadhaar number, Name and Date of birth should be as available in EPFO records.Member should have a valid Aadhaar linked mobile number which is as per UIDAI records.
- Footer:** ©2015, Powered by EPFO Wed, 12 Apr 2023 (PV 1.0.13). This site is best viewed at 1920 x 1080 resolution in Mozilla Firefox 58.0+. Links for "Contact Us" and "FAQs".

Registration request for exercising of Joint options under para 11(3) and 11(4) of EPS-1995 Home



UAN *	<input type="text" value="Enter UAN"/>
Name *	<input type="text" value="Enter Name"/>
Date of Birth *	<input type="text" value="DD/MM/YYYY"/>
AADHAAR *	<input type="text" value="Enter Aadhaar"/>
Aadhaar Linked Mobile Number *	<input type="text" value="Enter Aadhaar linked mobile"/>
	<input type="text" value="p 3B G"/>
Captcha *	<input type="text" value="Enter Captcha"/>

I hereby give my consent for OTP based Aadhar authentication for establishing my identity for the purpose of exercising joint option under para 11 (3) and 11 (4) of EPS, scheme.
मैं ईपीएस योजना के पैरा 11(3) और 11(4) के तहत संयुक्त विकल्प के सत्यापन के उद्देश्य से अपनी पहचान स्थापित करने के लिए ओटीपी आधारित आधार प्रमाणीकरण के लिए अपनी सहमति देता हूँ।



1

GETAUTHORIZATION
PIH

2

VALIDATEUSER

3

SUBMITAPPLICATION

4

ACHNOWLEDGEMENT
NUMBERGENERATED

Pension On Higher Wages Application Form

JointOptionForm

**[FromtheEmployeeswhowereinservicepriorto01.09.2014andcontinuedtobeinservice
onorafter01.09.2014butcouldnotexercisjointoptionundererstwhileprovisotopara1
1(3)ofEPS-1995]**

TobeexercisedbyeligiblemembersofEPS-

**1995onorbefore03rdMay,2023inaccordancewithpara44(iv)readwithPara44(v)oftheorderdated4.11.2022oftheHon'
bleSupremeCourtinSLPNo.8658-8659of2019.**

Disclaimer


I have gone through Supreme Court Judgement dated 04.11.2022 in SLP(C) No. 8658-8659 of 2019 and I am registering this joint option in terms of directions contained in the said judgement. I undertake that the

UAN Details

ये पहले से ही भरे गए हैं

UAN**	AADHAAR	XXXXXXXX**
Name	Aaaaaaaaaa aa	DateOfBirth	**/**/****
Gender	MALE	Father's/SpouseName	*****
Aadhaar Linked MobileNumber	XXXXXX**1	PPONumber(ifany)	RJRAJ000****
PPODate	**/**/****	EPFO Regional Office bywhichPPOwasissued	*****

ServiceDetails

MemberID*	DOJFPS	DOEFPS	DOJEPS	DOEEPS	
RJUDR000024100A0003327	**/--/-----	15/11/1995	16/11/1995	*****	
	पीएफ कार्ड में दर्शाई गई कंपनी से जुड़ने की तारीख	यदि पहले शामिल हुए हैं तो 15/11/95 और शामिल होने की तिथि	यदि पहले शामिल हुए हैं तो 16/11/95 और शामिल होने की तिथि	केवल पहली सेवानिवृत्ति की तिथि जिस पर 58 वर्ष की आयु शुरू हुई,	

MemberDetails

EmailId*	<input type="text" value="EnterEmailId"/>		
	अपना ईमेल आईडी		
Aadhaar Linked Bank AccountNumber *	BankAccountNumber अपना बैंक नंबर जो आधार से लिंक हो	IFSCCode*	IFSC Code बैंक का आईएफएससी कोड जो कि पासवूक/चेक में दर्शया गया है
JointOption&ContributionDetails			

Whether employer's contribution was received on wages exceeding statutory wage ceiling of ₹5000 in EPF prior to 01.06.2001 from the day his salary exceeded ₹5000? (applicable only if date of joining is prior to 01.06.2001) *

Yes No

हमेशा Yes करना है

Please attach permission under para 26(6) of EPF Scheme. Only PDF file of size upto 250KB is allowed.

Choose File Name

सेक्शन 26(6) के तहत जिसे RSMM वेबसाइट से डाउनलोड करके यहाँ अपलोड करना है दोनों दस्तावेज समान हैं कोई भी लगा सकता है

<p>WhetherEmployer’scontributionwasreceivedonwagesexceedingstatutorywageceilingof ₹6500inEPFpriorto01.09.2014fromthedayhissalaryexceeded₹6500?(applicableonlyifdateof exit is on or after 01.06.2001) *</p>	<p><input checked="" type="radio"/>Yes <input type="radio"/>No हमेशाYesकरनाहै</p>
<p>Pleaseattachpermissionunderpara26(6)ofEPFScheme.<i>OnlyPDFfileofsizeupto250KBisallowed.</i></p>	<p>ChooseFileN...e n सेक्शन 26(6) केतहतजिसे RSMM वैबसाइटसेडाउनकरकेय हाँअपलोडकरनाहै दोनों दस्तावेज समान हैं कोई भी लगा सकता है</p>
<p>Whethermemberwantstouseaccumulationavailableinhis/herPFaccountforpaymentofduecontribution for this option? *</p> <p>Pleaseuploadrelevantdocumentaryproof* such as account slip/page of passbook etc<i>OnlyPDFfileofsizeupto250KBisallowed.</i></p>	<p><input type="radio"/>Yes <input checked="" type="radio"/>No सेवानिवृत्तकर्मचारीकेलि एनाकाचयनकरें <input checked="" type="radio"/>Yes <input type="radio"/>No ChooseFileN...e मौजूदा कर्मचारी के लिए हां चयन करें पी एफ कार्ड के अनुसार 31/3/23 को उपलब्ध शेष राशि है ChooseFileN...e</p>

	<p>n</p> <p>पीएफकार्ड 31/3/2023 केएप / पीएंडए /ट्रस्टीपीएफ पर उपलब्ध यहाँ अपलोड करना है</p>
<p>Whether member is giving undertaking to deposit the contributions along with interest due till date of payment through his last employer [only when PF account has no/insufficient balance]?*</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>हमेशा yes करना है</p> <p>Choose File Name</p> <p>n</p> <p>RSMM WEBSITE</p> <p>परफॉर्मेट के अनुसार सेवानिवृत्त कर्मचारी सदस्य द्वारा वचनबद्धता</p>
<p>Please upload relevant documentary proof* <i>Only PDF file of size upto 250KB is allowed.</i></p>	

Declaration

- 1. I hereby declare that I have read and understood the Judgement in SLP(C) No. 8658-8659 of 2019 dated 04-11-2022 of the Hon'ble Supreme Court and I am exercising this joint option in terms of the directions contained in the said judgement.**
- 2. I understand and agree that as a member of the Employees' Pension Scheme, my rights to claim pension are limited to the scope of judgement and within the EPF & MP Act, 1952 and the Schemes framed thereunder.**
- 3. I further understand that the Central Government is empowered to amend the scheme as it may deem fit.**
- 4. I do hereby agree that the details of contribution and interest given by my employers are essential for the computation of dues payable for this application, and this is the full and final submission.**
- 5. I hereby undertake that the service details in the above form are correct and no material fact has been misrepresented or hidden by me.**
- 6. I hereby agree to pay due contribution in a single tranche as specified by EPFO, along with interest at rates declared under Para 60 of EPF Scheme 1952 or at the rate declared by the concerned trust of such establishment, from time to time, whichever is higher, if any.**
- 7. I hereby jointly opt along with my employer to pay full amount of contribution on salary exceeding wage ceiling under erstwhile para 11(3) (since deleted) and Para 11(4) of EPS 95 along with interest upto the last date of the month in which payment is made, in accordance with the judgement dated 04.11.2022 of the Hon'ble Supreme Court through my last employer within such period as may be directed by EPFO after verification of my joint option. If the full amount payable is not deposited by my**

last employer within such period as may be directed by EPFO after verification of my joint option, this joint option shall be liable to be treated as Null and Void.

8. I undertake that all the facts are true. If the details submitted by me or my employer are found to be incorrect at any point of time, this joint option shall be treated as Null and Void.

9. I am aware that in case of false declaration and wilful misrepresentation, appropriate penal action may be taken by EPFO against me.

Place

I agree. (Tick)



Captcha*

Enter Captcha

Save As Draft

Submit Application

Contact Us (/memberInterfacePohw/member/profile/contactuswithoutmenu?_HDIV_STATE_=13-5-

? A2CBA46654ABA986C33C3DF840A16F45) FAQs (/memberInterfacePohw/member/profile/frequentlyAskedQuestionWithoutMenu?_HDIV_STATE_=13-6-A2CBA46654ABA986C33C3DF840A16F45)

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