



Cement Corporation of India Limited

Employees Contributory Provident Fund Trust
7th Floor, Core-v, Scope Complex, Lodhi Road
New Delhi – 110003, Email: pfcci@ccilttd.in

Code No DL/2227

Joint Declaration Form

I.....having UAN No
.....Pension A/c No..... and
Aadhaar..... is/ was with establishment M/S..... The personal details
furnished to EPFO earlier were found to be incorrect /blank, and therefore request for change/update in the
member profile as follows.

S. No	Details/particulars	Incorrect details	Correct details
1	Aadhaar		
2	Name		
3	DOB		
4	Gender		
5	Fathers/Mothers		
6	Relationship		
7	DOJ		
8	DOL		
9	Reason of leaving		
10	Marital Status		
11	Nationality		

I..... s/o....., authorized signatory of the
establishment, have verified the request, document attached and the records of the establishment and certify
that the facts mentioned above are correct. I am also enclosing....., and
..... (documents of Establishment) in support of the request of the employee mentioned above.

We.....(Employee) and (Authorized Signatory) hereby declare we
have not concealed any facts and the above- mentioned facts are correct. We also indemnify that in case of
wrong payment/over payment/under payment because of the above furnished information shall be jointly held
responsible.

Authorized signatory

Name of the member