



## EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)

## EMPLOYEES' PENSION SCHEME 1995 (Please refer Para )

## EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME1976 (Please refer Para 10)

## (1st RETURN OF OWNERSHIP AFTER ONLINE APPLICATION FOR CODE NUMBER)

[THIS FORM 5A HAS BEEN GENERATED BY ONLINE FILLING/ UPDATION OF FORM 5A THROUGH ECR LOGIN OF EMPLOYER. APPLICATION NUMBER IS 1113203673.]

Code Number : GRCDP0054677000

1. Name of Establishment : ACCION FRATERNA

2. Code Number of the Establishment under EPF : GRCDP0054677000

3. Postal address of the Establishment and its branches : BANGALORE HIGHWAY, ANANTAPUR, ANANTAPUR, ANDHRA PRADESH - 515002

4. Industry or business in which : SOCIETIES CLUBS OR ASSOCIATIONS

5. Date of commencement of business : 29/06/1982

6. Date of closure by previous : N/A

7. Whether run by owner or lessee : Run by Owner

8. Particulars of owners :

S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. YARAGONDA VENKATA MALLA REDDY	01/07/1954	DIRECTOR	YARAGONDA HARI NARAYANA REDDY	AF ECOLOGY CENTRE QUARTER NO.9 UPPARAPALLI ROAD ANANTAPUR 515002	29/06/1982

9. In case on lease, particulars of : N/A

S.No.	Name	Date of Birth	Father's Name	Residential Address	Position Date

10. If registered under Factories Act, particulars of : N/A

11. Particulars of persons mentioned above who are incharge and responsible for conduct of

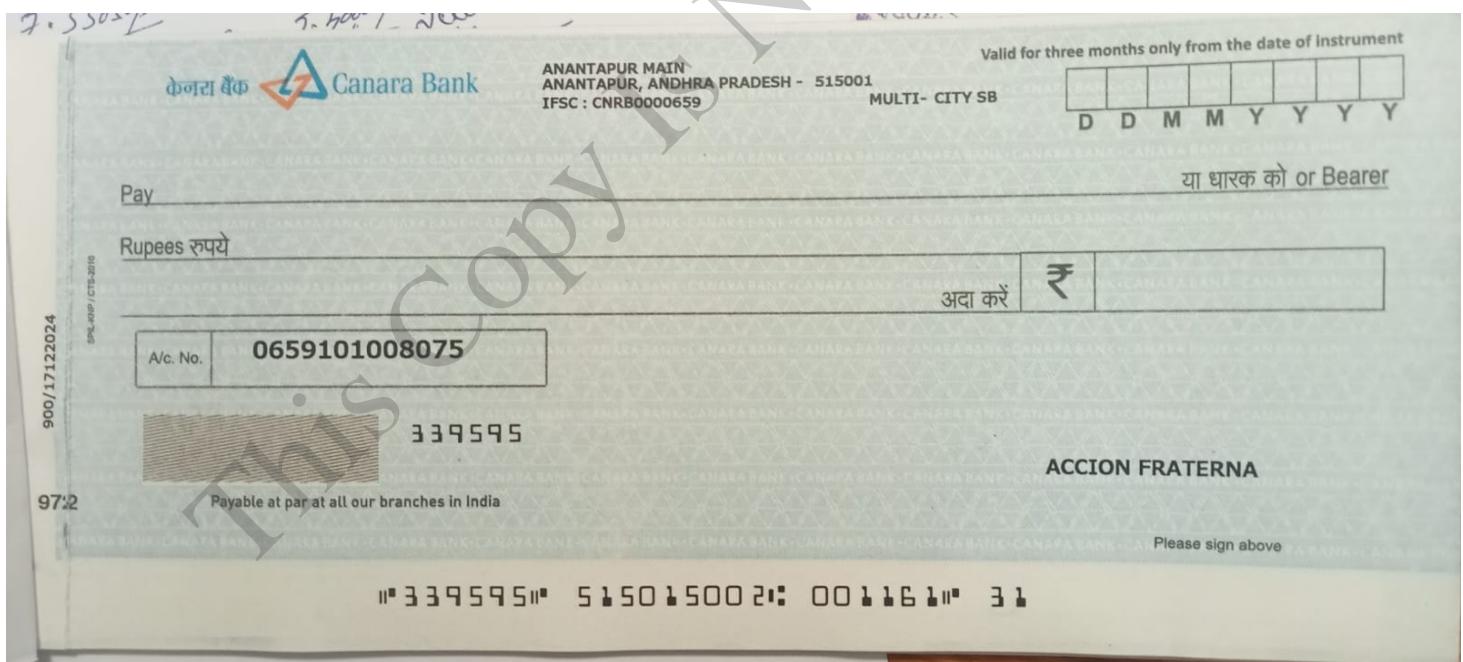
S. No.	Name	Date of Birth	Status	Father's Name	Residential Address	Position Date
1	Mr. YARAGONDA VENKATA MALLA REDDY	01/07/1954	DIRECTOR	YARAGONDA HARI NARAYANA REDDY	AF ECOLOGY CENTRE QUARTER NO.9 UPPARAPALLI ROAD ANANTAPUR 515002	29/06/1982

Date:

**ANNEXURE - I****Details of Branches of the Establishment****ANNEXURE - II****List of Branches having Separate/ Sub Code Number****ANNEXURE - III****Details of Bank Account Number**

S No.	IFSC CODE	BANK NAME	BRANCH NAME	ACCOUNT NO	ACCOUNT TYPE	PRIMARY ACCOUNT
1	CNRB0000659	CANARA BANK	ANANTAPUR	0659101008075	SAVING	YES

**Copy of cheque of the primary account number : 0659101008075**



## SPECIMEN SIGNATURE CARD

To be submitted with all documents after the Code number is allotted through the online

FULL NAME OF THE AUTHORISED SIGNATORY \_\_\_\_\_

Name of Establishment : ACCION FRATERNA

Address of the Establishment : BANGALORE HIGHWAY, ANANTAPUR, ANANTAPUR, ANANTAPUR, ANDHRA PRADESH - 515002

Code Number of the : GRCDP0054677000

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

# *Strike whichever is not applicable*

SPECIMEN SIGNATURE 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

SPECIAL INSTRUCTION, IF ANY \_\_\_\_\_

SPECIMEN SIGNATURE OF Mr/Ms \_\_\_\_\_

Signature of employer \_\_\_\_\_

Name of Employer \_\_\_\_\_

Designation of Employer \_\_\_\_\_

Seal of Establishment \_\_\_\_\_ Mobile number \_\_\_\_\_

[ ] Please tick if "Not Applicable" due to upload of digital signature

To be submitted separately for each Authorised Officer, if more than one.

Not to be submitted in this format if the employer after allotment of code number has uploaded digital signatures of the Authorised signatories.

In such case the letter generated from the portal after uploading the digital signature(s) to be sent.

In case of upload of digital signature, when page (6) specimen signature card is not applicable, strike this, but keep as enclosure to the form 5A.