



FORM No 5A

Date : 18-Oct-2025

EMPLOYEES' PROVIDENT FUND SCHEME 1952 (Please refer Para 36A)
EMPLOYEES' PENSION SCHEME 1995 (Please refer Para)
EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME 1976 (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 1708549335.]

Code Number : HPSML0011643000

1. Name of Establishment : ARMY PUBLIC SCHOOL
2. Code Number of the Establishment under EPF : HPSML0011643000
3. Postal address of the Establishment and its branches : DAGSHAI, SOLAN, SOLAN, SOLAN, HIMACHAL PRADESH - 173210
4. Industry or business in which : SCHOOL
5. Date of commencement of business : 01/06/1986
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 | Ms. RITAMBRA GHAI | 17/02/1977 | PRINCIPAL | SHRI PRIYA BHARAT GHAI | H NO 32, PARTAP GARH, JAMMU | 20/03/2023 |

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 | Ms. RITAMBRA GHAI | 17/02/1977 | PRINCIPAL | SHRI PRIYA BHARAT GHAI | H NO 32, PARTAP GARH, JAMMU | 20/03/2023 |

Date:

Application Number : 1708549335

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ANNEXURE - I

Details of Branches of the Establishment

ANNEXURE - II

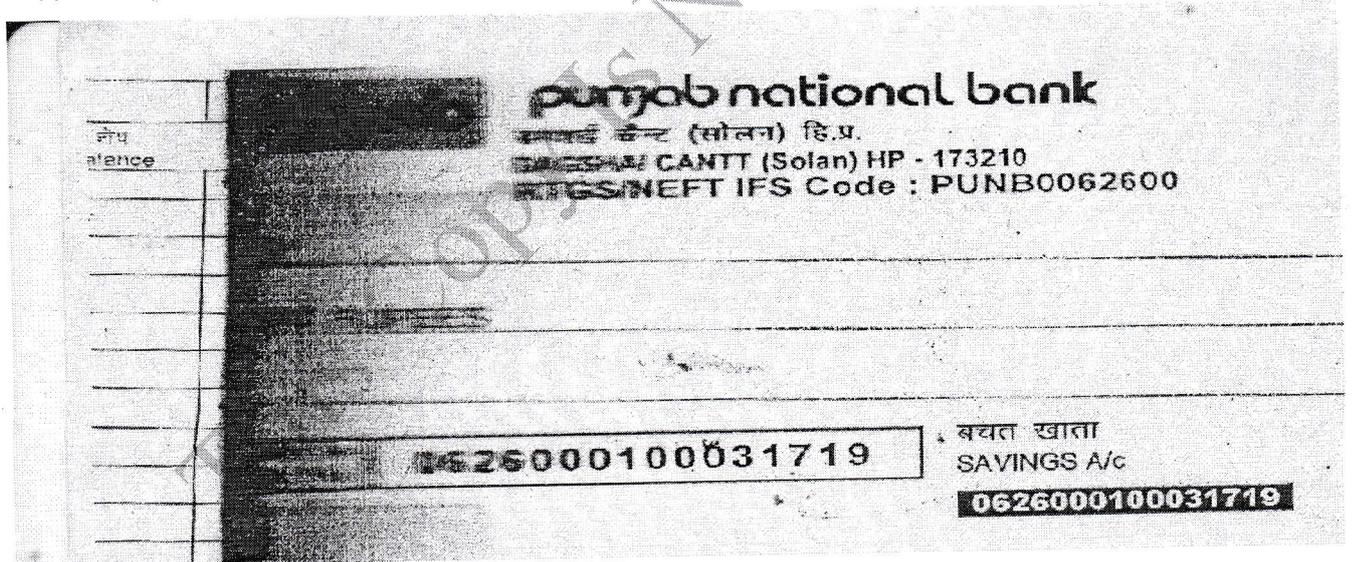
List of Branches having Separate/ Sub Code Number

ANNEXURE - III

Details of Bank Account Number

| S No. | IFSC CODE | BANK NAME | BRANCH NAME | ACCOUNT NO | ACCOUNT TYPE | PRIMARY ACCOUNT |
|-------|-------------|----------------------|----------------------------|------------------|--------------|-----------------|
| 1 | PUNB0062600 | PUNJAB NATIONAL BANK | DAGSHAI, DISTT. SOLAN (HP) | 0626000100031719 | SAVING | YES |

Copy of cheque of the primary account number : 0626000100031719



SPECIMEN SIGNATURE CARD

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

FULL NAME OF THE AUTHORISED SIGNATORY Col Vikram Mayne

Name of Establishment : ARMY PUBLIC SCHOOL

Address of the Establishment : DAGSHAI, SOLAN, SOLAN, SOLAN, HIMACHAL PRADESH - 173210

Code Number of the : HPSML0011643000

STATUS OF THE SIGNATORY : # EMPLOYER / AUTHORISED SIGNATORY

Strike whichever is not applicable

SPECIMEN SIGNATURE 1. [Signature]
2. [Signature]
3. [Signature]

Bursar
Army Public School
Dagshai-173210 (H.P.)

SPECIAL INSTRUCTION, IF ANY _____

SPECIMEN SIGNATURE OF Mr/Ms [Signature]

Signature of employer [Signature]

Name of Employer Mrs. Ritambra Chai

Principal Designation of Employer

Mobile number 8722888818



Seal of Establishment

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

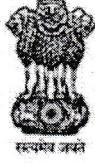
To be submitted separately for each Authorised Officer, if more than one.

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.

This Copy is Not For Use



कर्मचारी भविष्य निधि संगठन
Employees Provident Fund Organisation

श्रम एवं रोजगार मंत्रालय, भारत सरकार
MINISTRY OF LABOUR & EMPLOYMENT, GOVERNMENT OF INDIA
मुख्यकार्यालय/ HEAD OFFICE



एन.बी.सी.सी. सेंटर, ब्लॉक-2, ग्राउंड फ्लोर- 4th फ्लोर, ईस्ट किडवाई नगर, नई दिल्ली -110023
NBCC Centre, Block-2, Ground Floor- 4th Floor, East Kidwai Nagar, New Delhi-110023
Website: www.epfindia.gov.in, www.epfindia.nic.in

No. Compliance/U/P78/2022/Advocacy/ 55643/ 13178

Dated: 06/10/2022

07 OCT 2025

ORDER

In the matter of : Issue of direction under Para 78(3) of the Employees' Provident Funds Scheme, 1952 for proper implementation of the Scheme.

In pursuance of the directions issued by the Central Government (the Ministry of Labour & Employment, Govt. of India) under Para 78(1) of the Employees' Provident Funds Scheme, 1952, I, Ramesh Krishnamurthi, Central Provident Fund Commissioner, hereby issue the following directive in exercise of powers conferred under Para 78(3) of the said Scheme :

Employers of establishments covered under the Act are directed to ensure prominent display of the extract of Form 5A at the entrance of the establishment OR on the website along with mobile application of the establishment.

- i. <EPF Code>
 - ii. <Registered Name>
 - iii. <Date of Coverage>
 - iv. <No. of Branches>&<Primary Branch Address>
 - v. <Regional Office>
2. Employers of the establishments are requested to ensure compliance to above noted directions within 15 days of issue of this order.
3. Non-compliance with the directions noted herein above, may attract appropriate legal action under Employees' Provident Funds & Miscellaneous Provision Act, 1952 and the Schemes framed thereunder.

Ramesh Krishnamurthi

(Ramesh Krishnamurthi)
Central Provident Fund Commissioner