

**APPLICATION FOR THE ENROLLMENT OF GOVERNMENT SERVANTS IN THE
SCHEMES OF L.I.C / N.I.C AS NEW SUBSCRIBER**

--oOo--

D.D.O Code :

Date :

1. Name of the Govt. Servant :
2. Designation :
3. Department in which serving :
4. GPF Account No. / PRAN No. :
5. Date of Appointment :
6. Date of Birth :
7. Date of Superannuation :
8. Amount of sum assured :
(Put \checkmark mark in relevant box)

UNDER LIC

- Group 'A' – ₹.75,000/-
 Group 'B' – ₹.60,000/-
 Group 'C' – ₹.40,000/-
 Group 'D' – ₹.25,000/-

UNDER NIC

- ₹.1,00,000/-
for all group

SIGNATURE OF GOVERNMENT SERVANT

CERTIFICATE

I hereby authorize the pay Drawing Officer to deduct the insurance premium from my pay and allowances for Group Insurance Schemes for Government Servants every month, including the additional cover for death and total permanent disability.

SIGNATURE OF GOVERNMENT SERVANT

NOMINATION

I, _____ working as _____ in the _____ Department, Government of Pondicherry, hereby nominate Thiru/Tmt/Selvi _____ (indicate also the relationship) _____ to receive the insurance amount in the event of my death while in service.

SIGNATURE OF GOVERNMENT SERVANT

N.B. : Contract employees, persons on deputation from Central/ State Govt., Public Sector Undertakings or other Autonomous Organisations, Casual Labourers, Part-time and Ad-hoc employees will not be covered by the Schemes.