

PRE-RECEIPT

1. Received from Secretary, Naval Group Insurance Fund, New Delhi a sum of Rs. _____ (Rupees _____) being the death insurance benefits admissible to me under Post Retirement Death Insurance Extension Scheme-82 consequent upon death of my husband/son _____ as per the details given below.

2. I hereby certify that I have not received any payment earlier.

3. It is requested that the said amount be sent to my bankers :-

Bank Name & Address

.....

.....

Account No

IFS Code of the bank

(Cancelled cheque enclosed)

Signature of Beneficiary _____

(To be signed over one rupee revenue stamp)

Mobile No. _____

Name : _____

Tele No. _____

/o Late _____

E-mail ID (if any) _____

P.No. _____

Date :

Address _____

II

Signature and name with stamp attested by
Zila Sainik Board/CRSO/Gazetted Officer

Note : Please enclose self attested copy of PPO, ID proof and cancelled cheque leaf of your above account **or** a copy of Bank Passbook duly attested by Bank Manager

TO BE SUBMITTED ON NON-JUDICIAL STAMP PAPER OF APPROPRIATE VALUE DULY EXECUTED IN PRESENCE OF 1ST CLASS MAGISTRATE/ OR NOTARY PUBLIC

AFFIDAVIT

I wife/ husband/ father/ mother of late do hereby take oath and state as under :-

1. That who
(Name of the late officer/ sailor)
was a member of Naval Post Retirement Death Insurance Extension Scheme 1982 expired on due to

2. That late officer/ sailor was my (relationship) and had nominated me as a nominee to receive the insurance benefits if and when the claim arose.

3. That I am the same person as nominated by the late officer/ sailor and indicated in the insurance certificate.

DEPONENT

VERIFICATION

I, the above named deponent do hereby verify that the contents of the above affidavit are true to my knowledge.

Verified at on the day of

DEPONENT

INDEMNITY BOND

1. This Bond is made on between
W/o, M/o, D/o, S/o, F/o late
(herein after called Principal Party) and the Secretary Naval Group Insurance Fund,
Integrated Headquarters, Ministry of Defence (Navy), New Delhi (herein after called
Second Party).

2. Whereas has lost his
original Insurance Certificate No. Issued to him by the Secretary,
Naval Group Insurance Fund, Integrated Headquarters, MoD(Navy), New Delhi/ The
Officer-in-Charge, Release Centre, Mumbai on behalf of Naval Group Insurance
Fund, New Delhi. On reporting the loss, the Secretary, Naval Group Insurance
Fund, IHQ MoD(Navy), New Delhi vide their letter No. dated
..... has agreed to issue a duplicate Insurance Certificate to the first
party subject to furnishing an Indemnity Bond.

3. Now, this bond witness that in consideration of the issue of duplicate
Insurance Certificate by second party, the said first party bind herself/himself to pay
the damage etc in the case a claim is made on the basis of original Insurance
Certificate by anybody else. Further, in consideration of the premises, the said first
party undertake for himself, his heirs, executors and administrators to hold the
Second Party, its agents, servants etc harmless & indemnity in respect of all claims
to the aforesaid claim/certificate.

4. In witness thereof, the First Party, hereto has signed the bond.

Signature _____
Principal Party/First Party

Witnessess with address :-

1. _____

2. _____

Attested

1st Class Magistrate/Notary Public