FORM-A

NOMINATION FOR DEATH CUM RETIREMENT GRATUITY

(When the Govt. servant has a family and wishes to nominate one member of more than one member thereof)

I hereby nominated the person(s) mentioned below who is/are member of my family and confer on him the right to receive any gratuity that may be sanctioned by Govt. in the event of may death while in service and the right to receive on my death any gratuity which having become admissible to me on retirement may remain up paid my death.

S No.	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Contingencies on happening of which the nomination Invalid	Name & Address relationship of person, if any, to whom the right conferred of the nominee shall pass in the event of his predeceasing the officer of the nominee dying after death of the officer but before receiving payment of the gratuity. Servant	Amount, of share of the gratuity of each
1	2	3	4	5	6	7
				Death/ Divorcé and Insanity		

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this_____day of _____2015 at Delhi.

Signature of Two witness:-

1. Signature_____ 1. Signature_____

2. Full Name_____ 2. Full Name_____

3. Address_____ 3. Address _____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

ANNEXURE A-II

NOMINATION FOR BENEFITS UNDER THE DELHI POLICE MUTUAL WELFARE SCHEME.1990

(When the Govt. servant has a family and wishes to nominate one member of more then one member thereof)

I_____Rank_____No._____
(NAME IN BLOCK LETTERS)
Father's Name _____herby nominate the person /persons (NAME IN BLOCK LETTERS)
mentioned below , who is /are members of my family , and confer on him /them the right to receive to the extent specified below any amount that may be sanctioned by the President under the Delhi Police Mutual Welfare Scheme -1990.In the event of my Death while in service or which having become payable on my attaining the age of superannuation may remain unpaid my death .

S No.	Name & address or nominee /nominees	Relationship with Govt. Servant	Age	Share to be paid to each	Contingencies on happening of which the nomination invalid	Name & Address relationship of person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. Servant.
1	2	3	4	5	6	7
					Death/ Divorcé and Insanity	

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this_____day of _____2015 at Delhi.

Signature of Two witnesses:-

1. Signature_____ 1. Signature_____

2. Full Name_____ 2. Full Name_____

3. Address_____ 3. Address_____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

ANNEXURE-"A"

(REFFERED TO IN (1) OF S.O. NO. 421/2013

I_____ Rank _____ No._____ PIS No._____ hereby declare that I voluntarily with to enroll as a member of the Delhi Police Martyrs' Fund and agree to subscribe towards this Martyrs' Fund at the rate as decided by the governing body of the Martyr' Fund from time to time. One day gross salary may be deducted from pay. I shall be bound by the rules and regulation of the Martyrs' Fund.

Signature of the Applicant.

VERIFIED

Accountant/_____/Distt/Unit

ATTESTED

ACP/DDO/_____Distt./Unit

FORM-B

NOMINATION FOR BENEFITS UNDER THE UNION TERRITORY GOVT. EMPLOYEES GROUP INSURANCE SCHEME-1984

(When the govt. servant has a family and wishes to nominate the member of more then one member thereof)

I,_____hereby nominated the person mentioned below who is/are member of my family and confer on him/them they rights to receive to the extent specified below any amount that may be sectioned by the Union Territory Govt. Administrations under the Union Territory Govt. Employees Group Insurance Scheme ,1984 in the event of my death while in service or while having become payable on my attaining the age of superannuation may remain paid at my death .

S No.	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Share to be paid to each	Contingencies on happening of which the nomination invalid	Name & Address relationship of person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. Servant.
1	2	3	4	5	6	7
					Death/ Divorcé and Insanity	

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this_____day of _____2015 at Delhi.

Signature of Two witnesses:-

1. Signature_____ 1. Signature_____

2. Full Name_____ 2. Full Name_____

3. Address_____ 3. Address_____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.

NOMINATION FOR GENERAL PROVIDENT FUND

(When the Govt. servant has a family and wishes to nominate one member of more then one member thereof)

I_____, hereby nominate the person mentioned below , who is /are members of my family ,as confined in Rule-2 of the General Provident Fund (Central Services) Rule,1960 to receive the amount that may stand to my credit in the fund in the event of my death before that amount has become payable for having become payable has not been paid

S.No	Name & address of nominee /nominees	Relationship with Govt. Servant	Age	Share to be paid to each	Contingencies on happening of which the nomination Invalid	Name & Address relationship\ of person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. Servant
1	2	3	4	5	6	7
					Death/ Divorcé and Insanity	

N.B : The Govt. Servant should draw line across the blank space below the last entry to prevent insertion of any name after the signed.

Date this_____day of _____2015 at Delhi

Signature of Two witness:-

1. Signature_____

2. Full Name_____

3. Address_____

1. Signature_____

2. Full Name_____

3. Address _____

Signature of Govt. Servant

ACCEPTED

Asstt. Commissioner of Police
Crime, Delhi.